

Children with food allergies seen faster under new paediatric model

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Children with food allergies are seen 10 months sooner and have fewer allergic reactions when treated by a paediatrician in their own community, a new study shows.

The trial, led by the Murdoch Children's Research Institute (MCRI) and published in *Allergy: European Journal of Allergy and Clinical Immunology*, saw specially trained paediatricians working in community clinics, where they could provide front-line [allergy](#) treatment and management advice. Children with three or fewer suspected [food](#) allergies took part in the trial while those with suspected anaphylaxis (a more severe type of food allergy) or more than three food allergies were excluded.

The trial resulted in faster assessment times, was more acceptable to families, and delivered similar quality of allergy care to specialist hospital-based clinics.

Based on these results, the trial team is calling for investment in a larger program to train community paediatricians, especially in regions where there are no child allergy specialists.

Lead author, MCRI's Professor Harriet Hiscock, said 63 per cent of those seen by a [paediatrician](#) in the community were treated without needing an allergist referral, freeing up valuable hospital resources.

"As rates of food allergy rise, specialist allergy services are valiantly

struggling to manage demand, but waiting times to access these services are long," Professor Hiscock said.

"In many regions around Australia, allergy care is primarily delivered by allergists, due to limited allergy training opportunities for general pediatricians and primary care physicians."

Research shows 10 per cent of infants and 4 to 8 per cent of [children](#) have a proven food allergy in Australia, a five-fold increase in the past decade.

Professor Hiscock said the study, which involved children aged 0-12 years, was the first to evaluate this community-based approach. A key component of the program is providing specialised allergy training to general pediatricians.

The study found out of the 115 participants in the community group, 81 per cent saw a pediatrician by 12 months. This compared to 28 per cent of 181 patients who received care at the RCH Allergy Clinic. Of these, 60 per cent had not received an appointment at 12 months.

Time to assessment was also shorter, 2.4 months for a community paediatrician compared to 12 months for a hospital allergist.

Professor Hiscock said children in the community group reported fewer reactions to food and families were more satisfied with the overall process.

Researchers from The Royal Children's Hospital, the University of Melbourne and Montreal Children's Hospital also contributed to the findings.

More information: Harriet Hiscock et al, Improving timely access to

food allergy care: A pragmatic controlled trial, *Allergy* (2019). [DOI: 10.1111/all.14105](https://doi.org/10.1111/all.14105)

Provided by Murdoch Children's Research Institute

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