

# The Peanut / Nut Allergy Handout

*Dr. Antony Ham Pong answers some common peanut and tree nut allergy questions in this handout (updated in 2008) that he shares with [AllergicLiving.com](http://AllergicLiving.com)'s audience. Dr. Ham Pong has a private allergy and asthma practice in Ottawa and practises at the chest clinic in the Children's Hospital of Eastern Ontario.*

By Dr. Antony Ham Pong

Peanut and tree nut allergies are the most common life-threatening food allergies in children. They are often lifelong but between one in 10 and one in 20 children can outgrow a peanut allergy. Children with peanut allergy often cannot stand the smell of peanut, may refuse to touch it, and do not want to stay around when peanut butter is being eaten. This type of violent rejection of peanut butter may be the first sign that a child is peanut allergic even if the child has never eaten it. Sometimes these children get hives or rash where peanut butter touches the face or skin. If a peanut allergic child touches peanut and then rubs his or her eyes, the eyes may become very swollen and puffy.

## Q. What can happen during an allergic reaction to peanut?

**A.** An allergic reaction to a food usually begins **within minutes but may be delayed for 2 to 4 hours** and usually lasts only several hours, occasionally a day. The more severe the allergy, the smaller the amount required to cause a reaction. Typical immediate allergic reactions to foods include hives or blotching around the mouth, which may spread to the rest of the body, immediate runny nose, sneezing and itchy watery eyes, coughing, choking or gagging, wheezing and trouble breathing, and cramps, vomiting and diarrhea. The allergic reaction can stop at any stage, or may progress to anaphylaxis and death.

## Q. What is anaphylaxis?

**A. Anaphylaxis is a serious allergic reaction** that is rapid in onset and may cause death. It may occur with a food, drug or insect sting. Even a trace amount of a food can cause a severe allergic reaction. Not all allergic reactions become anaphylaxis. Anaphylaxis can begin minutes after taking a food, or may occur 2 to 4 hours later. Anaphylaxis and death may occur even when the initial reaction seems deceptively mild. Death can also occur immediately or be delayed for several hours. How an allergic reaction begins does not necessarily tell you that anaphylaxis will or will not occur.

A person **having an anaphylactic reaction** can have any or all of the following:

- a) Swelling of the upper airway causing trouble breathing, croup-like symptoms, and suffocation.
- b) Swelling of the lips and tongue with trouble swallowing and breathing.
- c) Runny nose, nasal congestion, sneezing, itchy, watery eyes.
- d) Skin eruptions such as hives or redness. Itching anywhere.
- e) Constriction of the lower airways with wheezing, asthma and cough.
- f) Nausea, cramps, diarrhea, vomiting. Dizziness, and feeling like dying. Low blood pressure, shock.

## Q. How do I treat an allergic reaction upon eating a peanut product?

**A. Anyone with peanut allergy should use his or her auto-injectable epinephrine (e.g. EpiPen, Twinject) immediately** when they begin to have reactions to eating peanut accidentally, even if the reaction initially is minor. This is important to prevent anaphylaxis, the most severe form of an allergic reaction.

People who delay treatment with epinephrine are more likely to die. Epinephrine therefore should always be immediately close at hand – *not* in the locker, in the car, in the hotel room, or next door. A person with asthma is more likely to have a fatal food reaction.

An allergic reaction, especially anaphylaxis, **can recur 4 to 8 hours after initial treatment**. It is important to go to the hospital immediately for further treatment and to be observed for several hours after.

## Q. What does epinephrine do?

**A.** Epinephrine is the only medication available to a patient to treat and prevent anaphylaxis. Antihistamines (e.g. Benadryl) treat hives and runny nose but not anaphylaxis. Antihistamines should never be used instead of epinephrine for anaphylaxis.

Epinephrine reverses the allergic reaction, strengthens the heart, opens up the airways to improve breathing and reduce hives and swelling. However, even epinephrine may not work in severe anaphylactic shock.

