Should My Child Try Peanut Allergy Treatment?

Use this discussion guide to help decide if the treatment is right for your child

Welcome

It can be frightening if your child has a peanut allergy. Even when you and your child are doing your best to avoid peanuts, accidental ingestion still can occur. If your child is 4 to 17 years old, a new treatment may help reduce the severity of allergic reactions, including anaphylaxis, that may happen with accidental exposure to peanut. Oral peanut immunotherapy slowly exposes an allergic child to peanuts so their immune system is less likely to react if they accidentally eat something containing a small amount of peanut. Even with this treatment, your child MUST continue to avoid peanuts and carry two epinephrine auto-injectors.

It’s important to understand:

- The new treatment is not a cure - your child will still be allergic to peanuts and must avoid them. The goal is to help reduce risk and fear of a life-threatening reaction if your child accidentally ingests any amount of peanut, no matter how small. This may improve quality of life by helping the child (and family) worry less and feel more comfortable in social situations.
- It will not enable your child to eat peanuts or peanut products anytime they wish.
- It must be taken daily to maintain the treatment effect. It works only while your child is taking it on a daily basis.
- Your child will need to continue to carry two epinephrine auto-injectors, and you and your child will still need to read food labels.
- Reactions, including anaphylaxis, can occur due to the treatment itself.

For many children with peanut allergy and their parents, the benefits may be worth the drawbacks.

This tool helps you talk with your child’s allergist to decide if this treatment might be a good option.

The discussion guide is easy to use:

1. Read about peanut allergy and the therapy.
2. Respond to a few simple statements based on your child’s temperament and preferences.
3. Bring your answers to your child’s next appointment.
Let’s get started!

About Peanut Allergy

Peanut allergy is one of the most common food allergies, occurring in one in 50 children. Peanuts or peanut protein can be found in many different types of foods, and the consequences of exposure can be life-threatening.

To prevent allergic reactions, children with peanut allergies are taught to avoid peanuts, ask what’s in food before eating it, check nutrition labels and always carry two epinephrine autoinjectors. That works well for many children and their parents, although there is always a risk of accidental ingestion and reaction. A new treatment, Palforzia™, may help children and their parents worry less by reducing the severity of allergic reactions caused by accidental ingestion of peanuts. However, the treatment has its risks and is not a cure. Whether or not they are taking the new treatment, if a child with a peanut allergy has a reaction, they should inject their epinephrine to treat the allergic reaction and call 911 to be taken to the nearest emergency department.

About the New Treatment

Palforzia™ has been approved by the U.S. Food and Drug Administration (FDA) as a treatment for peanut allergy in children and adolescents 4 to 17 years old. It is known as oral immunotherapy and works by exposing the child to a small amount of peanut, so they become less likely to have an allergic reaction if they accidentally eat a peanut product. The treatment involves putting a tiny bit of peanut powder into food every day in an amount that is slowly increased over time. It is not a cure.

For many parents, the potential benefit of easing their worry about accidental ingestion outweighs the negatives and limitations of the treatment. For their child, it may mean feeling more comfortable in social situations such as school lunchtime, parties, overnight camp, playdates and eating in restaurants.

There are several limitations to the treatment. The child should take the treatment with a meal about the same time every day and should not exercise or have a hot bath or shower immediately prior to or within three hours after taking Palforzia™. This means it’s important to consider meal times, sports practice, competitions and activities when determining the timing of treatment in the daily schedule.

Read on to learn more about the treatment.

Peanut Allergy Treatment

There are two options for children and adolescents ages 4 to 17 who have a peanut allergy. One is to continue to avoid peanuts and carry two autoinjectors of epinephrine. The other is to continue to do those things, as well as daily peanut allergy treatment.
## This chart explains more about the two options.

