



# Psychosocial Issues in Food Allergy: Vital Information for Health Professionals

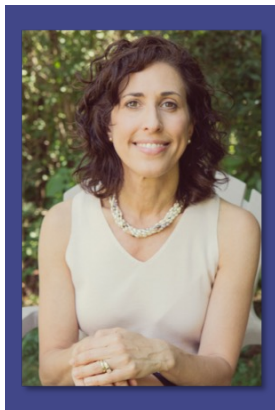
Dr. Gianine Rosenblum

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**The mission of  
ALLERGY & ASTHMA  
NETWORK**

Is to end the needless  
death and suffering due to  
asthma, allergies and  
related conditions through  
outreach, education,  
advocacy and research.

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## Gianine Rosenblum, PhD

*Licensed Psychologist*

Almost 30 years of experience in clinical practice, psychological research, and teaching

- Practice specializing in treating trauma/PTSD, depression, and anxiety
- Unique experience in helping individuals and their families cope with life-threatening food allergies, and other complex medical issues
- Mother of a college student with multiple food allergies
- For more information: [www.dr.giarosenblum.com](http://www.dr.giarosenblum.com)

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## Program Outline



Foundational Food Allergy Knowledge



Understanding the Burden of Living with Food Allergies



Coping with Allergic Reactions



Informed Interventions

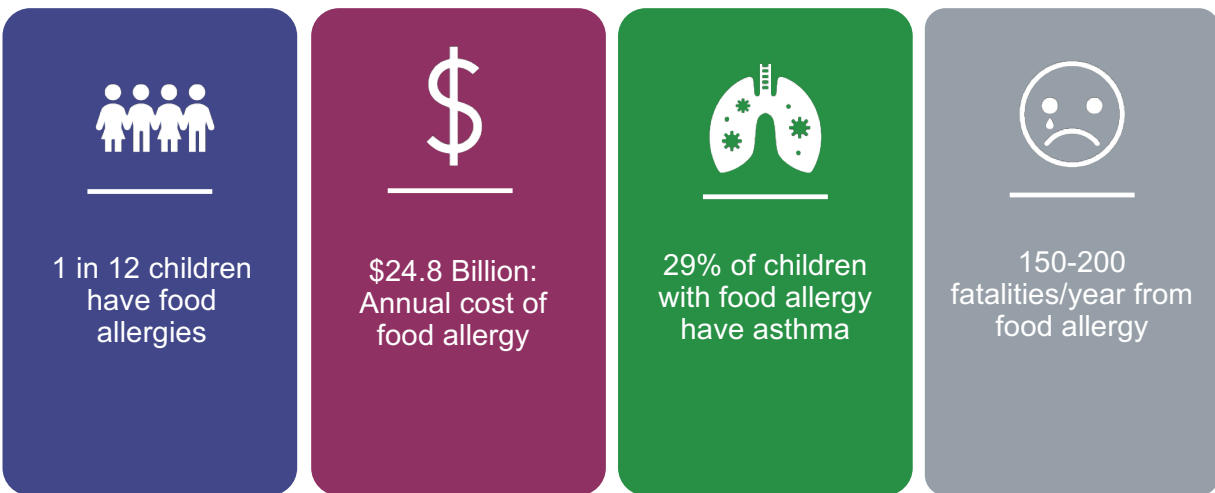
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# Foundational Food Allergy Knowledge



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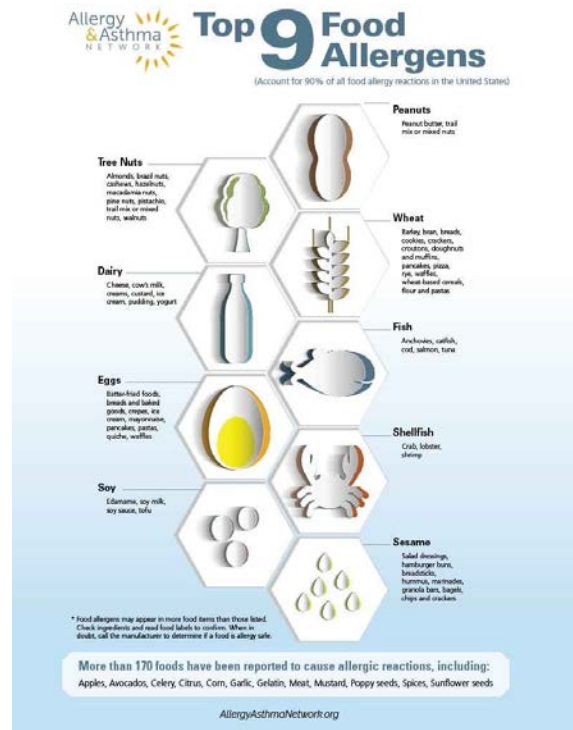
## Food Allergy by the Numbers



