Not allergic to life

A lot of things have changed over the 3 years since I first wrote for Australian Family Physician; but one thing remains... without prompt medical assistance I will die if I eat a nut.

After [too] many visits to the Royal Children’s Hospital (RCH) in Melbourne, it has been determined that I have a life long allergy to tree nuts and peanuts. Oddly, I can now eat some nuts previously known to cause me to have an anaphylactic reaction. At the age of 4 years I suffered anaphylaxis after eating yoghurt containing ground almonds... 1 teaspoon of yoghurt was enough... now apparently I can eat as many almonds as I like. I think I’ll pass thanks! However, my allergic disease still remains and the possibility of ‘death by nut’ is still very much an unchangeable reality for me.

I have often wondered why this has happened to me so I found the article by Tang and Robinson in this issue of AFP really interesting. It suggests that exclusive breastfeeding for the first 6 months of a baby’s life and introducing solids at 4–6 months can help prevent allergic disease. My mother breastfed me for longer than 6 months, and she tells me that I was not introduced to solids until 5 months of age. I also have no relatives with allergic disease... where do I fit in their evaluation? Just unlucky I guess.

The latest round of tests at RCH involved skin prick testing, but on me, the findings were inconclusive. This led to many oral food challenges, where I had to actually consume in progressive amounts the nuts that were thought to be ‘high risk’. This was a very confronting and disturbing notion. My whole life I have avoided nuts because they can kill me, and now I was being force fed what to me, is poison. I don’t think medical professionals have considered the emotional impact of being told: ‘Eat this so we can measure your reaction... it’s okay you’ll be fine’. I won’t be fine.

In this issue of AFP, Robinson and Smart discuss these same tests but fail to include the emotional impact of having these tests, especially on someone old enough to understand death. For me, it was terrifying knowing that the testing itself could cause anaphylaxis... having resuscitation facilities available was, paradoxically, not comforting.

Three years ago I wrote: ‘Having such a severe food allergy doesn’t only restrict every day life. For instance, I love to cook but could never be a chef; I love to travel, but couldn’t realistically go to countries like Thailand with ease’. Well I did just that! This year I went to Thailand... my first holiday overseas unaccompanied by an adult. And it definitely was not easy, probably the stupidest decision of my life.

First, there were ‘issues’ with obtaining two EpiPen®s (a sensible idea considering my destination). Apparently now that I am over 17 years of age I am only allowed one EpiPen per prescription. This is ridiculous... being older does not lessen my risk. Trying to get on a plane with the EpiPen was fun... not to mention trying to explain to an airline ‘no nuts’ in my food please! On arrival in Thailand my EpiPen was at risk of being seized until I produced the medical certificate my general practitioner had written.

Second, I encountered a lot of ignorance. We took all kind of precautions and preparations for the trip. I had a letter translated into Thai explaining how severe my allergy was. I also had someone teach me how to say in Thai: ‘I am severely allergic to nuts. If I eat I will die’. So you’d think I’d be okay... wrong! I went to a restaurant, chose my meal, presented the waitress with my letter and spoke in Thai. I was very proud of myself, and felt a lot more calm and in control of the situation when she nodded in acknowledgment and went to process my order. To my astonishment when I received my meal there were cashew nuts in it and over it! This happened on my third night in Thailand. I barely ate for the rest of my trip for fear of my life. Understandable don’t you think?

In their article ‘Food allergy in adults’ Wrobel, O’Heir and Douglass discuss risk taking in young adults. Yes, going to Thailand was a risk, but so is eating in a restaurant in Australia. I think it’s important for GPs and specialists to understand that ‘risk taking’ isn’t necessarily because you want to test the limits, nor is it a desire to be ‘normal’, sometimes it is more about experiencing life.

References