



# Immunologic reaction of food allergy

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## DESCRIPTION

A wide range of physical manifestations, including those affecting the skin, gastrointestinal, respiratory, and cardiovascular systems, are linked to food-related reactions. An allergist must be consulted for an accurate and prompt diagnosis and course of treatment because food allergy is one of the main causes of anaphylaxis. A thorough history and diagnostic procedures, such as serum-specific immunoglobulin E testing, skin prick testing, and, if necessary, oral meal challenges, are used to make the diagnosis. (Lange, 2014). Following the confirmation of the food allergy diagnosis, the offending food allergen must typically be strictly eliminated from the diet. The preferred form of treatment for patients with severe systemic symptoms is an intramuscular injection of epinephrine into the lateral thigh. (Urisu, et al, 2014). Although milk, egg, soy, and wheat allergies are typically "outgrown" by kids, allergies to peanuts, tree nuts, fish, and shellfish are frequently lifelong. An overview of the epidemiology, pathophysiology, diagnosis, treatment, and prognosis of people with food allergies is given in this article. (Branum, et al.) Food allergies are particularly prevalent in atopic people and children. Dietary allergies are still a serious issue for the adult population, with a prevalence of an estimated 2%, even though it is common for children to outgrow their hypersensitivity to food proteins. By using an oral allergen challenge, it was discovered that 8% of children under the age of 3 had a food allergy. Cow's milk, eggs, wheat, peanuts, and soy are the most common food allergens in young children, but peanuts, tree nuts, and shellfish are the most dangerous for adults. Nut and peanut allergies do not usually outgrow them, which explain why Food allergens affect both children and adults differently.

For example, tree adults are more typically allergic to these foods. Similar to other atopic illnesses, food allergies have been shown to have a significant hereditary component. (Ben-Shoshan, et al, 2012). Gastrointestinal tract serves as a surface for processing and absorbing ingested food, eliminating waste, and creating a significant barrier to the outer world. (Urisu, et al, 2014). his barrier's immune system, the gut-associated lymphoid tissue, is able to distinguish between benign foreign proteins or commensal organisms and harmful infections. Both the innate and adaptive immune systems make up the mucosal immune system. Unlike the systemic immune system, the adaptive mucosal immune machine is especially gifted at inhibiting responses to no dangerous antigens and yet mounting a rapid response to pathogens. (Fleischer, et al, 2005). However, developmental immaturity of diverse components of the gut barrier and immune system reduces the efficiency of the toddler mucosal barrier and probably plays a chief role in the multiplied prevalence of gastrointestinal infections and food hypersensitivity in the course of the first few years of existence.

## CONCLUSION

The number one reason for the physical exam is to search for assistive evidence of atrophy and different allergic sicknesses, e.g., atopic dermatitis, bronchial asthma, and allergic rhinitis, and to rule out the presence of different situations that can mimic meals hypersensitivity. The body exam is also one of beneficial for assessing average nutritional status and increasing in children.

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