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# Top 9 Food Allergens

- Peanuts
- Tree Nuts
- Wheat
- Dairy
- Fish
- Eggs
- Shellfish
- Soy
- Sesame



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# Basics of Food Allergy

- 01 Other serious food allergens**  
Mustard, mollusks (oysters), buckwheat, celery & Lupin
- 02 Any food allergic reaction can be life threatening**
- 03 Minute amounts of food protein can trigger anaphylaxis**
- 04 Management**  
Entirely behavioral  
**COMPLETE AVOIDANCE** is essential
- 05 Treatment**  
Epinephrine **FIRST**,  
Epinephrine **FAST**  
Call 911
- 06 Risk of death**  
Delayed epinephrine  
Uncontrolled asthma  
Adolescent & young people

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## Self-Management of Food Allergy is 100% Behavioral

### Maintain Strict Control



Control all food-related situations

- Avoid culprit foods and cross-contact between safe foods and allergens
- Avoid non-food allergen sources (e.g., cosmetics, soaps/lotions, medications/vaccines, craft supplies)

### Be a “First Responder”



Self-diagnosis of anaphylaxis (via often ambiguous early signs)

Self-treatment by injecting epinephrine and obtaining emergency medical attention

Carry two epinephrine auto-injectors within arm’s reach always

### Practice Continuous Self-Advocacy



Request accommodations from:

Waiters, restaurant managers, caterers, friends, family members, school districts, principals, headmasters, teachers, school nurses, strangers on airplanes, pilots and flight attendants, coaches, teammates, boyfriends, girlfriends, chorus directors, sorority sisters, tutors, Halloween candy giver . . . EVERYONE!

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## Many Daily Routines of Daily Life Must Change after Diagnosis



#### Meal Planning

- Family meals, school lunches, snacks
- Travel often means carrying food, contacting restaurants



#### Food Shopping

- Eliminate allergen from purchases
- Read labels
- Every item, every time



#### Food Preparation

- Eliminate/Substitute allergens in all recipes
- Prevent cross contact while cooking



#### Food Serving

- Prevent cross contact when serving
- Separate plates, utensils, wash hands, don’t touch



#### Food Storage

- Prevent cross contact between allergen and safe foods
- Prevent accidental ingestion of unsafe foods stored at home



#### Kitchen Clean-up

- Prevent cross contact during and after cooking and eating
- Cracker crumbs, flour dust, or specks of cheese on counter, sponge, or towel can be dangerous

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## Empathy Builder – Next Grocery Shopping Trip:

Choose a Top 9 Allergen

Plan meals without that allergen

- Commit not to buy any foods containing that allergen
- Read every label on every packaged food you select in its entirety before you put it in your cart

Choose a non-Top 9 Allergen

Select 3 packaged foods.

- Call the manufacturers to ask if that allergen might have cross contact with the food
- Imagine doing that for everything in your pantry

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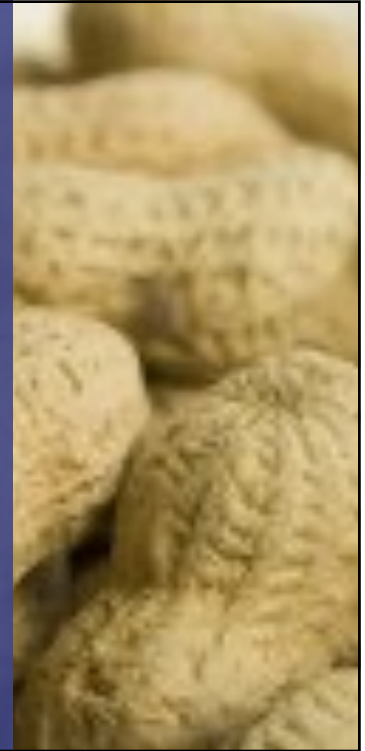


Understanding  
the Burden of  
Living with  
Food Allergies

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## Food Allergy is a Chronic Stressor

- Unpredictability
- Uncontrollability
- Expectation of a negative outcome  
– “Sense of threat”
- Uncertainty
- What to do next?!?



