**Patient Tip Sheet on Anaphylaxis: Allergic Emergencies**

Anaphylaxis is a rare, but potentially fatal allergic reaction, that requires immediate attention and treatment. If you have a history of allergies and/or asthma and have had a severe reaction, you are at greater risk for anaphylaxis and education is one of the most important steps you can take to manage your condition.

The American College of Allergy, Asthma and Immunology (ACAAI) suggests the following tips:

1. **Know your trigger.** If you've had anaphylaxis, it's very important to know what triggered the reaction. An allergist can review your medical history and, if necessary, conduct diagnostic tests. The most common triggers are:
   - **Food** including peanuts, tree nuts such as walnuts and pecans, fish, shellfish, cow's milk and eggs.
   - **Latex**, found in disposable gloves, intravenous tubes, syringes, adhesive tapes and catheters. Health care workers, children with spina bifida and genitourinary abnormalities and people who work with natural latex are at higher-risk for latex-induced anaphylaxis.
   - **Medication** including penicillin, aspirin and non-steroidal anti-inflammatory drugs such as ibuprofen, and anesthesia.
   - **Insect sting**, with bees, wasps, hornets, yellow jackets and fire ants being the most likely to trigger anaphylaxis.

2. **Avoid your trigger.** Avoidance is the most effective way to prevent anaphylaxis. An allergist can work with you to develop specific avoidance measures tailored specifically for your age, activities, occupation, hobbies, home environment and access to medical care. Here are some general avoidance techniques for common triggers:
   - **Food allergies.** Be a label detective and make sure you review all food ingredient labels carefully to uncover potential allergens. When eating out, ask the restaurant how food is prepared and what ingredients are used. If you have a child with a history of anaphylaxis, it’s imperative to make sure that school personnel are informed of the child's condition and a treatment plan is provided, including the administration of epinephrine.
   - **Latex.** Before having any medical-surgical-dental procedure, it's important to inform your doctor about your condition and make sure that the procedure is performed in a latex-safe environment. If possible, request that you be the first procedure for the day to further limit possible exposure. Health care workers who have a latex allergy should wear non-latex and powder-free gloves and have colleagues do the same.
   - **Medications.** Make sure all of your doctors are aware of any reactions you've had to medications so that they can prescribe safe alternatives and alert you to other medications you may need to avoid. If there are no alternative medications, you may be a candidate for desensitization, a treatment that introduces a small dose of the medication you are allergic to. As your body becomes more tolerant to the medication, the dosage can be increased over time. While the treatment is effective, it's only temporary and must be repeated if the medication is needed again in the future.
   - **Insect stings.** To help prevent stinging insects, avoid walking barefoot in grass, drinking from open soft drink cans, wearing bright colored
clothing with flowery patterns, sweet smelling perfumes, hairsprays and lotion during active insect season in late summer and early fall. An allergist can also provide a preventive treatment called venom immunotherapy (or venom allergy shots) for insect sting allergy. The treatment works by introducing gradually increasing doses of purified insect venom, and has been shown to be 90 percent to 98 percent effective in preventing future allergic reactions to insect stings.

3. **Be prepared.** Prompt recognition of the signs and symptoms of anaphylaxis is critical. If you unexpectedly come into contact with your trigger, you should immediately follow the emergency plan outlined by your doctor including the self-administration of epinephrine. If there is any doubt about the reaction, it is generally better to administer the epinephrine.

4. **Seek treatment.** If a severe reaction does occur and epinephrine is administered, you should be transported to the nearest emergency facility by ambulance for additional monitoring.

5. **Tell family and friends.** Family and friends should be aware of your condition, your triggers and know how to recognize anaphylactic symptoms. If you carry epinephrine, alert them to where you keep it and how to use it.

6. **Wear identification.** Wear and/or carry identification or jewelry (Medic Alert bracelet or necklace) noting condition and offending allergens. Medic Alert (888-633-4298 or [www.medicalert.org](http://www.medicalert.org)) provides identification and medical information in emergencies and includes a 24-hour emergency response service.

7. **See a specialist.** Allergists have the training and expertise to review your allergy history, conduct diagnostic tests, review treatment options and teach avoidance steps. Consultation with a specialist is recommended if you:
   - are unsure if you have had anaphylaxis
   - experience recurring symptoms or symptoms that are difficult to control
   - need additional assistance in managing your condition
   - require additional tests to determine the cause of your reactions
   - are a candidate for desensitization or immunotherapy
   - require daily medication
   - need intensive education on avoidance and management
   - have other conditions that complicate your anaphylaxis and its treatment

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