

ALLERGIES

INCLUSIVENESS

' Every season can be allergy season, depending on what you're allergic to.'

- Clara Chung

The Aim of Scouting is to promote the development of individuals, enabling them to grow and take their place in society as active citizens. As we move forward with the Canadian Path we are much more aware of each individual's personal progression, inclusive of their varying abilities. This inclusiveness within Scouting uniquely positions us to play an important role in modifying community attitudes and behaviour towards individuals with identified needs; it starts with Scouts.

Please use this guide for a better understanding of youth with Allergies; how as Scouters, we can make a difference through simple interventions, program modifications and knowing where to get help when needed.

DESCRIPTION

Allergies are hypersensitive immune responses to substances that either enter or come in contact with the body, such as pet dander, peanuts, pollen or bee venom. A substance that causes an allergic reaction is called an "allergen". Allergens can be found in food, drinks or the environment.

Most allergens are harmless, i.e., the majority of people are not affected by them. However, if you are allergic to a substance, such as pollen, your immune system reacts to it as if it were a pathogen (a foreign harmful substance), and tries to destroy it.

The number of people worldwide with allergies is increasing; about 30% to 40% of people have an allergy at some stage in their lives.

The steepest increase in allergies has been observed in children, particularly food allergies; approximately 8% of North American children have some kind of food allergy.

CHARACTERISTICS/BEHAVIOURS

Dust and Pollen Allergies:

- Itchy, blocked or runny nose
- Itchy, swollen or watery eyes
- Cough, wheezing or shortness of breath

Skin Reactions:

- Flaking, itchy skin or peeling skin
- Hives - a red and very itchy rash that spreads, blanch when pressed

Food Allergies:

- Tingling or itchiness in the mouth; youth may describe as "spicy" feeling
 - Swollen face, lips, tongue or throat
 - Stomach cramps or vomiting
 - Diarrhea
 - Cough, wheezing or shortness of breath
 - Anaphylaxis; choking, dizziness, flushing, confusion, cold clammy skin, change of voice, fainting/unconsciousness
- see CAUTION below

Medication Allergies:

- Hives - a red and very itchy rash that spreads, blanch when pressed
 - Swollen face, lips, tongue or throat
 - Cough, wheezing or shortness of breath
 - Anaphylaxis; choking, dizziness, flushing, confusion, cold clammy skin, change of voice, fainting/unconsciousness
- see CAUTION below

Insect Sting Allergies:

- Anxiety
- Restlessness
- Swelling where the sting occurred
- Hives - a red and very itchy rash that spreads, blanch when pressed
- Chest tightness, palpitations
- Sudden drop in blood pressure
- Cough, wheezing or shortness of breath



- Anaphylaxis; choking, dizziness, flushing, confusion, cold clammy skin, change of voice, fainting/unconsciousness
- see CAUTION below

CAUTION

Anaphylaxis can kill very rapidly, but may not be instant; can occur any time up to 4 hours.

In such individuals the histamine release from exposure to an allergen is massive and wreaks havoc in the body, creating a severe state of inflammation showing itself in many of the reactions listed above. Prompt treatment is vital in stopping the reaction and reversing the problems arising from it. If not, death can occur.

Some people know if they suffer from anaphylaxis, but an anaphylactic reaction can be triggered in someone who has previously never had such a reaction.

Known anaphylaxis sufferers should wear Medic-Alert type bracelets or medallions to warn others of their susceptibility, and their likelihood of having a severe allergic reaction.

Adrenaline, also known as epinephrine, is a medicine that can halt the worsening of symptoms during a severe allergic reaction, and many anaphylaxis sufferers also carry auto-injectors of adrenaline in case of an emergency. Auto-injectors are special pen-like injection devices that are designed to inject a fixed dose of adrenaline into the thigh muscle; commonly referred to as an EpiPen. Make sure that youth and/or a trained Scouter are familiar with the administration of this life saving device. Call 911, remove the allergen if possible and ensure anyone who has suffered an anaphylactic reaction goes to a hospital immediately. The EpiPen is only a temporary aid, and the individual may require further medical attention.

IN A SCOUTING SITUATION

- All Scouters must be thoroughly familiar with both youth and adult members Program Participant Enrolment Forms or medical information on MyScouts, paying particular attention to the Information For Medical Emergencies section where participants allergies are listed - have a copy available at all times
- Scouters need to be familiar with what the triggering allergens are for a youth with an allergy
- Consult with the parents to know what that youth normally does when a reaction is triggered
- It is imperative that the youth bring any allergy medication with them to all outings and camps and advise the Scouter in charge accordingly – the same is applicable for regular weekly meetings

- EpiPen - One should be carried by the youth at all times, ideally a second should be available as a backup
- All Scouters must be familiar with the medication dosages required by youth - it is important to monitor youth administration of their allergy medication should a reaction occur
- Make sure all Scouters know where the medications are stored
- In case of severe allergy to food components, such as nuts, always check the labelling carefully before giving food to a youth with an allergy
- Remember that even small traces of food allergens can trigger anaphylaxis; can be just from touching/inhalation
- When preparing food, it is essential to prevent cross contamination of allergenic foods with non-allergenic foods - even safer, consider banning the allergenic food at camps, meetings, etc.
- Scouters must complete an Incident Report for youth that incur a moderate to severe allergic reaction

PROGRAM MODIFICATION SUGGESTIONS

- If any member has a known severe allergy or anaphylaxis, avoid any games or activities that bring that person into contact with the triggering allergen

FURTHER ASSISTANCE

This Info Sheet is a resource guide only and is not intended to be therapeutic, diagnostic, medical, or legal advice. Our best source of assistance for youth with identified needs is the youth's parents or caregivers; the information provided is designed to support the relationship that exists between a youth and his/her parents or healthcare providers and the Scouters involved with the youth.

SOURCES

Schwartz LB. Systemic anaphylaxis, food allergy, and insect sting allergy. In: Goldman L, Schafer AI, eds. Cecil Medicine. 24th ed. Philadelphia, Pa: Saunders Elsevier; 2011:chap 261. Wasserman SI. Approach to the person with allergic or immunologic disease. In: Goldman L, Schafer AI, eds. Cecil Medicine. 24th ed. Philadelphia, Pa: Saunders Elsevier; 2011:chap 257. www.nlm.nih.gov/medlineplus/ency/article/000005.htm, www.medicalnewstoday.com/articles/264419.php, and material adapted and used by permission of The Scout Association (UK), Scouts Australia, and Scouting Ireland.