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## Why is Food Allergy So Stressful?



Pervasiveness of  
Threat



High Levels of Daily  
Vigilance



High Behavioral  
Control Demands



High Social Skills  
Demands



Low Social  
Support/Social  
Cruelty

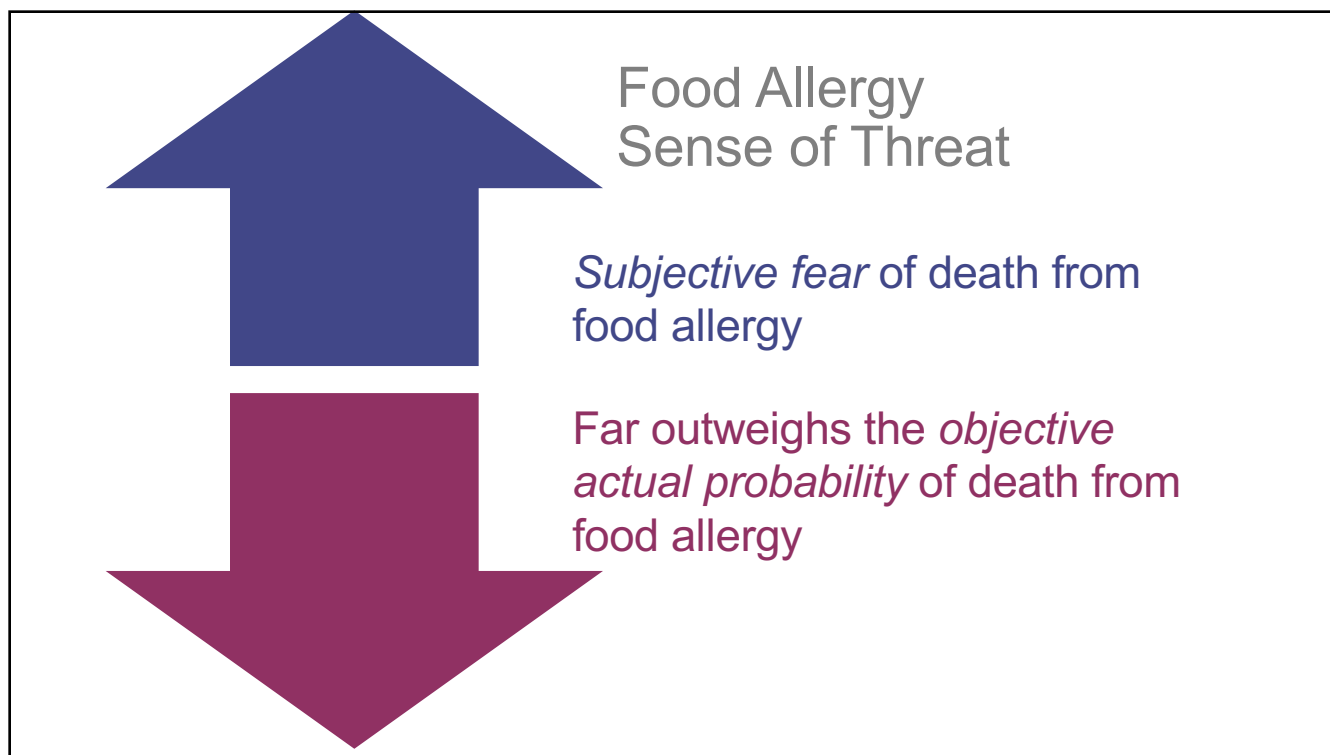


Uncertainty/ Lack of  
Control



Low Efficacy / High  
Stakes Emergency  
Response Demands

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## Psychosocial Research in Food Allergy