## How can I tell if my peanut allergy is “mild” or anaphylactic?

**A.** Most, if not all, peanut allergies are considered potentially anaphylactic. You cannot predict which reaction is going

to end in an anaphylactic reaction and which is going to be milder. Anaphylaxis is more likely if you have asthma, or previous anaphylaxis to peanut. Allergy skin tests or blood tests do not help you predict anaphylaxis – a high value tells you how likely you are to react on eating the food, not your risk of anaphylaxis.

Even a 'mild' food allergy can cause anaphylaxis if enough of the food is eaten. If you have been prescribed epinephrine, **it means that you have a significant risk for life-threatening reactions and are “anaphylactic”**. Whether anaphylaxis will occur depends on:

- how allergic a person is;
- how much of the food is eaten;
- how early treatment is started;
- whether epinephrine is given;
- whether the person is on medication that can worsen the allergy (such as beta-blockers, used for glaucoma, high blood pressure or migraine);
- and whether the person is having an asthma attack at the time or has uncontrolled asthma.

**Q. I have had only a mild reaction to peanut in the past, and have never had breathing difficulties.**

Why do I need epinephrine?

**A. Peanut allergy is potentially life-threatening.** Even if mild allergic reactions have occurred in the past, severe reactions can still occur with the same amount of food – in other words, the allergy can worsen without warning. Do not also expect that you will have the same amount of time or warning before the reaction occurs as in the past. Therefore, epinephrine should be available at all times.

**Q. How likely is a person to die from peanut or nut allergy?**

**A. Very unlikely.** More people die from drug allergy or asthma attacks than food allergy. The risk can be reduced with proper precautions. Most anaphylactic deaths outside of a hospital are due to foods (especially peanuts and nuts), thus the emphasis on these –as they are mostly preventable. But it is important to know that while these food allergies can be deadly, most nut allergic people do survive an accidental ingestion of these foods. **BE CAREFUL, NOT FEARFUL.**

**Q. Why is peanut allergy so dangerous?**

**A. Even very small amounts of peanuts or nuts** can cause serious reactions. The allergen may be found as a hidden, unlabelled part of a food sometimes – the result of accidental cross-contamination during manufacturing. Allergic reactions are often caused by eating unlabelled foods, by not checking food labels properly for the presence of peanut, or from foods that contain hidden, unlabelled peanut. Peanut is used in many of the foods that children like and often eat. **The most common types of foods causing allergic reactions due to peanut are chocolates, cookies, candies, jam contaminated by a knife used in peanut butter, ice cream and granola bars.** Chocolate and mint ice cream are most likely to contain undeclared nuts, since leftover ice cream can be added to these without changing the flavour.

**Q. How can I tell if a peanut allergy is going away?**

**A.** Repeating allergy skin tests and/or blood tests every few years can show whether the allergy seems to be improving. If so, then a peanut challenge (with peanut given under medical supervision, **NOT AT HOME**) may be carried out. Only if you are able to eat full servings of peanut regularly over a one-year period can we consider you to have likely outgrown a peanut allergy. A highly positive allergy skin test and high peanut blood level indicates a lower chance of outgrowing a peanut allergy. If the allergy is still there as a teenager, or if there are multiple food allergies, there is also a lower chance of outgrowing peanut allergy.

**Q. What other foods or activities may use peanut?**

**A.** At school, allergic reactions to peanut can happen when peanut butter is used for **school projects** e.g. birdseed balls, or when other children eat peanut products and share them with the allergic child, or the allergic child accidentally comes into contact with peanut on another child's hands, mouth, toys, desk or any other area where peanut butter traces are left.

- Peanut butter may be used as a “glue” to hold foods together, e.g. egg rolls and rice squares.
- Peanut butter or peanut flour may be added to barbecue sauce or other foods e.g. chili, mooshu sauce, plum sauce, marinades, curry sauce, pasta sauce and satay sauce to flavour or thicken them.
- Some **bird seed and animal food** e.g. gerbil and hamster food, bird food granules and dog biscuits may contain peanut and some people have reacted to playing with animals who have been fed peanut-containing food e.g. chinchillas and gerbils, presumably because traces of peanut are on the hair of the animals.
- Peanut may contaminate foods made with the same cooking utensils, baking dishes or equipment as similar foods without peanut, such as cookies, breakfast cereals, cheese and crackers, chocolates, chocolate candies, raisin covered chocolates, ice cream.

