

Stephanie Calahan didn't know what was wrong. At 37, the small-business owner had inexplicable digestion problems, and she lacked the focus and energy she once had. Then, a multiple-migraine attack sent her to an emergency room.

Still, the cause remained a mystery.

Calahan was told it was all in her head. Her physicians had her on several medications and wanted to put her on even more.

"I decided to find another way," she says. On the advice of a friend, she embarked on a journey that led her to the culprit in many of her health issues: food.

## OPENING AN INVESTIGATION

Food allergies affect about 3.7 percent of adults, according to the National Institute of Allergy and Infectious Diseases. An allergy is the immune system's mistaken response to a food—which, in adults, is caused most often by shellfish, peanuts,

tree nuts, fish and eggs. When the offending food is eaten, the body produces immunoglobulin E (IgE), and it is the presence of this antibody that helps doctors identify a true allergy.

More common than food allergies, though, are food *intolerances*, says Sami Bahna, M.D., the president of the American College of Allergy, Asthma & Immunology.

People often confuse intolerances with allergies, Bahna says. "The most common example is confusing lactose intolerance with an allergy to milk," he explains. "The intolerance to milk sugar causes gas, loose bowel movements, abdominal pain and sometimes vomiting, without any symptoms outside the gastrointestinal tract. It is a digestion problem and not an allergic reaction."

Food allergies are far more severe, adds Jeffrey M. Factor, M.D., a fellow of the American

Academy of Allergy, Asthma & Immunology.

"They can be life-threatening," he says.

"Intolerances are not."

An allergic reaction usually occurs within the first hour or two of consuming the food, Factor says. The reaction can result in itching in your mouth, vomiting, diarrhea, abdominal pain, hives, eczema, tightness in the throat, trouble breathing—and worse, a drop in blood pressure, which can lead to anaphylactic shock, a potentially fatal reaction.

## IDENTIFYING THE SUSPECTS

Whether a person is facing a true allergy or a nonfatal food intolerance, it's important to find the cause. The process begins with a medical history. For Calahan, soy, gluten and peanuts were identified immediately as suspects.

"Sometimes the history is sufficient by itself to diagnose an allergy—if the person gives a history of repeated episodes of acute reactions following a specific food," Bahna says. "An experienced specialist will work as a detective to figure out the cause of the problem."



Good detective work can help you discover if you are

# MEALTIME



## COOKED TO ORDER

Hidden ingredients and cross-contamination are common causes of food-allergic reactions of diners in restaurants. To avoid mistakes, carry a card listing the ingredients you must avoid and ask your server to share it with kitchen staff. Visit the Food Allergy & Anaphylaxis Network at [foodallergy.org](http://foodallergy.org) and click "For Newly Diagnosed" to **download** your free chef card.

The medical history usually is not enough, and an allergy specialist will perform skin tests or a blood test. During a skin test, the suspected allergen is gently introduced into the skin through the tip of a small needle, Factor explains. If the body is allergic to the suspected food, IgE antibodies combine with the allergen on the skin and release chemicals, resulting in "a mosquito bite-type reaction usually within 10 to 15 minutes," he says. Similarly, a blood test seeks out the IgE antibodies for a specific number of foods.

In Calahan's case, a blood test identified 33 additional foods to which she may be allergic or sensitive.

### THE INTERROGATION PERIOD

Through a medical history and skin and blood tests, you can "arrest" certain suspected foods, Bahna says. "Now we will interrogate them."

During an elimination challenge, the patient strictly avoids the potential allergens, then reintroduces one food at a time to determine which will make symptoms recur, Bahna says. Many of these tests are done under supervision so

that if a reaction does occur, a physician can treat it immediately.

For Calahan, the elimination challenge was a sure-fire way to assess her body's intolerance for specific foods. After eliminating gluten for an uneventful two and a half weeks, she reintroduced it with a bowl of cereal. She was out of commission for three days with a severe migraine, she says.

Bahna compares discovering food allergies and intolerances to a detective story. And that has been true for Calahan, including what she describes as a "surprise twist." She says that understanding her food issues has helped her be more aware of what her body is telling her.

