

Allergy Prevention

Frequently Asked Questions

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Q 1: If I change my diet while pregnant will this prevent my child from having food allergies?

Excluding common allergy causing foods (such as peanut, egg, fish, soy and cow's milk), from a pregnant mother's diet has not been shown to reduce the chance of children having food allergies. It has however been linked with low weight gain by babies. Restricted diets during pregnancy are therefore not recommended.

Q 2: If I change my diet while I breastfeed will this prevent my child from having food allergies?

Studies have not shown that excluding common allergy causing foods from a breastfeeding mother's diet reduces the chance of a child having food allergies. Restricted diets are therefore not recommended.

Q 3: Are there any foods I should not feed my child when starting solid foods?

You should start feeding solid foods to your baby around six months of age (not before 4 months), and when your baby is ready, preferably whilst you still breastfeed your baby. Common allergy causing foods should be fed to your baby before 12 months of age. Studies of babies at high risk of having allergies have shown that this reduces the chance of them developing food allergies.

Q 4: Why should solid foods not be started before four months?

Studies have shown that babies at high risk of having allergies who are exclusively breastfed for the first three to four months of life are less likely to develop food allergies and eczema during the first two years of life. There are also developmental reasons why solid foods should not be started before four months, as a baby's digestive system and ability to chew and swallow are not yet fully developed or ready for solid foods.

Q 5: What should I do if my child has a food allergy?

If you suspect that your child has a food allergy, ask your doctor for advice before introducing that food. In children with confirmed cow's milk and soy allergy, special formula can be prescribed by a doctor. Food restrictions should be discussed and supervised by your doctor, who may also recommend a dietitian.

Q 6: Is soy milk or goat's milk better to prevent allergies in my child than cow's milk formula?

No. Studies have shown that the use of soy milk or goats milk formula does not prevent development of food allergies in children.

Q 7: Should pets be avoided?

There is no reason to remove pets from the household unless a person is already allergic to them and has symptoms when exposed to the pet.

Q 8: Will dust mite avoidance measures reduce the risk of allergy and asthma developing?

Unless a person is already allergic to dust mites, there is no convincing evidence that dust mite avoidance or minimisation measures reduce the risk of developing allergy or asthma.

Q 9: Will taking fish oils prevent allergy?

There is no convincing evidence at this time, which has shown that taking fish oil supplements during pregnancy has any significant benefit in preventing allergy.

Q 10: Are probiotics useful in preventing allergies?

Probiotics are not currently recommended for preventing allergies. There are conflicting studies on the benefit of giving probiotics for the prevention of allergic disease. Whilst some studies have found a protective effect against the development of eczema, other studies have shown no effect on the development of allergic diseases. Further studies are required to confirm the role of probiotics in the prevention of allergic disease.

Q 11: Will allergen immunotherapy (desensitisation) prevent allergy?

The current role of allergen immunotherapy is to treat established environmental allergies.

However, there is some emerging evidence that treating children who have allergic rhinitis (hay fever) with allergen immunotherapy may reduce the risk of them developing asthma, or further aeroallergen sensitivities later in life. This is an area of active research.

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