



cicbaa

## **French Allergy vigilance Network reports about severe anaphylactic reactions to Foods from 2001-2004**

DA.Moneret-Vautrin (Nancy), N.Petit (Verdun ),F.Rance (Toulouse), M.Boulegue (Brive la Gaillarde), G.Kanny (Nancy ), R.Mazeyrat ( Herblay), C.Gallen (Narbonne), M.Morisset ( Nancy), K.Breuil (Poitiers ), J.Gayraud (Tarbes ), L.Guenard (Strasbourg), I.Bossé (La Rochelle), C.Dzviga (St Etienne), JL.Grand (Liege ), G.Haddad (La Rochelle ), F. Louis Donguy (Nice), C.Mouton (Nancy), C.Nootens (Bruxelles), D.Schwender (Dijon), MV.Vodoff ( Mulhouse), E.Beaudouin (Remiremont-Epinal), A.Beker (Grenoble), M.Bouvier (Lyon), A.Cheynel (Chambéry), C.Douillet (Montereau), M.Dron Gonzalves (Martigues), E.Drouet (Amboise), M.Epstein (Paris), MF.Fardeau (Aix En Provence), F.Leprince (St Quentin), J.Lesellin (Angers), V.Mercier Plotton (Montbrison), JP.Meyer (Dole), D.Mongin (Paris), B.Omajee (Reunion), M.Perimony ( Rouen), F.Pirson (Bruxelles ), P.Scherer (Chalons sur saone), G.Taburet ( Brest ), D.Aubry (Vannes), A.Auffret (Angers), P.Auriol (Bordeaux), P.Beaumont (St Maur), L.Bensignor (Vendome), M.Buard (Rennes), P.Chalmet (Montmuçon), V.Cordebar (Nancy), A.Croizier (Nancy), JM.Cuny (Remiremont), P.Dauptain (Montaigu), C.Debaeleviere (Boulogne sur mer), Delaval (Rennes), C.Deluze (Geneve), P.Demoly (Montpellier), JM.Devoisins (Cholet), B.Dubegny (Laval), C.Ducrot; (Echirolles), C.Dupont (Paris), Y.El Guedarri (Maroc), JL.Hallet (Luneville), S.Hassoun (Challans), N.Herpin Richard (Le Chesnay), D.Horeau (Laval), JP.Jacquier (Chambéry), F.Jackson (Epinal), AM.Jonathan (Sevres), F.Le Pabic (Lorient), JP. Mallet (St Nazaire), C.Martens (Paris), I.Molle ( Rezé), P.Monin (Nancy), R.Navarro (Nice), P.Nicolas (Poissy), A.Noiret (Lyon), M.Nozick (Chelles), E.Paty ( Paris), F.Pierson (Liège), H.Pouvreau (Poitier), A.Rahmani (Meknes), JM.Rame (Besançon), D.Sabouraud (Reims), I.Sullerot (Sens), A.Thillay (Joué les Tours), E.Thomas (Chaumont), G.Vidal (L'Aigle), H.Zana (Belfort).

Allergy Vigilance Network, Internal Medicine, Allergology and Clinical Immunology. Nancy University Hospital.

The increased prevalence of food allergies points to the need of an Allergyvigilance Network, created since January 2001 (1). The main objectives are to index the cases of lethal or prelethal anaphylaxis and to evaluate the risk of new foods (2, 3) .

## **Materials and Methods**

The network is composed of 330 trained allergists. Around 80 declared severe anaphylaxis cases: anaphylactic shocks (AS), laryngeal angioedema, severe acute asthma.

Table 1: Clinical manifestations observed during food anaphylaxis reported since 2001

		Childs		Adults	
Total of the observations		94		200	
<b>Major clinical symptoms</b>	Anaphylactic shock	34	36.2 %	113	56.5 %
	Severe acute Asthma	6	6.4 %	6	3 %
	Laryngeal angioedema	16	17 %	23	11.5 %
	Serious anaphylactic systemic reaction	38	40.4 %	58	29 %

