

Q&A: Bee sting allergy—here's what you need to know

September 22 2020, by From Mayo Clinic News Network



Honeybee (*Apis mellifera*) landing on a milk thistle flower (*Silybum marianum*).
Credit: Fir0002/Flagstaffotos/ Wikipedia/GFDL v1.2

DEAR MAYO CLINIC: I am 52 years old and recently experienced a severe reaction when I was stung by a bee. I do not have any other allergies and I do not recall having a reaction to a bee sting as a child. Is it normal to become allergic later in life? Is there anything I should do to protect myself from now on?

ANSWER: Although it's uncommon to develop an allergy over age 50, it can happen. People may develop new allergies at all stages of life. Having one severe reaction to a bee sting doesn't necessarily mean that you'll always have that reaction if you get stung again. But in a case like yours, it is important to consult an allergist to be evaluated, and, if appropriate, develop a plan for the future.

When you are stung by a bee, the bee jabs a barbed stinger into your skin that releases [venom](#). Flick the barb off with your fingernail or a credit card. Don't squeeze it, as that may inject more venom. Most of the time, symptoms of bee stings are minor and localized, involving burning pain and itching at the site of the sting, along with a red welt and slight swelling in that area. Typically, those symptoms can be eased with self-care steps, such as applying a cold compress to the area; taking an over-the-counter pain reliever; and applying hydrocortisone cream or calamine lotion to ease redness, itching and swelling. Mild symptoms of a bee sting usually disappear within a day.

Some people who get stung by a bee may have a stronger reaction, but one that doesn't signal a significant allergy. These moderate reactions may include symptoms such as redness, itching, pain and swelling at the site of the sting that then spreads to a larger area around the sting. It can take from about three to 10 days for moderate symptoms to fade away. If these symptoms don't respond to the self-care steps described above or if they are accompanied by fever, you should seek medical attention.

People who have an allergy to bee venom may experience [severe symptoms](#) when they're stung. These symptoms, collectively known as anaphylaxis, can include swelling, flushing and hives at the sting site, as well as on other areas of the skin that are not adjacent to the site. Systemic symptoms, such as nausea, vomiting, diarrhea, shortness of breath, wheezing, dizziness, lightheadedness and loss of consciousness, also can occur. These symptoms require emergency medical attention at

a hospital emergency department. It is important to call 911 if you experience these issues. If not treated promptly, anaphylaxis can be life-threatening.

Again, having one severe reaction to a bee [sting](#) does not mean you will experience that reaction if you get stung again. But you should speak to an allergist for a potential evaluation for a venom allergy, which can be done via a blood or skin test, or sometimes both.

The evaluation may include testing for other potential problems, too, to see if there might be another underlying issue that could have contributed to your reaction. An example of this is a disorder called [systemic mastocytosis](#), which can trigger symptoms similar to that of a bee venom [allergy](#).

Depending on the test results, you may be a candidate for venom immunotherapy. This treatment, involving a series of shots given regularly over several years, can desensitize you to bee venom and significantly reduce your risk of having another severe reaction. You also may be prescribed an epinephrine autoinjector to carry with you at all times. You can use these autoinjectors to relieve severe symptoms if you are stung again. In addition, your allergist can work with you to develop an allergic reaction action plan, so if you are stung again, you know what to do.

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Citation: Q&A: Bee sting allergy—here's what you need to know (2020, September 22) retrieved 2 May 2024 from <https://medicalxpress.com/news/2020-09-qa-bee-allergyhere.html>

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