Burgeoning science of the psychosocial impacts of living with food allergy

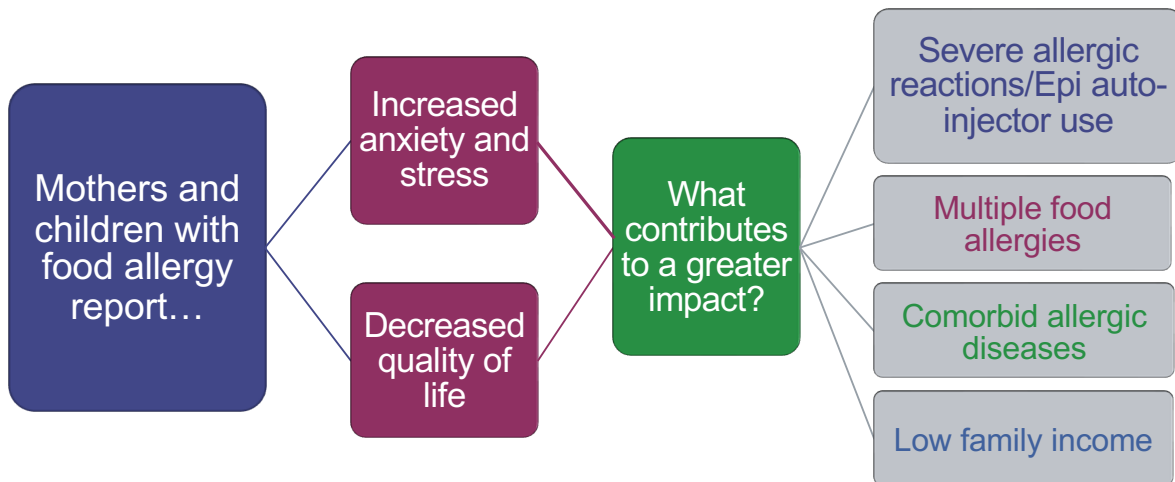
Examines:

General quality of life (QoL)  
 Health-related quality of life (HRQoL)  
 Food allergy specific quality of life (FAQoL)  
 Stress  
 Anxiety  
 Clinical psychopathology

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## Research Findings



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## Research Findings



*Perception* of the food allergy experience influences psychological outcomes

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## Future Research



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Coping with Allergic Reactions



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# Food Allergic Reactions

Food Allergy reactions are typically unexpected / shocking

Reactions can be highly stressful regardless of severity

Reactions may be perceived as life-threatening whether they factually are or not

All involved (patient, caregivers, witnesses) may feel panicky & flustered



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## Coaching Caregivers – Be Prepared for an Allergic Reaction



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# Coaching Caregivers – Prepare for an Allergic Reaction



**Stay Calm**  
 Fight/flight/freeze response impairs executive function  
 Uncertainty leads to hesitation and delayed responding

**Calm & Effective Response**  
 Preparation  
 Rehearsal

**Patient's Allergens**  
 Know the specific allergens that may trigger an allergic response

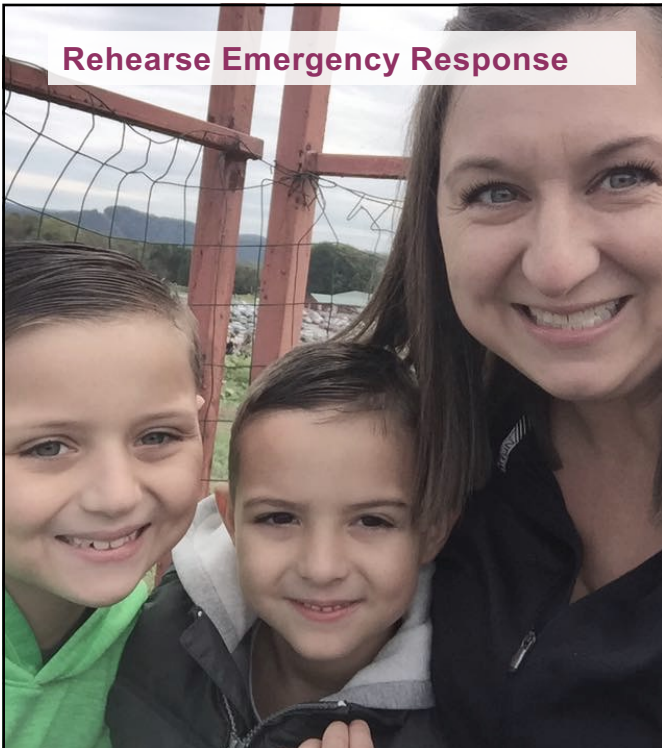
**Allergy Action Plan**  
 Have a plan that outlines when to give epinephrine, when to call 911

**Signs of an Allergic Reaction**  
 Is this anxiety? A true allergic reaction? Understand how young children describe an allergic reaction

