



Peanut allergy

Peanut allergy, like all other food allergies, is a rapid adverse reaction that occurs when a person's immune system responds inappropriately to the proteins in peanuts or a food containing peanut derived ingredients. Refined peanut oil is the exception; it is considered allergen free because the processing removes all detectible protein and, therefore, it is not required to be labeled allergenic according to the FDA's food allergen labeling and consumer protection act (FALCPA) of 2004.

To cause a serious reaction, peanut proteins must come into contact with mucous membrane, be ingested or enter the body in some way. Simply smelling the aroma of peanuts, however, does not cause an allergic reaction. Aroma is created by volatile compounds, not proteins, which are responsible for allergic reactions. However, ingesting peanut protein may cause anaphylaxis, a serious condition that can become life-threatening.

Food allergy reactions are unpredictable and may be mild and self-limiting, but some have the potential to become life threatening (anaphylaxis). It is estimated that 1% to 2% of the population in most Western countries is affected by peanut allergy.¹ In the United States, the prevalence of childhood peanut allergy is reported to have tripled between 1997 and 2010, from 0.4% to 1.4%, but this is self-reported rather than clinically diagnosed by a physician so may be unreliable.² According to a report by the National Academies of Sciences, Engineering, and Medicine called Finding a Path to Safety in Food Allergies, there is no estimate of true food allergy prevalence in the U.S.³

- Peanut allergy is typically diagnosed in early childhood.
- Children with egg allergy and eczema seem to be more at risk as these and food allergies are all "atopic" conditions.
- Approximately 1 in 5 peanut allergic children seem to "outgrow" their allergy, but which ones cannot be predicted.
- Peanut allergy onset in adults is unusual.
- There can be a large overlap between peanut allergy and allergy to tree nuts (such as almonds, walnuts, cashews or hazelnuts) and foods like sesame and lupin.

¹ Boyce JA et al, 2010. "NIAID Sponsored Expert Panel. Guidelines for the diagnosis and management of food allergy in the United States: report of the NIAID-sponsored expert panel". J Allergy Clin Immunol:126 (6) (suppl): S1-S58.

² Sicherer SH et al 2010. "US prevalence of self-reported peanut, tree nut, and sesame allergy: 11-year follow-up". J Allergy Clin Immunol. 2010;125(6):1322-1326.

³ National Academies of Sciences, Engineering, and Medicine Expert Panel. Finding a Path to Safety in Food Allergies. 2017. Available at <https://www.nap.edu/catalog/23658/finding-a-path-to-safety-in-food-allergy-assessment-of>. Accessed February 26, 2018.

- Different countries have different allergen labeling requirements.

Precautionary guidance in North America and Europe advising pregnant and breast feeding women to avoid consuming peanuts was withdrawn around 2009. It should no longer be followed. The evidence does not support avoiding allergens during pregnancy, breastfeeding, or early infant feeding as a means to avoid the development of food allergies.

In 2017, based on the latest peanut allergy prevention research, the National Institute of Allergy and Infectious Diseases issued its [Addendum guidelines for the prevention of peanut allergy in the United States](#), recommending early introduction to peanuts in a safe and evidence-based way to lower the risk of a child ever developing peanut allergy.⁴

Based on its own systematic review of the scientific evidence, the U.S. Food & Drug Administration said it would allow the following [manufacturer health claim](#):

For most infants with severe eczema and/or egg allergy who are already eating solid foods, introducing foods containing ground peanuts between 4 and 10 months of age and continuing consumption may reduce the risk of developing peanut allergy by 5 years of age. FDA has determined, however, that the evidence supporting this claim is limited to one study.⁵

The National Peanut Board has provided [“5 Stress-Free Ideas to Introduce Peanut to Infants.”](#) However, infants with severe eczema and/or egg allergy should be evaluated by the infant’s healthcare provider before feeding foods containing ground peanuts.

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The U.S. peanut industry supports programs to manage food allergies associated with peanuts. For example, the US peanut industry:

- Supports scientific research on effective measures which may reduce or even eliminate peanut allergy in the future. U.S. farmers have funded more than \$22 million in allergy research and education.
- Works collaboratively with Food Allergy Research & Education (FARE), the Food Allergy & Anaphylaxis Connection Team (FAACT), the European Academy of Allergology and Clinical Immunology (EAACI) and other allergy organizations to support their efforts on education and outreach to food allergic individuals and food allergic consumer-led organizations.

⁴ Togias, Alkis MD, et al 2017. “Addendum guidelines for the prevention of peanut allergy in the United States: report of the National Institute of Allergy and infectious Diseases – sponsored expert panel.” *Annals of Allergy, Asthma & Immunology*. February 2017 Volume 118, Issue 2, Pages 166-173.e7.

⁵ U.S. Food & Drug Administration. September 7, 2017. “FDA Acknowledges Qualified health Claim Linking Early Peanut Introduction and Reduced Risk of Developing Peanut Allergy.” <https://www.fda.gov/food/newsevents/constituentupdates/ucm575001.htm>

⁶ Frazier AL, et al 2014. “Prospective Study of Peripregnancy Consumption of Peanuts or Tree Nuts by Mothers and the Risk of Peanut or Tree Nut Allergy in Their Offspring”. *JAMA Pediatrics* 168(2):156-162.

- Adheres to Food Allergen Labeling and Consumer Protection Act product labeling so consumers can make informed choices about the products they eat.
- Advocates Good Manufacturing Practices, Hazard Analysis Critical Control Points initiatives and comprehensive employee training and education designed to prevent cross contact during the manufacturing process.
- Advocates the carrying of and education about self-injectable adrenaline (epinephrine) for food allergic individuals and supports educational efforts to encourage their wide availability
- Encourages allergy-safe management policies in schools, catering establishments and food vending operations, including clear and accurate allergen labeling on all products

For the vast majority of consumers, of course, peanuts and peanut butter are healthy food choices rich in nutrients including protein, fiber, vitamins and minerals. For more information on all of these topics see www.peanutsusa.com/food-safety/allergy-information.html

Approved x-xx-2018. For further information, please contact the American Peanut Council office in Alexandria, Va. at: Tel: 703-838-9500; email: info@peanutsusa.com.

Disclaimer: This statement is not intended as a substitute for expert medical advice and is believed to be correct at the time of publication. The American Peanut Council recommends anyone wishing to find out more about food allergies to make contact with one of the specialist food allergy organizations.