– **Special occasions** such as Easter, Halloween, Christmas and birthday parties are more dangerous for children with peanut allergy because there is more likely to be peanut-containing foods eaten, because it is more difficult to supervise children properly then, and because normal precautionary schedules are changed.

**Q. I have eaten foods labelled “may contain traces of nuts” without any problems. Should I still avoid them if I am allergic to peanut/nuts – since it is only a trace?**

**A. Definitely avoid them!** Companies are allowed to use “may contain nuts” or “may contain traces of nuts” or similar words if they cannot guarantee that a food they are producing is free of nuts. This usually occurs because nuts are being used in the same machines for other foods. But “a trace” does not imply that the amount is too small to cause an allergic reaction. A company that makes similar foods with and without nuts, may have difficulty cleaning the machines between making the different foods.

When a food with nuts is put through the machine, traces of nuts may remain. The first batches of foods made afterward that go through the same machine will likely be contaminated with nuts. Batches of foods done much later are less likely to contain traces of nuts. But you cannot be sure which batch you are eating. Therefore “may contains” should be avoided. This cross-contamination is most likely to occur with cookies, candies, cereal, chocolate, ice cream, dried soups, and nut butters. Note that, **when the word “nuts” is used**, this could mean peanut and/or tree nuts.

**Q. What about foods “manufactured in a facility that processes peanuts”. Are these safer?**

**A. These are not safer and definitely need to be avoided!** A recent U.S. study measured peanut contamination in food labelled “may contain peanuts”; “manufactured in the same facility with peanuts”, and “manufactured on shared equipment with peanut”. They found that **one in 20** had detectable peanut protein, and 70 per cent had enough to cause an allergic reaction in very sensitive persons. But only one of 358 samples had a fairly large amount – one-third of a peanut. In fact foods that stated “shared facilities or equipment” tended to be more likely to have peanut than those labelled “may contain peanuts”.

**Q. Do I have to avoid other nuts if I am peanut allergic?**

**A. You should ask your allergist** for specific advice. Peanut allergic patients can have a tree nut allergy as well. However, some peanut allergic patients are allergic only to peanut and can safely eat tree nuts. Peanut allergic patients who can eat tree nuts should be aware that many nuts are processed in the same facilities and cross-contamination can occur, so they should be careful to eat tree nuts that are not contaminated e.g. nuts taken fresh from the shell. However, young children often avoid tree nuts if they are allergic to peanut because they cannot distinguish between different nuts, and also they are still at a higher risk of developing a tree nut allergy. ‘Nu-Nuts’ and ‘Mandelona nuts’ are peanuts that are defatted and re flavoured to resemble tree nuts and these need to be avoided.

**Q. Are peanut oil or tree nut oils safe?**

**A. Pure refined peanut oil, if properly processed with high heat and chemical extraction, should contain no peanut protein** and therefore should not cause allergic reactions in peanut allergic people. Yet, peanut allergic people should avoid peanut oil because of the slight risk that the processing of peanut oil was not done properly, and that there may be traces of peanut protein. Nevertheless, if a peanut allergic person accidentally eats a food with refined peanut oil, the chances of having an allergic reaction are low because even there is peanut protein in there, it will likely be in very small amounts.

However – peanut and tree nut oils are **also available unrefined**. They may also be called cold-pressed, unprocessed, expelled or extruded oils. These unrefined oils may have nut proteins and may cause allergic reactions, and should be avoided. These unrefined oils are usually found in specialty food shops and used for specialty ethnic cooking and some specialty salads. They may also be more common in other countries. Peanut oil is also known as Arachis oil. Note that common oils used for cooking e.g. canola, corn, soy, coconut, olive, safflower oils, and palm oils do not need to be avoided by nut allergic persons.