**Proper Use of Epinephrine**  
 Practice using your device  
 Epinephrine FIRST, Epinephrine FAST

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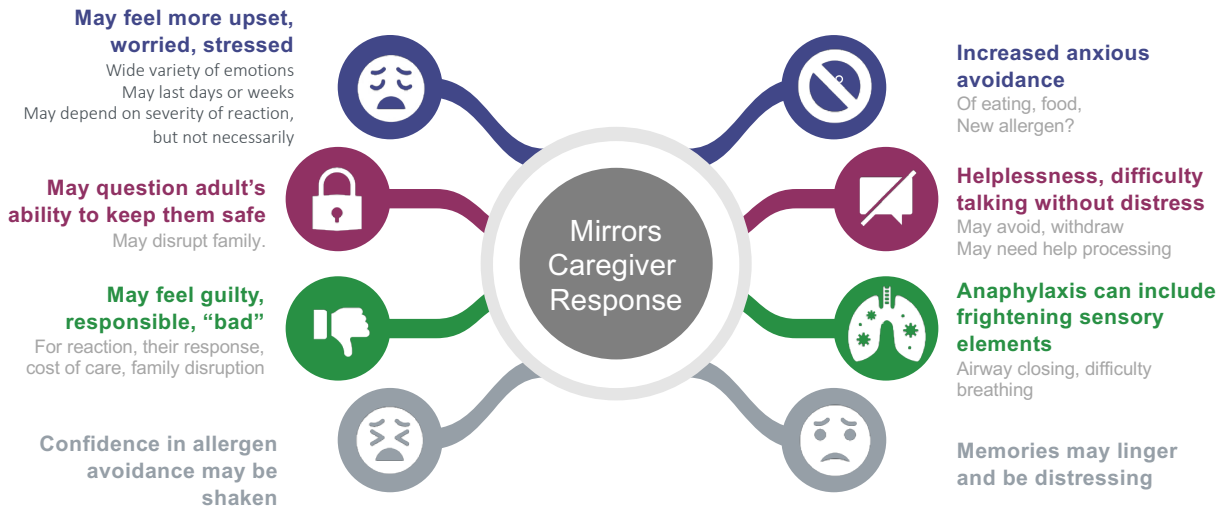
## Rehearse Emergency Response



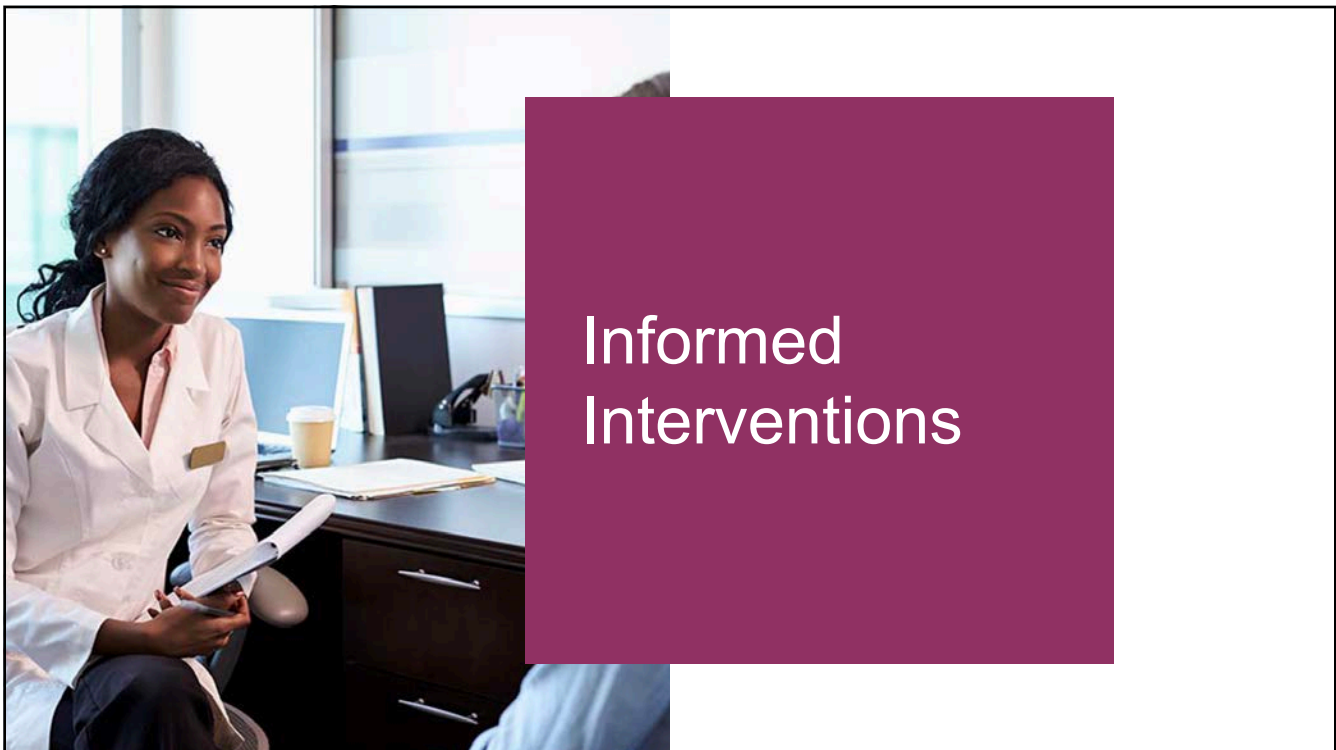
- “Allergic Reaction Drills”**
  - Home
  - School - Table Top Drills
- Use imagination, dialogue or role play**
- Practice communication with the child / patient**
- Practice using calm demeanor**
- Rehearse asking for what is needed**

