




NOTTINGHAM SUPPORT GROUP FOR CARERS OF CHILDREN WITH ECZEMA

In association with : Nottingham University Hospitals 
NHS Trust

Written by Professor Hywel Williams, Dr Ruth Murphy, Dr Jane Ravenscroft, Nurse Consultant Sandra Lawton and parents on behalf of the Nottingham Support Group for Carers of Children with Eczema.

Diet and your Child's Atopic Eczema - Information for Parents

A healthy, well balanced diet is important in children with atopic eczema, to keep the skin as healthy as possible. Many people think that dietary factors act as triggers or drivers of their child's eczema and in a small proportion of children this may be true. However, it is important not to restrict a child's diet without any real benefit to their eczema as restrictive diets can harm a child's growth and development. This leaflet summarises some of the most common questions that are asked about diet and atopic eczema, and explains how to work out whether foods are causing a problem.

How important is food allergy in atopic eczema?

Food allergy is not the main cause of atopic eczema, but foods can occasionally make eczema worse. It is not known with any certainty in what proportion of children food allergy is playing a role, because estimates from studies vary widely. The reason for this is that the effects of food on the skin in eczema are complicated and difficult to assess. Food allergy is more likely to be contributing to eczema in infants less than 1 year. It is very unlikely to be important if the eczema developed after 2 years of age.

It is worth considering food allergy in infants and children with moderate or severe eczema, which has not been controlled with moisturizers and steroid ointments, particularly if they also have gut problems (colic, vomiting, diarrhoea, constipation), or poor growth.

How do I know if my child is allergic to any particular food?

If your child develops itchy swollen patches (hives) on the skin within an half an hour of eating a food it is likely they have an immediate type allergy to the food. A more severe allergy may also cause vomiting, wheezing and swollen lips or tongue. The food should be avoided until medical advice is obtained.

The commonest foods causing this type of allergy are egg in young infants, and peanut in older children. Many other foods including cow's milk, wheat, fish, shellfish, tree nuts, soya, strawberries and other fruits can occasionally cause immediate allergy. These allergies occur a bit more commonly in children with eczema, but are not the cause of eczema.

It is more difficult to work out foods, which are causing a flare in eczema, because it may take 1-2 days after eating the food before the eczema flares up. The most reliable way of knowing whether a food allergy is aggravating your child's eczema is to keep your child away from the suspected foods for 6-8 weeks, and then, at the end of this period, introduce the food back to them. If your child develops a clear flare up of the eczema 1-2 days after eating the food in question, then this is a fairly reliable guide that your child's eczema is being aggravated by that food, although they may not be allergic to the food in the sense of immediate or potentially dangerous reactions.


Change in bowels (diarrhoea or constipation) can also be a clue. It is helpful to keep a diary or regular photographs of your child's eczema before, during, and after the food is withdrawn and reintroduced, in order to help you decide whether it has made a difference. If you are unsure whether this food has really made your child's eczema worse, (bearing in mind that eczema is a condition, which tends to go up and down of its own accord anyway), then try the 6 week test once again, followed by the reintroduction of the food. This form of parental observation is the most important practical way of diagnosing food induced aggravation of your child's atopic eczema. If your child develops severe symptoms with certain foods, or if you suspect peanut allergy, then you should NOT experiment with diets on your own – seek professional help immediately.

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Are there any tests that can help us?

Test are helpful in diagnosing the immediate type of allergy to foods but are much less helpful in working out which foods are aggravating eczema. We can perform a blood test, which will look for evidence of an antibody to a particular food e.g. egg and cows' milk protein, but many children have a positive test and do not have any evidence of atopic eczema or food allergy. Similarly, skin prick tests tell us something about your child's immune system, but they are poor at predicting whether or not your child's atopic eczema is due to a particular food. Careful observation of your child with particular foods is still the most useful way of diagnosing food induced aggravation of atopic eczema. If it is still not possible to know whether food is a problem, it is possible to do a test called a 'Food challenge' in hospital. This involves giving your child the food and watching for a reaction. This is not done if we are concerned your child may have a severe reaction.

What should I do if I suspect food allergy in my child?

We recommend that you discuss this with your doctor or skin specialist before excluding any important foods such as milk and eggs in your child's diet. If your doctor agrees, he/she will discuss with you how to ensure that your child's general health is not affected by cutting out foods, and may refer you to a specialist dietician if this service is locally available. The most common situation is in young babies where parents suspect that milk might be aggravating eczema.

In this situation, an 8 week period of replacing formula milk with a low allergenic 'hydrolysed' formula such as Nutramigen or Neocate can be tried. Hydrolysed formulas are a type of milk in which the big proteins (that cause food allergy) are broken down into small ones causing much less of a problem. A doctor may prescribe these milks. All other dairy products must be cut out at the same time.

At the end of 8 weeks an assessment should be made of how the child's eczema has been. If it has improved a lot, then a dietician referral is essential to advise on weaning and continuing the milk free diet. It is not safe to continue a milk free diet for more than 8 weeks without dietetic advice.

If no improvement has occurred, then cow's milk should be gradually reintroduced, as it is an important source of calcium, protein and calories for a growing child.

Soya milk should not be used under 6 months of age because it contains traces of plant oestrogens (hormones than can affect your child's development). You should also be aware that babies with milk allergy could also be allergic to Soya. Goat's milk is not recommended because there is not enough evidence that it provides adequate nutrition for babies.

Other foods that parent's say can aggravate eczema are


- Egg
- Citrus products e.g. orange juice
- Fish
- Colouring's
- Chocolate
- Tomato
- Cereals, such as wheat

It is not clear whether these aggravating foods are due to allergy or not. Sometimes it is sufficient to limit these foods rather than avoid them completely providing they do not cause immediate severe reactions.

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Will my child always be allergic to certain foods?

Most food allergies that occur in the first year of life are unlikely to be lifelong. For this reason, even if you are convinced that your child is allergic to cows' milk or eggs at the age of 6 months, you should try and reintroduce such foods cautiously every few months e.g. in cooked form, to see if your child is able to tolerate it. This is not recommended with peanut allergy or any severe food allergy, as these tend to be more persistent. You should discuss this further with your doctor.


Summary

- Food allergy is not the main cause of atopic eczema, but foods can occasionally make eczema worse, especially in the first year of life
- Immediate type food allergy (hives) is slightly more common in children with eczema
- Some parents restrict their child's diet without any real benefits to the eczema
- Restrictive diets can harm a child's growth
- The best way to know if a suspected food is making your child's eczema worse is to avoid that food for 6-8 weeks then reintroduce your child to it. A diary or series of photographs during this time can help you decide. If you are not convinced that there has been a definite worsening of your child's eczema within 1-2 days, then repeat the process again
- Test one food at a time
- Discuss with your doctor before excluding any foods permanently.
- If you do decide to avoid milk and dairy products, please talk to your doctor and ask to see a dietician to make sure that your child has enough calcium, protein and calories to grow healthily.

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For advice on support issues please contact the NSGCCE via the website
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top of most pages or email us at enquiry@nottinghameczema.org.uk

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