**Q. What about seeds, tropical oils, exotic foods?**

**A. Foods such as water chestnut, coconut, nutmeg, mango, kiwi, palm kernel oil** do not need to be avoided by peanut allergic people unless they are also allergic to these foods. But allergies to these foods are uncommon. Palm oil and tropical oils do not need to be avoided. Seeds – e.g. sesame, sunflower, poppy, mustard, safflower and canola – do not need to be avoided unless you are allergic to any of these as well.

**Q. Since peanut is a legume, should I avoid other legumes such as peas, beans or soya?**

**A. No, not unless you are actually having allergic reactions when you eat them.** If you have been able to tolerate peas, beans and other legumes in past, they may be continued (even if your allergy skin test is positive), unless you begin to react when you eat them. Legumes include peanut, peas, beans, soya, chick peas (garbanzo beans), lentils,

split peas, lupin(e) seeds, dahl, tamarind, licorice, carob, soy sprouts, bean sprouts, cassia, alfalfa, fenugreek, tragacanth, acacia and senna.

Most peanut allergic people can eat other legumes even if they have a positive skin test to these other legumes. However, a positive skin test to one of these legumes means that the peanut allergic person does have some chance of developing an allergy to the legume later (5 to 15 per cent chance). If an allergy does develop, it is usually mild (usually causing itchy mouth or throat), but occasionally can be severe. The legumes most likely to cause allergic reactions in peanut allergic people are dried mature legumes e.g. dried peas and dried beans including soybean, whereas green peas and green beans are often tolerated.

**Q. Should vegetable oil be avoided?**

**A. Not in Canada.** Peanut oil must be declared in Canada, so vegetable oil means it is not peanut oil in Canada.

**Q. Does peanut have to be declared on a label?**

**A.** Generally, yes. **Unfortunately there are exemptions.** “Flavour, natural flavour, spice, seasoning, curry” are terms used on labels to describe ingredients that may occasionally contain peanut, but do not have to be declared. This is more likely to occur in imported foods, especially from countries that use peanut as a flavouring agent. Peanut oil however must be declared in Canada.

**Q. What about hydrolyzed vegetable protein?**

**A.** Hydrolyzed vegetable protein or hydrolyzed plant protein **is usually made from soya, wheat or corn**, and is added to foods to improve flavour and texture. It is rare to have hydrolyzed vegetable protein made from peanut. If in doubt, check with the manufacturer.

**Q. Can I react to the smell of peanut/nuts?**

**A.** You can be assured that, under normal circumstances, **anaphylaxis to airborne food particles is very rare.** An allergic reaction to food will not occur because someone is eating it in a classroom or vicinity of the allergic person. The main reason for advising that the allergenic food not be brought into a classroom is the potential for an allergic child to accidentally ingest some by sharing food. Secondary reasons (less likely to cause anaphylaxis because of the smaller quantities involved) are cross-contamination of desks, toys etc.

The smell of peanut/nuts or peanut butter does not come from the peanut protein, and therefore allergic reactions should not occur just because you smell peanut or because there is an open jar of peanut butter in the area. Allergic reactions to peanut occur mostly when the peanut enters the body, either by licking it, tasting it or eating it – for instance, bringing it to your lips, mouth directly, or indirectly by transferring it from your hands or other people’s lips to your mouth or eyes. Therefore, it is important to realize that severe allergic reactions or anaphylaxis to peanut generally occur with eating or tasting peanut, and not by touching or smelling it.

In fact, the smell of peanut should cause no allergic reactions at all, but may make a peanut allergic person feel very uncomfortable because he or she is smelling something that is distasteful and potentially dangerous if eaten. It is likely a defense mechanism to warn the peanut allergic person to move away from the area, in case they do get into contact with the peanut accidentally.