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# Potential Patient Responses



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## Cognitive-Behaviorally Informed Interventions

Psychoeducation



Problem Solving

Beliefs & Mindset /  
Thought Challenging



Self-Monitoring  
Skill Building

Coping Skills



Other: Acceptance & Commitment  
Therapy, mindfulness-based  
Cognitive Theory, Dialectical  
Behavior Therapy

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## Psychoeducation: Risk

Unrealistically high estimates of food allergy risk creates anxiety



Collaborate with physicians to create hierarchies of risk situations  
instead of "Safe" vs "Unsafe" situations

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## Skill Building Techniques



**Education**



**Role Modeling**



**Role Playing**



**Rehearsal**



**Story-boarding  
Use of Play**



**Creative Therapies**

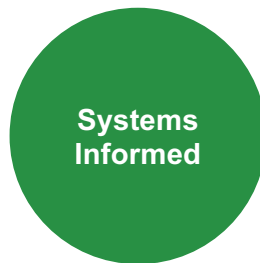
Art, Writing, Journaling, Blogging, Poetry

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## Other Approaches



**Self  
Compassion**



**Systems  
Informed**



**Trauma  
Informed**

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## Family & Systems Informed Goals

01

Shared view of food allergy living  
Common language to discuss food allergy

02

Agreed upon health behavior strategies that all endorse & support

03

Strategies for mutual support

04

Appreciation of the meanings that food allergy may have for family members

05

Increased acceptance of family members' emotions & expression

06

Understanding of family members' responses to stress & adversity

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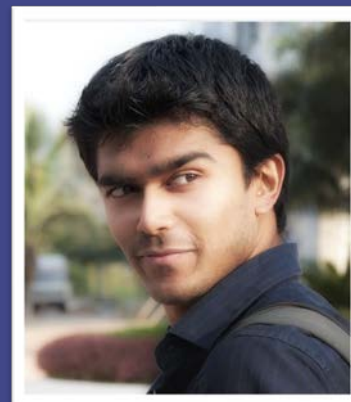
## Brandon

- High School Senior with Nut allergy
- He and parents never received basic food allergy education (that he knows of)
- Angry that parents don't ever discuss his allergy with him
- Unnecessary food and situational avoidance.
  - Frequently takes Benadryl for imagined reactions
  - Admits this is mostly to quell his anxiety.
- Reports feeling "on edge all the time," especially around food
- Concerned he can't tell the difference between anxiety and a reaction

Most recent reaction: cookies friend brought to an after-school meeting

Assumed absence of "contains statement" meant cookies were safe

EMT told him "Good thing you didn't use Epi - they hurt!"



Worries about starting college:

Having a reaction away from home  
Making friends who won't think he's "a freak"  
Finding safe food  
Dating

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## Issues in Brandon's Case

01 Chronic anxiety

02 Avoidance behavior

03 Lacking or inaccurate food allergy management information

04 Worries about the future

05 Social skills

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## Kerry



- Mom of 2 children, each with different food allergies
- Feels she is “on it” when it comes to finding safe foods for both kids.
- Packs food “constantly” for school, day trips, weekend trips, vacations, and visits to family, saying, “I never want the kids to miss out... I want them to feel normal.”
- Works part time. Reports being exhausted and concerned that she “can’t keep this up.”
- Tears up immediately when asked about recent allergic reactions. Describes feeling shocked and angry with herself that an allergen slipped through.
  - States that she feels helpless when she thinks about it, so she tries not to
  - Says she has had nightmares about her children’s reactions, even though only one was severe
- Is dreading upcoming Oral Food Challenge

