Anaphylaxis and Schools

What are allergies?
An allergy is when the immune system reacts to substances (allergens) in the environment which are usually harmless (e.g. food proteins, pollen, dust mites).

What is anaphylaxis?
Anaphylaxis is a severe, often rapidly progressive allergic reaction that is potentially life threatening.

What causes anaphylaxis?
Anaphylaxis is most commonly caused by food allergies. Any food can cause an allergic reaction, however nine foods cause 90% of reactions in Australia, these are:
- peanuts
- tree nuts (e.g. hazelnuts, cashews, almonds)
- egg
- cow’s milk
- wheat
- soybean
- fish
- shellfish
- sesame

Other causes of anaphylaxis include:
- insect stings and bites
- medications
- latex

What are the signs and symptoms?
Symptoms of a mild to moderate allergic reaction include:
- swelling of the lips, face and eyes
- hives or welts
- tingling mouth
- abdominal pain or vomiting (these are signs of a severe allergic reaction to insects).

Symptoms of anaphylaxis (severe allergic reaction) watch for any one of the following:
- difficulty or noisy breathing
- swelling of the tongue
- swelling/tightness in the throat
- difficulty talking and/or a hoarse voice
- wheezing or persistent cough
- loss of consciousness and/or collapse
- young children may appear pale and floppy

Why is it important to know about anaphylaxis?
Avoidance of known allergens is crucial in the management of anaphylaxis. Schools need to work with parents/guardians and students to minimise exposure to known allergens. Knowledge of severe allergies will assist staff to better understand how to help students who are at risk of anaphylaxis.

How can anaphylaxis be treated?
Adrenaline given as an injection using an autoinjector (such as an EpiPen® or Anapen®) into the outer mid thigh muscle is the most effective first aid treatment for anaphylaxis. Adrenaline autoinjectors are designed so that anyone can use them in an emergency.

Parents/guardians should provide schools with an adrenaline autoinjector and ASCIA Action Plan for the student, which should be stored unlocked and easily accessible to staff. If a student is treated with an adrenaline autoinjector, an ambulance must be called immediately to take the student to a hospital.

How can anaphylaxis be prevented?
The key to the prevention of anaphylaxis is:
- knowledge of students who are at risk,
- awareness of known allergens, and
- prevention of exposure to known allergens.

Some students wear a medical warning bracelet to indicate allergies.
7 Steps to ‘allergy awareness’ in schools

1. Understand roles and responsibilities
   Parents/guardians and staff have important and differing roles and responsibilities in managing anaphylaxis in schools. These responsibilities need to be identified and communicated.

2. Determine what allergies you need to manage
   It is important to obtain medical information from parents/guardians about allergies and the risk of anaphylaxis. This information can be recorded using an Individual Anaphylaxis Health Care Plan.

3. Assess the risk of allergen exposure
   It is important to assess the likelihood of exposure to known allergens.

4. Minimise the risk of allergen exposure
   There are a range of practical strategies that schools can implement to minimise the risk. Strategies implemented by the school should be determined by what allergies the school needs to manage. Schools may like to develop a policy specific to their school community.

5. Train staff and plan emergency response
   Staff need to know how to recognise, treat and prevent anaphylaxis, where medications are stored and emergency response procedures to effectively manage anaphylaxis.

6. Communicate with the school community
   Communicating with staff, parents/guardians and students is essential in successfully managing anaphylaxis in schools.

7. Review and assess management strategies
   Policies, procedures and strategies need to be reviewed each year as well as after a student has experienced a severe reaction while in the school’s care.

Further information:
WA Department of Health
www.health.gov.wa.au/anaphylaxis
Australasian Society of Clinical Immunology and Allergy (ASCIA)
www.allergy.org.au
Anaphylaxis Australia Inc
www.allergyfacts.org.au