<table>
<thead>
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<th>Option</th>
<th>Peanut allergy treatment</th>
<th>Avoidance</th>
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<tbody>
<tr>
<td><strong>How does it work?</strong></td>
<td>The caregiver/child reads labels and avoids ingestion of peanuts, and carries two epinephrine autoinjectors at all times. The child receives several increasing doses of Palforzia™ peanut powder during the first visit to the allergist’s office over at least three hours. Then the child visits the allergist every two weeks for at least the first six months to be given a higher dose of peanut powder and is observed for 60 minutes for a reaction. The child continues the higher dose of peanut powder daily until the next visit to the allergist. Once the maintenance dose is reached, the child takes the treatment once a day at about the same time, sprinkling it on refrigerated or room-temperature soft food. The child regularly follows up with the allergist.</td>
<td>The caregiver/child reads labels and avoids ingestion of peanuts, and carries two epinephrine autoinjectors at all times.</td>
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<tr>
<td><strong>What are the advantages?</strong></td>
<td>The child is less likely to react to accidental peanut exposure. May improve quality of life by helping the child, parents and family members worry less and feel more comfortable in social situations, such as at school, restaurants, parties and overnight camp.</td>
<td>No need to take daily treatment and no risk of reaction from that treatment. No need to adjust activities based on peanut dosing.</td>
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| **What are the possible side effects or limitations?** | Most common: stomachache and itchy mouth or throat, which likely will decrease over time. Risk of hives and swelling, congestion and runny nose, wheezing, asthma developing or worsening and anaphylaxis. Risk of developing eosinophilic esophagitis, an inflammatory reaction of the tube that connects the mouth and stomach. Risk of reactions to the therapy, including possible anaphylaxis. The child should not exercise or have a hot bath or shower within three hours after taking the treatment. If the child has been exercising or has taken a hot bath or shower and is feeling hot, or they are sweating and their heart is beating fast, they should not take the treatment until they have cooled down and their heart is beating normally. There is a greater risk of allergic reaction due to:  
- Fasting  
- Menstruation  
- Sleep deprivation  
- Use of nonsteroidal anti-inflammatory medication (such as Advil® and Aleve®)  
- Uncontrolled asthma  
A lower dose or no dose should be taken if the child has a fever, infection or is feeling ill. | Not protected from accidental ingestion. |
| **What are the possible disadvantages?** | Many children and adolescents with peanut allergies do not like the taste of peanuts, making the therapy challenging, especially in younger children. Must be taken every day indefinitely or it stops working. | Reactions from accidental ingestion may occur with lower levels of peanut exposure and may be more severe. |
| **What is the cost of treatment?** | $ or $ | $ |
|  | Work with your allergist to determine what it will cost based on your insurance. Financial assistance may be available – ask your allergist. |  |
| **What else should I know?** | The treatment is not a cure and does not enable the child to knowingly eat peanuts or peanut products. The treatment reduces the severity of allergic reactions, including anaphylaxis, that may occur with accidental exposure to peanut, not other food allergens. The treatment must be refrigerated and taken with a meal. | Most children do not outgrow peanut allergy. |
Your Turn

The next step is to talk about the treatment with your child’s allergist. To help you figure out if the treatment might be an option for your child, check the boxes if you agree with the following statements.

- My child and I frequently worry they will be exposed to peanuts and have a serious allergic reaction.
- My child avoids peanuts and carries an epinephrine autoinjector but still doesn’t feel protected from a reaction.
- I would be able to take my child to the allergist every two weeks for six months.
- My child is not able to fully enjoy participating in activities such as parties and overnight camp due to their peanut allergy.
- It would not be difficult to plan daily activities such as showering and exercise around the treatment.
- My child would be willing to try this treatment.
- My child would be able to adhere to a daily treatment.
- Being able to afford the treatment is not a concern for me.

All done!

Bring your answers to your child’s next appointment with the allergist.

For more information about allergy treatment, and to locate a board-certified allergist in your area, visit AllergyAndAsthmaRelief.org.

Note: The information and materials here are intended solely for the general information of the reader. They are not to be used for treatment purposes, but rather for discussion with the child’s allergist. The information presented here is not intended to diagnose health problems or take the place of professional medical care.