**The only exception** to the above is if peanut protein itself is in the air that you breathe. If a peanut allergic person breathes enough of the peanut protein in the air, the person can have a serious allergic reaction, asthma attack or anaphylaxis. Situations in which this can occur are unusual but can happen. For instance, if a large number of people are opening packages of peanut at the same time – e.g. when peanut packages served on an airplane – and the peanut protein dust gets into the air in an enclosed space. Other examples would be boiling or frying a food with peanut, as minute peanut particles can then get into the air [through steam or oil particles carrying peanut protein]. Another example could be a floor with large amounts of peanut shells and containing peanut dust where people walking on the shells can stir up peanut dust in the air. (An example would be sports bars.) However, remember that these reactions might occur only in an enclosed area and with large amounts of peanut dust stirred up in the air, and should not occur with a few peanut shells scattered on the ground, or with one or two people eating peanut next to you. Allergy to inhaled food proteins is rare and may occur in unusual cases. However, it has been reported in some individuals to peanut, wheat, milk, egg, soy, fish, crab.

**Q. Can I react to touching peanut?**

**A. Sometimes, but contact reactions are often very mild if peanut is touched to intact skin**, or there may be no reaction at all. This explains why peanut allergic children can handle all sorts of items potentially contaminated with peanut transferred by another child and have no reactions. Examples are doorknobs, books, toys, computers, water fountains, tabletops and desktops. A food does not have to be eaten to cause an allergic reaction, but eating it does cause greater amounts to get into the body and usually causes the most severe reactions. Hives can occur on skin

contact with an allergenic food. If the food goes into the wet surfaces through a cut in the skin, or at the lips (e.g. being kissed by someone who has eaten peanut butter), or in the eye, severe reactions can occur.

Allergic reactions to peanut occur mostly when the peanut enters the body, either by licking it, tasting it or eating it – i.e. bringing it to your lips, mouth directly, or indirectly by transferring it from your hands or other people's lips to your mouth, or eyes. If peanut touches a peanut allergic person's skin, either no reaction will happen, or only a minor reaction with minor skin rash (unless there is a cut in the skin or the skin is damaged. An example would be raw skin from uncontrolled eczema, allowing peanut proteins to enter the bloodstream and perhaps cause a more severe reaction).

Therefore it is important to realize that **severe reactions or anaphylaxis to peanut generally occur with eating or tasting a visible amount of peanut** (e.g. half a peanut), and not by touching or smelling it.

**Q. Can I react if my date eats peanut and kisses me?**

**A. Yes.** However, as noted above about reactions to the touch of peanut, **a peck or kiss on the cheek of a peanut allergic person may cause no reaction or a minor hive** or skin reaction at the area of the kiss. On the other hand, kissing on the lips and more intimate kissing with exchange of saliva can provoke more severe reactions, especially if the kisser has just eaten peanut or nut products and there are significant amounts on the lips or mouth or saliva. This is a common cause of swollen lips in nut allergic persons at midnight on New Year's Eve – when sometimes many kisses are shared and so are nut containing snacks!

Peanut protein can stay in the saliva after it is eaten, for close to one hour, and occasionally up to four hours. Ask your date not to eat peanut or nuts beforehand, and also as a precaution, brush their teeth and wash hands and face before you meet (I think your date should be doing this anyway).

**Q. What about airline travel?**

**A. Generally, traveling is safe as long as proper precautions are taken.** Some parents have to become comfortable with the idea that the airplane environment is no longer theirs to control before they can travel. Essential points are to make sure auto-injectable epinephrine is immediately at hand, not locked away, and certainly not left in checked luggage (unless it is a spare). Carry at least two epinephrine doses, especially for long flights. It is preferable to carry your own safe food to eat on the plane. Tell the airline about the food allergy when booking, ask if peanuts are served, and request that they not be served on that flight (it is up to the airline to decide whether to honour your request). Otherwise, try another airline if possible.

