“Relaxed Readiness”
Vigilance And Preparation When Studying Abroad with Food Allergies

The Forum on Education Abroad
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Studying abroad comes with many rewards and challenges, but how do students (and their families), international offices, program providers and hosts prepare when a participant has a life threatening food allergy? The panel will explore the idea of “relaxed readiness” when dealing with food allergies and study abroad.

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David A. Tomseth, January 3, 1986-February 28, 2016
“Systemic Anaphylaxis…due to peanut ingestion”

Tissue donation: two people received David’s corneas and as to date 8 other people received tissue donations for life-saving and life-improving purposes
National Food Allergy Death Registry

Dr. Stacy Dorris, Assistant Professor of Pediatrics
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Nashville, TN
http://pediatrics.mc.vanderbilt.edu/directory.php?did=5422

2018
- GH | Blytheville, AR | Age: 31 | Tree Nut
- AH | Coweta County, GA | Age: 12 | Peanut

2017
- TS | Sandy, UT | Age: 14 | Peanut
- AM | Medford, MA | Age: 23 | Peanut
- MJ | Lihue, HI | Age: 27 | Unknown
- Anthony L. | Reno, NV | Age: 18 | Tree Nut
- AW | Birmingham, AL | Age: 3 | Baked Milk
- JM | Howard Lake, MN | Age: 15 | Peanut
- MD | Chicago, IL | Age: 15 | Unknown
- ES | New York, NY | Age: 3 | Milk
- AS | Independence, OH | Age: 18 | Peanut

2016
- Oakley Debbs | Kennebunkport, ME | Age: 11 | Tree Nut
- MP | San Bernardino, CA | Age: 14 | Unknown
- David Tomseth | Portland, OR | Age: 30 | Peanut
- DP | Los Angeles, CA | Age: 32 | Peanut
- AR | Peshtigo, WI | Age: 13 | Milk
- BK | Ramsey, MN | Age: 22 | Peanut
David Tomseth (DOD: 2/28/2016)

David Tomseth was 30 years old when he died of his allergy to peanuts. On the night of his fatal reaction, he was in a bar, with about 15-20 friends, when he went to get a drink. About 20 minutes later, he reported he was not feeling well. He went outside and quickly decompensated. He did not have his epinephrine auto-injector on him. 911 was called, EMS arrived, epinephrine was given, but he did not survive. He was pronounced dead in the Emergency Room of OHSU. David’s Certificate of Death states cause as being ‘Systemic Anaphylaxis probably due to peanut ingestion’.

Per his sister, he was diagnosed with a peanut allergy in 2nd or 3rd grade after having an allergic reaction during a school Halloween party. He had consumed a snicker bar (peanut containing candy bar). His mom was called as he was feeling sick. When his mom arrived at school, he was no longer to be found in the classroom. He was ‘found in the bathroom vomiting and gasping for breath’. He was subsequently rushed to the emergency room, where he was treated for anaphylaxis.

He also had allergic rhinitis and asthma. He took allergy immunotherapy (allergy shots) for years. His asthma was not well controlled.
Linfield College: study abroad and health

• Linfield College
  • residential, undergraduate liberal arts college in McMinnville, OR
  • nursing campus in Portland, OR
  • online degree program

• Study Abroad
  • semester/year abroad: 33 sites in 15 countries
  • 10-12 faculty led Jan Term off-campus courses

• The “Yellow Health Form”
  • students are self-reporting
  • school registered nurse review
  • message from IPO with follow-ups

• connecting with overseas partners about student health
LINFIELD STUDENT CASE STUDY
The student was vigilant and prepared!
Moderately successful health maintained in Ecuador!

- traditional age, female student with auto immune disease: Hashimoto’s Thyroiditis causing food allergies: EGGS, ALMONDS, PEANUTS, KIDNEY BEANS
- sought out appointment with Michele T. to discuss concerns surrounding dietary issues
- had previously participated in a short-term program in Oceania during high school:
  - NOT SUCCESSFUL
  - U. S. gov’t sponsored youth exchange program
  - health compromised
  - host family financial burden
    - forced to change host families, which caused discord
- Ecuador program and host family responsive to self-reported health issues
Food Allergies, Anaphylaxis & College Living
A presentation to
The Forum on Education Abroad

Jen Jobrack
Food Allergy Research & Education
March 22, 2018
Topics We’ll Cover

• What is FARE?
• Food allergy 101
• Emergencies
• Impact on college students
• Questions
Food Allergy Research & Education (FARE) is the result of a merger between Food Allergy Initiative (FAI) and Food Allergy & Anaphylaxis Network (FAAN).

As the leading non-profit working on behalf of the 15 million Americans with food allergies, FARE’s mission is to improve the quality of life and the health of individuals with food allergies, and provide them hope through the promise of new treatments.

Our work is organized around three core tenets:

- **LIFE.** Support the ability of individuals with food allergies to live safe, productive lives with the respect of others through our education and advocacy initiatives.

- **HEALTH.** Enhance the healthcare access of individuals with food allergies to state-of-the-art diagnosis and treatment.

- **HOPE.** Encourage and fund research in both industry and academia that promises new therapies to improve the allergic condition.
FARE College Program

• Support colleges and universities as they work to better meet the needs of students with food allergies
  • Access to training, guidelines, educational materials, funding
• Support students with food allergies
  • Student guides, student groups, college database
What is a food allergy?

