Insect Sting Allergy

What You Should Know About Insect Sting Allergy

Local reactions (any swelling contiguous to the sting site no matter how large) in absence of systemic symptoms

do not predict a

severe reaction.

REACTIONS CAN VARY FROM LOCAL TO SYSTEMIC

- Insect sting reactions can range from mild and local to anaphylactic.
- Symptoms of an allergic reaction usually occur within minutes of the insect sting.
- Local reactions typically are found at the site of the sting and cause painful swelling and itching.
- Some local reactions can involve swelling of an area larger than the sting site. For example, the entire arm can become swollen from a sting on the hand.
- Symptoms usually disappear within a few hours, but can last 1-2 days.

SYSTEMIC REACTIONS CAN BE OF TWO TYPES:

- Cutaneous only: Symptoms or signs involving the skin only, such as hives, flushing, or swelling. This type of systemic reaction has a different prognosis in children compared to the cardiopulmonary reaction.
- Cardiopulmonary: Symptoms or signs that involve the cardiovascular and/or pulmonary system.

MANAGING STUDENTS WITH INSECT STING ALLERGY

Identify each allergic student. Get information about previous history of reactions and the insect that caused the reactions.

Minimize exposure to stinging insects. Avoidance is the key to preventing an allergic reaction. Following are a few strategies to minimize risks of encountering stinging insects.

- · Have students avoid wearing flowers, i.e., corsages, outdoors.
- Have students wear long-sleeved shirts, long pants, and shoes when walking in grassy areas.
- Keep hands and face clean of sweet liquid: soda pop, juice, ice cream, butter, meat juices.
- Keep students away from large bushes, especially flowering ones.
- Keep garbage covered.
- Do not eat or drink sweetened liquids outdoors. If unavoidable, pour soda into clearcolored cups so you can see what's in it at all times and keep sweetened drinks covered.

Treatment. It is not uncommon for stings to cause immediate pain or pain followed by swelling and itching. To relieve mild symptoms:

- Place a cold compress on the sting site.
- If available for the student, antihistamines may be used to relieve itching.
- A paste made of baking soda and water is helpful to reduce reactions.
- Any child with a systemic reaction should be evaluated by an allergist/immunologist for possible venom immunotherapy.

Seek medical attention immediately if the student has a history of anaphylaxis or call 911 immediately if the student appears to be developing symptoms of anaphylaxis. See the anaphylaxis section for more information.



What You Should Know About Latex Allergy

Latex allergy is an emerging health issue believed to affect 5 to 10 percent of healthcare workers. The increase in the prevalence of latex allergy is believed to be associated with the increased use of latex gloves by healthcare workers in the mid 80's in response to the AIDS epidemic. While statistics are unclear for the prevalence within the general population, it is estimated that somewhere between 1 to 6 percent of the general population has been sensitized to latex.

HIGH-RISK GROUPS

- · Rubber industry workers.
- Children with spina bifida and others who have undergone multiple medical procedures (where latex products are commonly used).
- · Health care workers.

LATEX AND FOOD ALLERGY CONNECTION

People with latex allergy may also experience an allergic reaction to some foods that contain the same allergic proteins as those found in latex. This reaction, called crossreactivity, can be triggered by:

bananas	kiwi
chestnut	celery
passion fruit	melon
avocado	

SYMPTOMS CAN RANGE FROM MILD TO SEVERE

Skin	Respiratory
contact dermatitis	itchy, red, watery eyes,
(poison ivy-like rash, which appears	sneezing
12 to 24 hours after contact)	runny nose
hives	coughing
rash	

A severe reaction could include difficulty breathing, shortness of breath, shock, loss of consciousness, and death. See anaphylaxis section.

AVOIDANCE STRATEGIES

There is no cure for latex allergy; avoidance of latex-containing products is the only way

SCHOOL NURSE	to prevent a reaction.	
NURSE	Latex-containing products that commonly	Latex-containing products* that rarely
	cause reactions	cause reactions
	Gloves	Rubber bands
	Balloons	Erasers
	Condoms	Rubber parts of toys
		Products made from crepe rubber (soles of shoes)
		Latex clothing
		Elastic in clothing
		Feeding nipples and pacifiers