Special requests take time and possibly doctor's letters of support, so make sure you prepare well in advance. And don't worry excessively about peanut contaminating the seats etc – the major risk is ingesting peanut or nuts. You should check your aircraft seat and seat pockets as you board in case a peanut or nut has been missed by the cleaners and your child finds it. A few persons eating nuts or peanut close to you is not a risk. However, if there is a large amount of peanut dust in the air, this could cause an allergic or asthmatic reaction in a peanut allergic person. For instance, if a large number of people begin opening packages of peanut at the same time on the airplane – the peanut protein dust gets into the air in an enclosed space.

The first flight of the day is when the airplane is likely to be the cleanest. Sometimes nuts are served only in the business class section, so a seat at the rear of the plane will give less chance of accidental exposure. Peanut and nuts are more likely to be served on international flights than domestic flights.

**Q. Should I remove peanut from the house if I have a peanut allergic child?**

**A. Many parents do so with a young peanut allergic child** to reduce the risk of accidental contact. A few feel they can safely monitor peanut use in the home and minimize the risk by appropriate storage and clean-up routines. It is a personal decision. When peanut allergy has been diagnosed, remove foods potentially contaminated with peanut from the home such as ice cream, opened jam, etc.

**Q. Can my next child develop a peanut allergy if one child already has peanut allergy?**

**A. Allergies run in families so your next child has a higher risk of being allergic,** asthmatic or food allergic, but we cannot predict what pattern of allergies will develop. The risk of the next child having peanut allergy is as high as 1 in 7. You should consider having that child seen by an allergist between ages 1 to 3 years to identify whether he or she is potentially peanut allergic, especially if there is eczema. There is no real way to prevent a child from developing food allergy. This is controversial and allergists have different opinions on the subject.

**Q. What else should I expect?**

**A. The Allergic March.** An allergic child 'marches' on to develop more allergies. Allergic children who start with eczema, then food allergy, often get asthma usually before age 5 years (75 per cent risk if you have the first two), followed by environmental allergies such as hay fever.

## What Contains Peanut

[those marked with \* have caused deaths]

peanut*/peanut butter*/peanut meal	Arachide/cacahuete/cacahuete, mani
peanut soup/peanut punch/peanut drink	ground nuts/beer nuts
peanut popcorn/peanut shells/peanut flour	goober nuts/goober peas
peanut sauce/satay sauce*	Mandelona nuts/Nu-Nuts
peanut scented fishing lure (Mann's Vworm)	Peanut butter-flavoured lip gloss (Bonne Bell)
Roy Rogers Butterfinger milkshake	Rocky Mountain ice cream

## What May Contain Peanut

[those marked with \* have caused deaths]

<b>Chocolate*/candies/cookies/donuts*</b>	<b>European chocolates*</b>
<b>Desserts*/sweets*/almond paste*</b>	<b>Chili*/egg rolls*/salsa/barbecue sauce</b>
Designer jelly beans/donuts/muesli	Pesto sauce/curry sauce/marinade
Ice cream/sundaes/cereal/milkshakes	Plum sauce/mooshu sauce
Granola bars/rice squares/trail mixes	Vegetable burgers/dried salad dressing
Pet food e.g. gerbil/birdseed	Some European cow's milk formula
Animal food, pellets at petting farms	Some Lean Cuisine meals/arachis oil
Homemade playdough	Bean bags with peanut shells
Peanut butter suet cakes	Milk in the U.S. may sometimes have peanut oil or
Mixed nuts / muesli / macaroons	fish oil (to carry added vitamins). Risk is probably low.
Some ethnic cooking e.g. Thai/Szechwan	Specialty popcorn

## Non-Food Products that May Contain Peanut Products

**Medications:** These contain peanut oil e.g. Cerumol eardrops, Accutane caps, Prometrium caps, Rocaltrol, Derma-Smoothe),

**Cosmetics:** Peanut butter-flavoured lip gloss; Pears soap (peanut oil)

**Miscellaneous:** Small animal food (eg. hamster, gerbil), animal food pellets eg. at petting farm; birdseed mix or granules (eg. For parakeets, lovebirds, wild birds); dog biscuits.

