ADVERSE FOOD REACTIONS

	FOOD ALLERGY	COELIAC DISEASE	FOOD INTOLERANCE
PRESENTATION	Infantile eczema (particularly facial) Acute reactions: Rash around mouth Hives / swelling Vomiting Breathing difficulty Anaphylaxis	Fatigue Gastrointestinal: Bloating Cramps Diarrhoea Anaemia Osteoporosis NB: May have no symptoms	Episodic / recurrent: Hives / swellings Stomach / bowel irritation Headaches / migraine Fatigue / aches / pains Mouth ulcers Sinus congestion/polyps Children: Irritable behaviour ('colic / screaming', disturbed sleep, leg aches & pains, ADHD) Reflux (from birth) Eczema / itchy rashes Nappy rash
AGE OF ONSET	Infants & toddlers (mostly)	Any age	Any age
FAMILY HISTORY	Atopic (asthma, eczema, hay fever)	HLA GENE ASSOCIATION: coeliac disease, diabetes, thyroid disease	COMMONLY: irritable bowel, hives, headaches, mouth ulcers
REACTIONS	Immediate (minutes → 1–2 hrs) Reproducible	Chronic Reproducible	Hours → days Variable
MECHANISM	Immune (IgE antibodies)	Immune (inflammatory T cells)	Non-immune (irritation of nerve endings)
FOOD TRIGGERS	Specific food proteins: (egg, milk, peanut, tree nuts, sesame, fish, crustaceans)	Gluten (wheat, barley, rye)	Natural food chemicals: (salicylates, amines, MSG) Additives
TESTS	Skin prick tests, blood tests (RAST) — measure IgE to specific allergens	Must be eating gluten: - Antibodies to tissue transglutaminase - Small bowel biopsy to confirm diagnosis	Elimination diet Food chemical challenges
DIETARY MANAGEMENT	Complete avoidance of single food(s)	Gluten-free diet (strict)	Comprehensive dietary modification: Maintain overall chemical intake below reaction threshold
OUTCOME	Egg, milk: usually outgrown Peanut, tree nuts, seafood: often persist (70-80%)	Life-long immune reactivity Bowel pathology & antibodies usually return to normal on gluten-free diet	Life-long susceptibility Variable tolerance Symptoms can come and go