

## **New international recommendations for managing food allergies in childcare centres and schools.**

**HAMILTON, ON (5 May 2021)**

An international panel of food allergy experts and stakeholders has published evidence-informed recommendations for managing food allergies in childcare centres and schools.

Published today in the [\*Journal of Allergy and Clinical Immunology\*](#), the research offers guidance for personnel training, stock epinephrine, food restrictions, and other interventions aimed at managing the risk of allergic reactions to food.

“The management of food allergy is a sensitive topic,” says Dr. Susan Waserman, an allergist and professor of medicine at McMaster University, who chaired the guidelines panel. “This study aims to provide the best available evidence to inform school policies and practices to protect allergic children from accidental exposure to food allergens.”

The 22-member advisory panel included allergy specialists; primary care and nursing professionals; school administrators and personnel; parents of children with and without food allergy; and members of community food allergy associations.

The panel conducted a systematic literature review to collect data on the impact of select interventions – such as food restrictions, training of school personnel, and stocking of epinephrine – on preventing and managing allergic reactions to food in childcare centres and schools. The team also collected and synthesized data on the resource requirements, feasibility, and acceptability of these interventions across stakeholder groups. Members of the panel evaluated the evidence and developed recommendations for or against each intervention.

“Overall, our analysis found that the magnitude of risk of a severe or fatal allergic reaction to food in childcare centers and schools was low, which is encouraging,” says Dr. Waserman.

The authors state that due to the lack of high-quality evidence available in the literature, the recommendations are rated “conditional” and policymakers are encouraged to adapt the guidance to fit their local circumstances.

The guidelines conditionally recommend that childcare centers and schools provide food allergy training for personnel; implement allergy action plans and protocols; and use epinephrine to treat anaphylaxis. They further recommend that stock unassigned epinephrine autoinjectors (EAI) be made available to treat anaphylaxis on site, rather than requiring allergic students to provide their own (EAI).

“We also suggest that childcare centres and schools do not prohibit specific foods or establish allergen-restricted zones, such as a ‘nut-free classroom’ or ‘milk-free table’,” adds Dr. Waserman. “However, it may be appropriate to implement allergen-restricted zones in situations where students lack the developmental capacity to self manage.”

“While more research is needed, we believe these evidence-based recommendations will help to guide parents, teachers, school board officials, students, and policymakers involved in discussions or decision-making about the food allergy policies of schools in their communities.”

The guidelines were developed with support from the Allergy, Genes and Environment (AllerGen) Network and have been endorsed by AllerGen’s partner the Canadian Society of Allergy and Clinical Immunology (CSACI).

**About AllerGen Inc.**

[AllerGen Inc.](#) is a not-for-profit national research network and former federally funded Networks of Centres of Excellence (NCE) dedicated to improving the quality of life of people suffering from allergic and related immune diseases. Funded by the Government of Canada from 2005 to 2019, AllerGen is hosted at McMaster University in Hamilton, ON.

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