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## Issues in Kerry's Case



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A Home Study Course for Mental Health Professionals

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# The Mental Health Professional's Guide to Psychosocial Issues in Food Allergy

Home Study Course



## One of a kind program

Designed to enhance health practice  
Licensed professionals  
Increase competence & confidence in working with food allergy



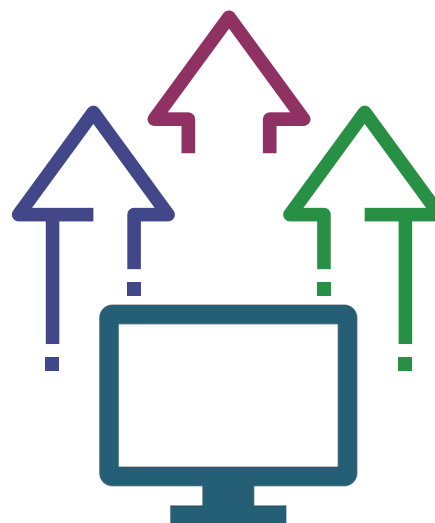
## 11 program modules – online learning

Self-paced, on demand learning – complete from the comfort of your home and on your schedule  
Printable slides & reference lists



## Evidence-based, practice proven

Professional faculty – psychologists, medical doctors  
Foundational knowledge – medical & psychosocial  
Case studies, appropriate interventions



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## Why Take This Course?

**The food allergy population is growing – more than 30 million patients – a significant number need mental health support**

### Career Enhancement

New in career? Grow your practice  
Mid-career practitioners – Add to your practice  
Learn how to serve families with food allergies.

### CE offered through NBCC

Earn CE while you learn.



### Modules offered:

- Food Allergy 101
- Foundational Knowledge & Patient Self-Management
- Understanding the Burden
- Developmental Stages in Food Allergy: Infancy Through the Preschool Years
- Developmental Stages in Food Allergy: Elementary & Middle School
- Developmental Stages in Food Allergy: Adolescents
- Oral Food Challenges & Immunotherapy: Helping Parents Cope
- Assessing Psychosocial Issues in Food Allergic Patients
- Coping with Allergic Reactions & Oral Food Challenges
- Interventions in Food Allergy

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Following participation in the Home Study Course, you can apply to be a

# FOOD ALLERGY COACH



**Certified by Allergy & Asthma Network**

Join our list of approved providers



**Promotion of Coaching Practice**

Can be done locally or remotely

Option to join our HIPAA-compliant telehealth platform for certified coaches



**For more information contact us at**

**[info@allergyasthmanetwork.org](mailto:info@allergyasthmanetwork.org)**

Join our food allergy community! Make a difference!

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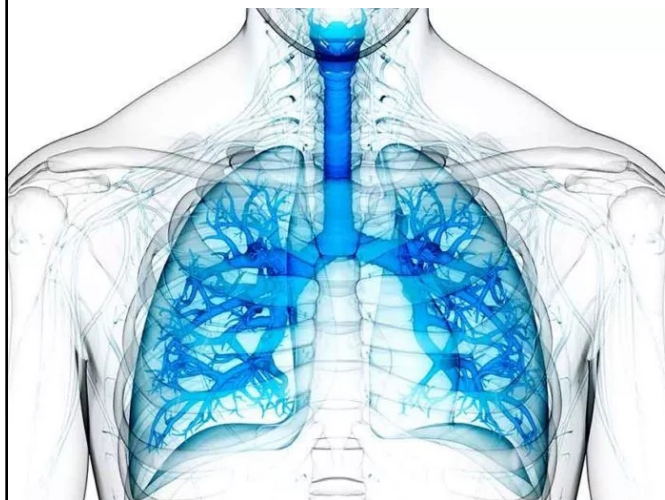
## QUESTIONS



We'll get to as many questions as we can!

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## Next Webinar



# COPD Phenotypes

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July 26, 2022

4:00 PM ET

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## Breathe Better Together



[allergyasthmanetwork.org](http://allergyasthmanetwork.org)



Please stay online for 2-3 minutes to complete the evaluation survey – we use this information to plan future webinars!

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