**Table 2** : Food involved in severe allergic reactions

Food Allergens		2002 (107)		2003 (85)		2004 (102)
<b>Peanut</b>		n = 14	13 %	10	11.7 %	10
<b>Other Legumes</b>		11	10.3%	5	4.7 %	7
Soy		3		3		-
Lupine		7	6.5%	1	1.2%	7
Lentil		1		1		-
<b>Tree nuts</b>		16	15%	13	15.3%	18
Cashew nut a, pistachio b		5a, 1b		3a, 2b		6a
Hazelnut		4		2		2
Pine kernel		1		1		4
Walnut, chestnut		2a		2a, 2b		2a, 1 b
Almond a , Brazil nut b		2a, 1b		1b		1b
<b>Latex cross-reacting Food</b>		13	12.1%	5	5.9%	11
Avocado a, kiwi b		4a, 2b		-		1b
<b>Buckwheat</b>		3	2.8 %	4	4.7%	8
Banana a, fig b		1a, 2b		-		2a
Melon a, jack fruit b mango c		1a		1b, , 1c		-
<b>Wheat</b>		7	6.5 %	4	4.7%	7
<b>Celery</b>		5	4.7%	3	3.5%	9
Sunflower seed		-		-		1
Fennel		-		1		-
Chicory a, artichoke b		1		1a, 1b		-
Mustard a, beetroot b		1a		1 b		-
Garlic a, Onion b, shalott c		-		1a, 1 c		1a, 1 b
Peach a, apple b, pear c		2a, 1c		-		1b
Hemp a, Blackberry b		-		1b		1 a
<b>Sesame</b>		3	2.8 %	2	2.4%	2
<b>Crustaceans</b>		10	9.3 %	9	10.6%	10
<b>Shrimp</b>		9	8.4 %	7	8.2 %	8
Crab, speeder crab		1		1		1
<b>Molluscs</b>		6	5.6 %	10	11.7%	5
<b>Snail</b>		5	4.7%	8	9.4%	5
Cuttlefish, calmar		1		1		-
Scallop a, oyster b		-		1a		1b
<b>Milk</b>		3	2.8 %	11	12.9%	6
Cow's milk		3		9		1
goat a, ewe b, mare c milk				1a, 1b		2a &b, 1c
<b>Egg</b>		-		-		2
Hen egg a, goose b		-		-		1a, 1b
<b>Meat, offals</b>		4	3,7%	3	3.5%	1
Poultry		2		-		-
Pork a, Bovine albumine serum b		1a		1 b		-
Kidney		1		2		1
<b>Fish</b>		2	1.9%	-		1
Pollens a, <i>S. cerevisiae</i> b		-		1a		1a, 1 b
Quinine (Schweep's)		1		-		-
House dust mites		-		-		1
Sulfites a, Inuline b		1a		-		2 a, 1 b
<b>Idiopathic Shock</b>		4	3.7%	3	3.5%	1
						0.9%

Table 3: Particularities of the food anaphylaxis reported since 2001

	<b>2002</b>	<b>2003</b>	<b>2004</b>
<b>Admission in Emergency Unit</b>	<b>89 %</b>	<b>73 %</b>	<b>72.6%</b>
<b>Epinephrine injection</b>	<b>55 %</b>	<b>49,5 %</b>	<b>44.1%</b>
<b>Hospitalization</b>	<b>65,4%</b>	<b>52 %</b>	<b>53.9%</b>
<b>Associated factors :</b>	<b>17 (15.9%)</b>	<b>5 (5.9 %)</b>	<b>16 (15.7 %)</b>
Exercice	4 (3.7 %)	5 (5.9 %)	10 (9.8 %)
Alcohol	5	1	4
Aspirine, NSAII	-	-	1
Inhibitor of ACE	-	-	1
Sirolimus,	4	4	5
Tacrolimus	1	2	1
β Blocklors			
Sartans			
<b>Ingestion of masked allergens</b>	<b>14 cases</b> Peanut: 6 Lupine: 4 Hazelnut: 1 Walnut :1 Sesame : 1	<b>7 cases</b> Peanut : 4 Lupine : 1 Walnut: 1 Cow's milk : 1	<b>17 cases</b> Lupine : 4, Buckwheat :2 Peanut : 2, Celery :2, Mites :1, Wheat isolate :1, Ewe milk : 2 ; nuts : 1 Egg :1; Cow's milk 1

## **Results**

From January 2001 to December 2004, the register encloses 294 cases (32% children and 68% adults): 3 cases of lethal anaphylaxis have been recorded. The most important allergens were peanut (11.5%), tree nuts (16%), other Legumes (7.8% including lupine 5.1%), latex cross-reacting foods (9.9%), wheat (6.1%) and celery (5.8%).

Anaphylaxis to crustaceans (9.9% including shrimps 8.2%) and mollusks (6.5% including snails 6.1%) are especially observed in patients allergic to dust mites.

The major associated risk factors were exercise (13%) and alcohol (6.5%). Wheat is the main allergen in exercise-induced.

If peanuts and tree nuts are the first cause of food anaphylaxis in France, they are not as important as in USA, concerning only 27.5%.

The incriminated foods are extraordinarily various, reflecting the French gastronomic habits. 5 AS (including 1 death) were attributed to masked peanut in macaroons.

Declaration of lupine (4) is not required according to the new European Community food labelling legislation, even though the main cause of masked food anaphylaxis (9/34 cases).

## **Conclusion**

This Allergovigilance Network provides helpful data, especially for the National Agency for Safety of Foods and the French Customs and Frauds Authorities.

## **References**

1. Moneret-Vautrin DA, Kanny G, Parisot L et les membres du, réseau d'allergovigilance. First survey from the "Allergy vigilance Network": life-threatening food allergies in France. *Allerg Immunol* 2002;34:194-198.
2. Moneret-Vautrin D, A, Morisset M, Flabbee J, Beaudouin E, Kanny G. Epidemiology of life-threatening and lethal anaphylaxis: a review. *Allergy* 2005;60:443-451.
3. Morisset M, Moneret-Vautrin DA, Kanny G and the other members of the Allergo-vigilance members. Prevalence of peanut sensitization in a population of 4737 subjects- An allergovigilance network enquiry carried out in 2002. *Eur Ann Allergy Clin immunol* 2005;37:54-57.
4. Moneret-Vautrin DA, Guérin L, Kanny G, Flabbee J, Frémont S, Morisset M. Cross-allergenicity of peanut and lupine: the risk of lupine allergy in patients allergic to peanuts. *J Allergy Clin Immunol* 1999;104:883-888.