## Examples of How Accidents with Foods Can Happen

1. **Eating unlabelled foods** \*. If in doubt, don't.
2. Accidental contamination of other foods e.g. jam or butter, or of eating utensils, food trays, tables and toys. A common problem is **jam contaminated with peanut butter by using the same knife.\*** Remember that even if a peanut allergic child is not offered peanut butter, eating jam at a home where there is peanut butter may not be safe. **Packing peanut butter sandwiches with other foods** \*.
3. **Unpackaged foods** e.g. a cookie jar may contain traces of nuts from previous nut-containing cookies. Another cookie taken from that jar may contain traces of nuts on it. Bulk foods and buffet meals may also be dangerous because of cross-contamination. Be cautious of free cookie samples at stores.
4. **Contamination during preparation.** For instance, perhaps a cutting board is used to prepare 2 foods – e.g, chicken and fish – and the chicken is served to a fish allergic person; or perhaps the same board or knife is used to slice or grind nuts. Using the same oil to fry different foods, or the same batter for different foods, or the same frying utensils for different foods without washing in-between can all cause cross-contamination. Grinding specialty nut-flavoured coffees in a coffee grinder. Baking muffins with and without nuts if leftover batter is used for other muffins or if baking pans are not properly cleaned.

5. **Contamination during serving** e.g. sauces mixed by spillage; the same scoop is used to take scoops of different ice creams some of which may contain nuts; a knife used to cut a nut-containing dessert and then used to cut another dessert.
6. Relying on someone who does not know but who tells you the food is safe, for instance, another child, or someone who did not prepare the food such as a waiter, salesclerk or airline attendant. Being served an incorrect dish from what was ordered.\*
7. **Trying a food** to see if you are “still allergic,” especially with an anaphylactic allergy.
8. **Tasting a food carefully to see “if it is safe or not” is dangerous.** \*
9. A change in the way a usual food is made. For instance, a change in the ingredient list without any obvious change on looking at the container. A new chef at a restaurant may change the recipe and add a “**secret ingredient**” \*.
10. **Candy machines** may have different foods at different times and candies may be contaminated with traces of nuts if there were previously nuts in the dispensing machine.
11. Be aware of unusual sources of allergenic foods “See list of “**What may contain peanut**”.
12. Non-food sources of peanut e.g. homemade playdough, scented crayons, cosmetics or fishing lures with peanut, peanut shell stuffing in bean bags, draft stoppers, and stuffed toys, peanut in animal food – hamster, gerbil and bird food granules.

\* **These have resulted in deaths.**

### Suggested Reading

*Anaphylaxis: A Handbook for School Boards*, published by the Canadian School Boards Association and Health Canada. Contact Canadian School Board Association, 340 Laurier Ave W, P.O. Box 2095, Ottawa, ONT K1P 5W3 613-235-3724. Download at [www.cdnsba.org](http://www.cdnsba.org)  
*Anaphylaxis in Schools and Other Childcare Settings* – Canadian Society of Allergy and Clinical Immunology, and allergy support groups: [www.csaci.medical.org](http://www.csaci.medical.org)  
*The Peanut Allergy Answer Book* – Dr. Michael Young

### What Can Peanut Also Be Called?

Arachide	Mani
Arachis/arachis oil	Monkey nuts
Arachis Hypogaea	Nu-Nuts <sup>3</sup>
Beer Nuts/ Butternut	Ontjom (Indonesia)
Cacahuete / Cacahuete	Peanut butter
Crackernut	Peanut flour
Goober nut (southern USA)	Peanut meal
Goober peas (southern USA)	Peanut oil
Ground nuts (tropics)	Peanut protein
Hydrolyzed peanut protein	Peanut punch
Kernel paste <sup>1</sup>	Peanut shells
Mandelonas <sup>2</sup>	Valencias

