



LAUNCESTON CHRISTIAN SCHOOL

LCS ALLERGIES AND ANAPHYLAXIS MANAGEMENT POLICY

Important Note

A series of valuable discussion and information documents have been provided by [Allergy and Anaphylaxis Australia](#) and will be added as a booklet to the LCS Policy Register as well as it being published as part of the LCS Staff Handbook. This booklet needs to be read in conjunction with this policy.

Created: May 2013

Rationale

Launceston Christian School has a small number of students who suffer from severe allergic reactions and anaphylaxis. It is the school's duty to provide an understanding of the threat and to manage it to the best of our ability.

Background Information

What is Anaphylaxis?

Anaphylaxis is the most severe form of allergic reaction and is potentially life threatening.

It must be treated as a medical emergency, requiring immediate treatment and urgent medical attention.

Anaphylaxis is a generalised allergic reaction, which often involves more than one body system (e.g. skin, respiratory, gastro-intestinal, cardiovascular). A severe allergic reaction usually occurs within 20 minutes of exposure to the trigger and can rapidly become life threatening.

Common triggers of anaphylaxis include:

Food

Milk, eggs, peanuts, tree nuts, sesame, fish, shellfish, wheat and soy are the most common food triggers, which cause 90% of allergic reactions, however, any food can trigger anaphylaxis. It is important to understand that even small amounts of food can cause a life-threatening reaction.

Bites/stings

Bee, wasp and ant stings are the most common causes of anaphylaxis to insect stings.

Ticks and fire ants also cause anaphylaxis in susceptible individuals.

Medication

Medications, both over the counter and prescribed, can cause life threatening allergic reactions. Individuals can also have anaphylactic reactions to herbal or 'alternative' medicines.

Other

Other triggers such as latex or exercise induced anaphylaxis are less common and occasionally the trigger cannot be identified despite extensive investigation.

Signs and Symptoms

The signs and symptoms of anaphylaxis usually occur within the first 20 minutes to 2 hours after exposure. Rapid onset and development of potentially life threatening symptoms are characteristic markers of anaphylaxis.

Allergic symptoms may initially appear mild or moderate but can progress rapidly. The most severe allergic reactions involve the respiratory system (breathing) and/or cardiovascular system (heart and blood pressure).

Common Symptoms

Mild to moderate allergic reaction

- Tingling of the mouth
- Hives, welts or body redness
- Swelling of the face, lips, eyes
- Vomiting, abdominal pain

Severe allergic reaction- ANAPHYLAXIS

- Difficult/noisy breathing
- Swelling of the tongue
- Swelling or tightness in the throat
- Difficulty talking or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

Diagnosis

A person who is suspected of having a food allergy should obtain a referral to see an allergy specialist for correct diagnosis, advice on preventative management and emergency treatment.

Those diagnosed with severe food or insect allergy must carry emergency medication as prescribed as well as an Action Plan for Anaphylaxis signed by their doctor. Food allergic children who have a history of eczema and/or asthma are at higher risk of severe allergic reactions. Administration of adrenaline is first line treatment of anaphylaxis.

Management and Treatment

Anaphylaxis is a preventable and treatable event. Knowing the triggers is the first step in prevention.

Because accidental exposure is a reality, children and caregivers need to be able to recognise symptoms of an anaphylaxis and be prepared to administer adrenaline according to the individual's Action Plan for Anaphylaxis.

Research shows that fatalities more often occur away from home and are associated with either not using or a delay in the use of adrenaline.

In Australia, adrenaline can be purchased on the PBS in the form of auto injectors known as the EpiPen® and Anapen®. The adrenaline auto injectors are intramuscular injections that contain a single, pre-measured dose of adrenaline that is given for the emergency treatment of anaphylactic reactions. The devices are for use by lay people and is available in two doses and LCS will train staff periodically in the administering of epipen® injections.

Food Allergy Basics

A food allergy is an immune system response to a food protein that the body mistakenly believes is harmful. When the individual eats food containing that protein, the immune system releases massive amounts of chemicals, triggering symptoms that can affect a person's breathing, gastrointestinal tract, skin and/or heart.

Symptoms of food allergy can include; hives, swelling of the lips, face and eyes, swelling of the tongue, breathing difficulty, abdominal pain, vomiting or a sudden drop in blood pressure.

If left untreated, these symptoms can be fatal.

Currently, there is no cure for food allergy. Avoidance of the food is the only way to prevent a reaction.

Adrenaline is the first line treatment for severe allergic reactions and can be administered via an auto-injector called the EpiPen® or the Anapen®.

Policy Regarding Nuts

In order to provide a safe environment for students allergic to nuts, the School is promoting a nut-free environment. To protect students with allergies to peanuts and similar nut products no food containing nuts should be brought to school or used by the school.

The outsourced canteen operations of Launceston Christian School will be asked to take this policy into account and not prepare any food with nuts and/or to be sent to school.

Nut products are not to be used in catering and or Food Studies.

Products that contain nuts include Peanut Butter, Nutella, fruit and nut bars, chocolate and any other products that have nuts listed in their ingredients. This does not include products that contain the warning “may contain traces of nuts”.

Whilst it is not possible to guarantee that nut products will not be in the school due to the large numbers bringing food for their recess and lunch the School requests its community to make every effort to support this policy so as to ensure the safety and wellbeing of all students.

Students are to ensure they do not swap or share food and drinks. Parents of students with an allergic reaction to nuts are to inform the School prior to commencement and play a key part in the development of an action plan for their child.