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**Don’t Eat Those Peanuts: America’s Growing Food Allergy Problem Triggers a 377% Increase in Medical Claims**

What do [Miley Cyrus, Serena Williams, Halle Barry, Steve Martin, and Billy Bob Thornton](https://www.slideshare.net/allergyable/20-celebrities-with-food-allergies) all have in common? Food allergies. But food allergies don’t strike just the rich and famous. An estimated [15 million people](https://www.foodallergy.org/) in the United States are afflicted with this malady—and reported cases are skyrocketing.

According to [the Mayo Clinic](http://www.mayoclinic.org/diseases-conditions/food-allergy/symptoms-causes/dxc-20317255), it can take from a few minutes to two hours for food allergies to kick in, which can be accompanied by some common symptoms. You might feel a tingling sensation or itching in your mouth, or you might break out in hives, itch, or develop eczema. Your lips, face, tongue, throat, or other parts of your body might swell up from edema. You might suffer watery eyes or nasal congestion. More seriously, you could feel abdominal pain, develop diarrhea or nausea, or vomit.

It’s true that some mild reactions, such as watery eyes, a runny nose, or hives, can be easily remedied with a dose of Benadryl®. And some more acute sufferers who vomit feel better right away.

But in more serious cases, food allergies can result in potentially deadly anaphylaxis, a severe, life-threatening allergic reaction that can be triggered by food.

With anaphylaxis, you can have difficulty breathing because you feel your airways constricting, or you get a swollen throat (or the sensation of a lump in your throat). A severe drop in blood pressure can produce shock. You can register a rapid pulse, suffer dizziness, feel lightheaded, or even lose consciousness.

When anaphylaxis occurs, the person affected must be immediately rushed to the emergency room, where the drug epinephrine is the first line of defense.

How serious is food-related anaphylaxis? Fortunately, according to best-informed sources, only [11 people](file:///C:\Users\wolco\Documents\2017%20Job%20Hunt\from%20anaphylaxis%20each%20year%20from%20food%20allergic%20reactions) a year die from food allergies. But the organization [FARE (Food Allergy Research & Education),](http://home.allergicchild.com/how-serious-are-food-allergic-reactions/) reports that every three minutes, a food allergy reaction triggers an emergency room visit, resulting in over 200,000 emergency department visits annually.

According to a study undertaken by [FAIR Health](https://www.fairhealthconsumer.org/), a leading nonprofit that analyzes U.S. medical claims, from 2007 to 2016, private insurance claim lines (the individual services or procedures listed on an insurance claim) listing diagnoses of anaphylactic food reaction jumped a whopping 377%. That’s an amazing increase.

Naturally, medical researchers are trying to fathom this dramatic rise. Is it merely increased reporting? Or could other factors (environmental, social, or genetic, for example) be involved? To help the medical world understand the growing health issue of food allergies, FAIR Health has broken down the claims data to provide clearer findings so we know exactly who is experiencing this medical condition, and why. It draws on a database of over 23 billion privately billed medical and dental healthcare claims from more than 60 contributors nationwide.

First of all, what kinds of foods are triggering these serious reactions? Peanuts emerge as the main culprit, accounting for 26% of claim lines. Next in line are tree nuts and seeds, yielding 18%. The third major cause is eggs, at 7%. Our friends the crustaceans (lobsters, crabs, shrimp, and crayfish) originate 6%. Milk products cause 5%. Both 1) fish and 2) fruits and vegetables weigh in at 2%. Food additives constitute only 1% of claim lines.

When doctors can’t determine what exact food caused an anaphylactic reaction, they often enter a diagnosis code for “other specific foods.” This trigger accounts for 33% of food-related anaphylaxis claim lines, making it the single biggest nemesis for those with food allergies, outweighing peanuts at 26%. That means there’s a whole array of foods out there that are prompting these violent allergic reactions.

However, from 2007 to 2016, while claim lines for “other specific foods” only increased by 71%, the claim lines for peanuts shot up by 445%, and those for tree nuts and seeds jumped by a stunning 603%. Nuts and seeds are clearly in the ascendancy as a cause for anaphylactic food reactions.

What about geographic distinctions? In this study period, from 2007 to 2016, rural food-related anaphylactic claim lines shot up by 110%, while urban claim lines only increased by 70%. What’s happening out in the countryside? Are folks in rural areas consuming more of these treacherous foods, or is something else going on? That’s a puzzle that medical researchers are currently tracking.

When you break down the claim lines data by age group, which age group is suffering the most from anaphylactic food reactions? It’s the youngest, children from ages 0 to 3, who account for 27%. One theory: their immune systems are just developing, so they’re the most vulnerable. But for some reasons, when children become 4 and 5 years old, the rate drops dramatically to 8%. Do the developing immune systems of 4-to-5-year-olds suddenly resurge?

Then mysteriously enough, when children reach 6 to 10, the rate doubles to 16%. Is it school lunches? (Just kidding, but one wonders.) From then on, as patients get older, they continue to report steadily less incidence of food-related anaphylaxis. Young people aged 11 to 18 only make up 15%. Young adults aged 19 to 30 are responsible for a lower 9%. Americans from 31 to 40 represent 8% of claim lines; from 41 to 50, 7%; from 51 to 60, 6%; and over 60, 4% (the same percentage, oddly enough, as 4-to-5-year-olds).

Of course, the best prevention lies in avoiding offending foods. After all, if Miley Cyrus can learn to flee gluten and lactose and Serena Williams can be wise enough to dodge incoming peanuts, can’t the rest of us with food allergies learn to do the same?