

Up to 80% of children may develop allergies if both parents have them

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New data from London Medical Laboratory indicates around 40% of U.K. children have allergies and up to 80% of children with two allergic parents may develop them.

Its new data also suggests 1 in 10 U.K. children may suffer from potentially severe food allergies. It says parents must learn to spot early

symptoms and keep their schools informed.

The leading testing expert, Dr. Quinton Fivelman Ph.D., Chief Scientific Officer at London Medical Laboratory, says: "Looking at the results of our [allergy](#) tests, our finding that around 40% of children now have some kind of an allergy confirms figures reported by Allergy U.K. However, our finding that 1 in 10 children may have a specific food allergy is notably higher than Allergy U.K.'s 1 in 12 figure.

"Most significantly, our data also shows a potential link between children with allergies and those children's parents also having an allergy. It's not clear at this stage whether this is hereditary or because of a shared environment and lifestyle.

"We believe that parents should be particularly on the lookout for symptoms of potential allergies in their children if they themselves suffer from any. Our results indicate that the likelihood of a child with one allergic parent developing an allergy is between 30% and 50%, and the chances of a child with two allergic parents developing allergies is as high as 60–80%. London Medical Laboratory is not alone in finding this kind of link, it chimes closely with [research](#) published in the medical journal *Advances in Dermatology and Allergology*.

"While many [allergic reactions](#) are mild, some can lead to severe asthma attacks or even anaphylactic shock. Parents need to be aware of signs their children have allergies and keep their schools informed of these symptoms, especially in the case of food allergies.

"There are many possible potential allergens: things that most people have no reaction to, but a certain number do. They can lead to a food allergy, eczema, asthma, and hay fever. Common allergens for children include pollen, dust mites, pet fur, dairy and peanuts.

"Some of the foods that can prompt a reaction may be unexpected. That's why schools are always asking parents if their children have particular allergies. Some children (and adults) can be allergic to common foods such as mustard, parsley, carrots or kiwi.

"The good news is that children may actually grow out of some allergies, especially those to egg, milk and wheat. On the other hand, symptoms can grow more severe, and scientists don't fully understand the causes behind this yet.

"With most allergies, the first exposure sensitizes our body to a particular allergen, so that the second time we come into contact with particular foods, or are stung by a bee or wasp, for example, the reaction can be far worse. However, in children, the reaction to some allergens can escalate, either over time or, more rarely, quite suddenly.

"This is a list of symptoms that parents should be on the alert for as they may indicate their child has developed an allergy:

- A runny or blocked nose, sneezing and watering eyes
- An itching or tingling in the mouth
- A flushed face, hives, or a red and itchy rash (eczema) These usually show up on the face and torso first but can spread across the entire body
- Mild swelling, particularly of the lips, eyes and face. Watch for puffy lips as an early warning sign
- Sudden wheezing, or trouble breathing (this could be the start of anaphylaxis)
- Nausea and vomiting, tummy cramps and diarrhea (although these are also signs of food poisoning)

"For [peace of mind](#), and to ensure your child's school has all the information they need, it might be worth considering testing your

children for potential allergies.

"Formerly, many [children](#)'s allergies were only discovered by a traditional skin prick testing, in which a doctor or nurse puts a tiny bit of a liquid containing an [allergen](#) into the skin, by making a small scratch or prick. This is normally on the child's forearm or back. The allergist then waits to see if a red, raised bump (called a wheal) formed. If it is suspected the child might be allergic to more than one trigger, a number of these tests will be carried out.

"Today, there also exists a single simple finger prick blood test, usually performed by the parent, which will specifically identify the vast majority of potential allergies. For example, London Medical Laboratory's Allergy Complete is highly accurate, quick and simple to carry out at home, using a test sent through the post. It is the U.K.'s most comprehensive allergy test, analyzing 295 allergens, including well known potential food allergens, such as nuts, shellfish and eggs; and common foods less likely to trigger allergies but still known allergens, such as strawberries, mustard, carrots and avocado.

"Any parent discovering that their child might be at risk of a severe reaction will need to inform their doctor. Their child will probably be prescribed a pre-loaded adrenaline injection device such as an EpiPen. Again, it's very important to let your child's school know of any allergies discovered."

More information: For more details of the Allergy Complete blood test, see: www.londonmedicallaboratory.co.uk/uct/allergy-complete

Provided by London Medical Laboratory

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