



Avoiding food allergies in babies

Information sheet for patients and carers

Is this information for you?

This information is for you if:

- you are a parent or carer of a baby, and you want further information about reducing the likelihood of your baby becoming allergic to various foods.

This information is not for you if your child has been diagnosed with a food allergy.

About food allergies in babies

What is an allergy?

An allergy is a condition that occurs when your immune system has a bad reaction to something that is usually otherwise harmless.¹ People can have allergic reactions to food, medication, animals and insect bites.

What is an allergen?

An allergen is a **food, medication, animal or insect bite** that creates an allergic reaction in someone.

Are food allergies common in babies?

About 10% of babies in Australia and New Zealand have food allergies.¹ However, most of these allergies will not be severe or life-threatening, and many babies will outgrow their food allergy.

What foods can cause an allergic reaction?

While almost any food can potentially cause an allergic reaction, the most common foods that cause allergic reactions are:¹

- cow's milk and dairy products made from cow's milk
- eggs
- peanuts
- tree nuts
- sesame



- soy
- fish (including shellfish)
- wheat.

Why general practitioners do not recommend excluding these foods in babies' diets

There are two main reasons general practitioners (GPs) do not recommend excluding these foods in your baby's diet (once you have started your baby on solid food):

- **The risk of developing a food allergy increases if your child does not eat these foods in their first twelve months.** Delaying feeding commonly allergic foods to babies has been shown to increase their risk of developing a food allergy.²⁻⁵
- **Excluding foods to prevent allergies may cause harm, and not provide any benefit.** Excluding foods from the diets of babies and pregnant or breastfeeding adults does not prevent allergies. Many of the foods that some people are allergic to are an important part of a healthy diet, so avoiding them may mean that mother and child do not get all the vitamins and minerals they need. This could result in low birth weight, breastfeeding problems, slow growth and fussy eating.⁶⁻⁸

Common questions about food allergies

How can I tell if my child is having an allergic reaction?

Mild allergic reactions

Signs of a mild allergic reaction in babies include:⁹

- swelling of the face, lips or the eye area
- hives or welts (raised, reddened marks on the skin)
- vomiting.

Severe allergic reactions

Parents and carers need to be aware of the following signs of a severe allergic reaction, even though such reactions are rare:⁹

- difficulty breathing
- wheezing, coughing
- swollen tongue
- swollen throat
- difficulty swallowing (often the result of a swollen tongue or throat)
- a change in voice or cry
- skin suddenly pale
- floppiness
- fainting.

You can find more information at the National Allergy Council's 'Nip allergies in the bub' section on ['Identifying allergic reactions'](#).

What should I do if my child has an allergic reaction?

Immediately stop feeding your baby the food and seek medical attention.

If your baby is showing signs of a severe reaction, call an ambulance or go to the nearest hospital emergency department immediately.

For first aid tips about treating babies with an allergic reaction, go to National Allergy Council's 'Nip allergies in the bub' section on '[Identifying allergic reactions](#)'.

Can I get my child tested to see if they have allergies?

Allergy tests are usually done when an allergy is already suspected and the source of the allergy is unclear. If you suspect that your child might have an allergy, talk to your GP. As there are a range of different tests, your GP will advise which one is best for your child, and possibly refer you to an allergy specialist.

There is little evidence that any of the following can accurately identify allergies: commercial testing kits, vega testing, kinesiology, radionics, pulse testing, iridology, hair analysis or voice bio.¹⁰

If my partner or I have an allergy, does this mean that our child will have an allergy?

While a tendency to allergies can be inherited, allergies to specific foods are not inherited. So your child might have the same allergy, or a different allergy, or no allergy at all.

Alternatives

- Follow healthy eating guidelines while you are pregnant and while breastfeeding.¹¹
- If possible, breastfeed for the first six months and continue to do so after solids are introduced.^{6,12}
- Keep your baby away from second-hand smoke, and if you smoke, give up smoking.
- Introduce a variety of solid foods when your baby is ready (at around age six months, but not before four months) and start with foods rich in iron.^{2,13}
- Introduce common allergenic foods to your baby as follows:
 - Start giving your baby common allergenic foods (particularly smooth peanut butter, cooked egg, dairy products and wheat products) before their first birthday, even if they are at high risk of developing an allergy.^{2,14}
 - Introduce one common allergenic food at each meal, so that if your child does have an allergic reaction, you will know which food has caused the reaction.
 - Continue to regularly (eg twice a week) offer your baby all the foods they are not allergic to, because a varied diet may help to reduce the risk of an allergy developing.

More information

Australasian Society of Clinical Immunology and Allergy, [Allergy prevention – Frequently asked questions \(FAQ\)](#)

Australasian Society of Clinical Immunology and Allergy, [How to introduce solid foods to babies for allergy prevention – Frequently asked questions \(FAQ\)](#)

National Allergy Council, Nip allergies in the bub: [Around 6 months \(not before 4 months\): First foods – Smooth foods and soft lumps](#)

National Allergy Council, Nip allergies in the bub: [Around 7 to 9 months: Mashed foods and textured soft lumps](#)

National Allergy Council, Nip allergies in the bub: [Around 10 to 12 months: Soft chopped and mashed foods and finger foods](#)

References

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