### What is *Not* a Peanut or a Tree Nut?

Artificial nut flavours	Palm oil
Bambarra groundnut	Palm Kernel oil
Breadfruit nut	Seeds eg. Canola, cottonseed, flaxseed,
Betel/bettle nut (areca)	pumpkin, poppy, sesame, sunflower
Cocoa	Soy nut
Coconut <sup>1</sup>	Butternut Squash
Corn nut ; Donuts	Styrofoam peanuts
Fruits <sup>2</sup>	Tropical oils
Gingko bark and leaves	Water chestnut
Grape nut	Wheat germ
Hemp nut	Peanut plant parts
Hickory wood	Mushrooms grown on peanut shell
Hickory flavour/smoke	compost
Legumes eg peas, beans	Wood or dust from nut trees e.g.
Litchi (Lychee) nut fruit <sup>2</sup>	walnut wood / walnut shell
Nutmeg	

1. Almond flavoured peanut paste.

1. Coconut is now called a tree nut but an allergy to it is extremely rare – check with your allergist

2/3. Fake walnuts & almonds (Nu-Nuts), fake almonds (Mandelonas)

2. Do not eat the nut if you are tree nut allergic but the fruit is OK

## What are Tree Nuts?

Tree nuts are large seeds of a tree which are usually covered by a hard shell. Each group below represents a different family of nuts.

Some people may react to only one family and can eat nuts of a different family. Others are allergic to many families of nuts.

FAMILY <sup>1</sup>	Walnut	Birch	Mango	Plum Beech	Other nut families		
NUT	Walnut (butternut) Pecan Bitternut Heartnut Hickory nut Mocker nut	Hazelnut (Filbert)	Cashew (Anacardum) Pistachio	Almond	Beechnut Chestnut Acorn	Brazil nut Chinquapin nut Gingko tree nut Kuki nut <sup>2</sup> Litchi tree nut Macadamia (Queensland nut)	Pinenut <sup>4</sup> (pignon, pignola, pinocchio) Pili nut Shea nut <sup>2</sup> Coconut <sup>3</sup>

1. Fruits belonging to the same family as a nut do not need to be avoided e.g. peaches, plums, nectarines, cherries are in the same family as almond, and mango is in the same family as pistachio & cashew. These fruits are safe even if you are allergic to nuts, but do not eat the seed or nut of the fruit.

2. African tree nuts used in some cosmetics and some candies.

3. Coconut is now called a tree nut, but an allergy to it is extremely rare and coconut generally does not have to be avoided. Ask your allergist.

4. Not strictly a tree nut but often referred to and treated as a tree nut.

## What Products Can Contain Tree Nuts

[The usual nut/nuts associated with the name is in brackets, but other nuts may be used as well]

Almond mocha  
Almond paste / extract  
Amaretto (almond)  
Calisson (almond)  
Frangelico liqueur ( hazelnut)  
Gianduja  
Marzipan (almond)  
Muesli (almond, hazelnut, walnut)  
Nougat (hazelnut)  
Nut meats, nut butters, nut liquers  
Nutella (hazelnut)  
Pesto sauce (pinenut, walnut)  
Pralines (pecans)  
Specialty nut-flavoured coffees  
Toblerone (hazelnut)  
Turtles chocolate (pecan)  
Waldorf salad (walnut)  
Worcestershire sauce, Crosse & Blackwell

## NON-FOOD PRODUCTS WHICH MAY CONTAIN TREE NUTS

**Medication:** Aim herbal fiber blend (walnut)

**Cosmetics:** Dragon Mist Body Piercing Lotion (walnut); suntan lotions; cosmetics and hair-care products; body lotions, creams, soaps & moisturizers (e.g. almond, shea, kuki nut ); Morikue (Brazil nut extract) in Aveda Shampure Shampoo and Conditioner; Cetaphil cream (almond oil).

**Miscellaneous:** Black walnut shell used in jewelry, industrial abrasive and blast cleaner, dental cleansers, soaps and cosmetics; bird seed mix especially for parrots and parakeets, small animal food mix e.g. hamster & gerbil.

*Dr. Ham Pong notes that the handout is intended for general information only. For specific medical advice, consult your allergist.*