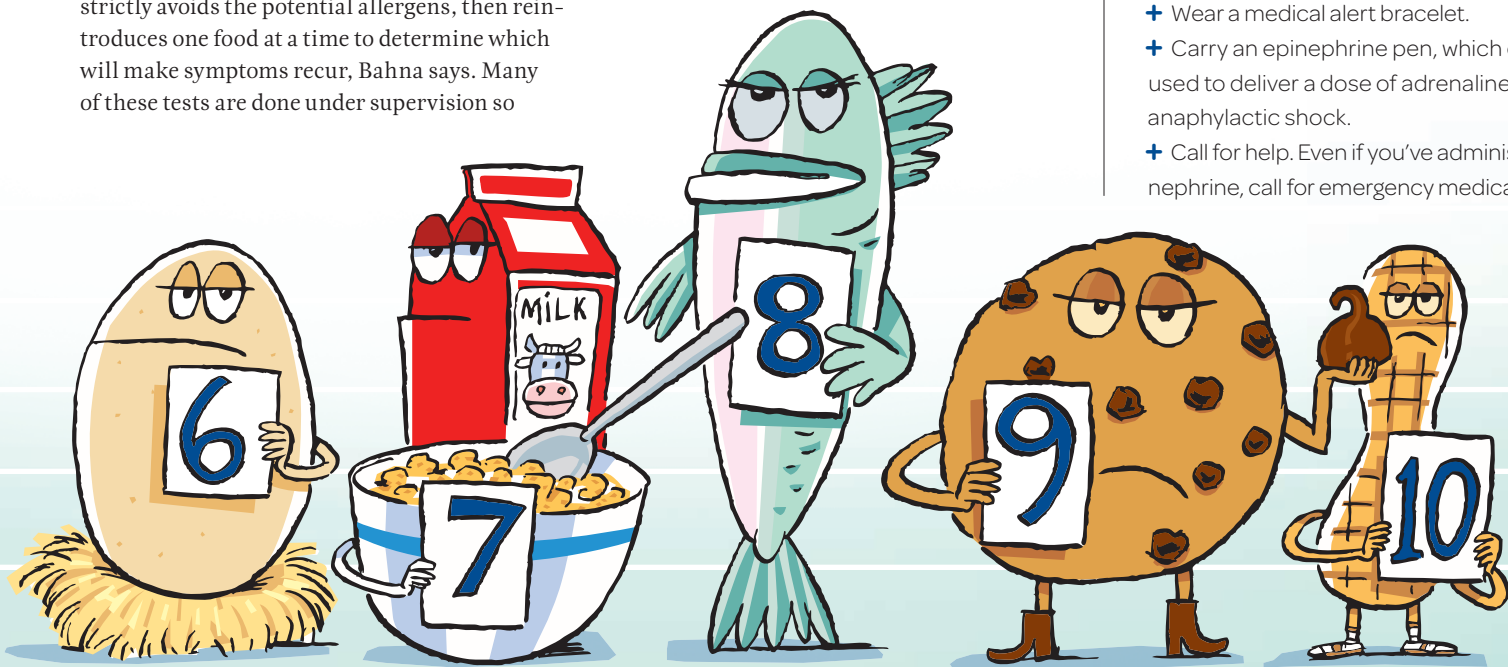
"My family notices," she says. "I'm a happier person." ➔

## YOUR DEFENSE STRATEGY

For people with food allergies, finding the specific cause is critical. But treatment can be elusive.

"The only effective means of treating allergies is avoidance of the allergen," says Jeffrey M. Factor, M.D., a fellow of the American Academy of Allergy, Asthma & Immunology. In addition, the National Institute of Allergy and Infectious Diseases suggests allergy sufferers should:

- + Wear a medical alert bracelet.
- + Carry an epinephrine pen, which can be used to deliver a dose of adrenaline to treat anaphylactic shock.
- + Call for help. Even if you've administered epinephrine, call for emergency medical assistance.



allergic to any foods in this lineup of common culprits

# MYSTERIES