• A food allergy occurs when the immune system mistakenly targets a harmless food protein – an allergen – as a threat and attacks it.
• Food allergies can be life-threatening.
• There is no cure for food allergy.
Common Food Allergens

• Eight foods are responsible for the majority of food allergy reactions in the United States:¹

• A person can be allergic to virtually **ANY** food
• **ALL** food allergies need to be taken seriously

Food Intolerance
• A reaction to food that does not involve the immune system and is not life-threatening.
  • Example: Lactose intolerance – trouble digesting lactose, a natural sugar found in milk, resulting in gas, bloating, stomach cramps, diarrhea.

Food Allergy
• A potentially serious reaction to food that DOES involve the immune system.
• Can result in anaphylaxis - a severe, potentially fatal allergic reaction.
  • Example: Milk allergy – an immune response to milk protein, ingestion of milk resulting in hives, wheezing, low blood pressure, and potentially death.

Celiac Disease*
• An auto-immune disease that damages the small intestines when gluten is consumed.
• Very serious, with long-term health consequences, but doesn’t result in anaphylaxis.

*For more information on Celiac Disease, visit www.celiaccentral.org
Food Allergies Are Life-Threatening

• 40% of children with food allergies have experienced a severe or life-threatening reaction.

• A food allergy reaction sends someone to the emergency room every 3 minutes, resulting in 210,000 visits each year.
What is anaphylaxis?

- Anaphylaxis is a severe allergic reaction that is rapid in onset and may cause death.
  - There is no way to predict whether a reaction will be mild or severe.
  - Severity of reactions & symptoms can vary from one reaction to the next
  - A seemingly mild reaction can turn life-threatening within minutes.
  - Symptoms can vary widely from person to person.
If a reaction involves mild symptoms from TWO or more of these areas, it is considered severe and should be treated as anaphylaxis.

For example, an itchy mouth combined with mild nausea should be treated as anaphylaxis.
Symptoms of a Food Allergy Reaction

A reaction involving even ONE severe symptom should be treated as anaphylaxis.
Epinephrine is the only medicine that can be used to treat anaphylaxis.

To view videos on how to use the epinephrine auto-injectors currently on the market, visit: www.foodallergy.org/treating-an-allergic-reaction/epinephrine
Food Allergy is a Serious Public Health Issue...

15 million Americans with food allergies
Affecting a Growing Number of Children

includes

5.9 million children (1 in 13)
Food Allergy Is On the Rise

- According to a 2013 report by the Centers for Disease Control and Prevention, there was a 50 percent increase in food allergy between 1997 and 2011.¹

- In addition, almost 1 in 3 children with a food allergy have multiple food allergies. ²

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So...what does this mean for college students?
This impacts EVERY aspect of life

The only way to avoid a reaction is avoiding ingestion. Sounds simple, but...

• Eating out (every day!)
• Parties
• Residence hall activities
• Roommates
• Classroom
• Dating
So you grabbed a meal free from your allergen…but…

cross-contact happens…A LOT
Food Shows Up...Everywhere
And complicates things you wouldn’t expect
Student Perspective

Social isolation is frequently cited as their number one fear
Risk-Taking Behaviors

69% of food allergy fatalities occur in 13-21 year olds

Risk-taking and coping strategies of adolescents and young adults with food allergy; Sampson, Munoz-Furlong & Sicherer
Common Risk-Taking Behaviors

• Failure to carry epinephrine
• Trying foods they are unsure of
• Improperly handling a serious reaction
• Failure to disclose their food allergies to those who do need to know (dates, food servers, colleges, etc.)
The Risks of Alcohol

And then they turn 21!

Do not assume a student with food allergies is just intoxicated. Allergic reactions and intoxication share these symptoms: flushed skin, confusion, vomiting and passing out.
Don’t Panic!

We are here to help you achieve “relaxed readiness” for your students, your host institutions, and your staff. There are tools that will help all of you create a safe and inclusive environment to maximize the study abroad experience.
Questions?

Food Allergy Research & Education

• Jen Jobrack, Senior National Director of Advocacy, jjobrack@foodallergy.org

• Kristi Grim, National Programs Manager kgrim@foodallergy.org
Snapshot: Institute for Study Abroad (IFSA)

• Third party provider sending students to 17 different countries in Asia, Europe, Latin America, Middle East and Oceania.
• Partner with over 300 U.S. colleges and universities to provide direct-enroll, center-based, and custom programming for undergraduate students.
• Three full-time Health & Safety staff members.
How We Work with Our Students

• Partner with home institutions to encourage early disclosure of medical needs.
• Post-acceptance medical form where students are asked (but not required) to disclose any allergies or dietary needs.
• Follow up from program advisors and Health & Safety team (depending on the severity of what is disclosed).
• Appreciative Advising
Challenges for the Student

• Allergy Shots (availability, administration)
• Different preparation of food
• Affects on housing choices
• Additional costs
• Homestays
• Discovery of new allergies
Challenges for the Provider

• Ensuring all programming, events, and housing are safe for the student.
• Making sure that the student has dietary options available.
• Weighing the student’s choices with the liability we’re willing to take on.
• Staff training in the event of a severe reaction: Do you use an epinephrine injector or First Aid?
• Adequate insurance coverage.
• Customized programs you have less (if any) direct communication with students or they may be going to multiple locations.
Finding Solutions

• How did the student work things out on their home campus?
• Flying
• Epinephrine autoinjector
• Allergy bracelets/cards in multiple languages
• Student Advocacy – give them the tools they need!
• Assistance from your insurance provider
IFSA Case Study

Maria is studying in London and discloses severe allergies in her medical form, saying she has gone into anaphylactic shock when exposed to nuts and plans to bring an epinephrine injector. Maria also disclosed depression and anxiety.

When placed in standard housing for her program, with a kitchen that is shared by 8-10 people, Maria says she can only share with 3-4 people and needs alternate accommodation. The housing provider then requests documentation of the allergy (which they receive from the student’s doctor) to put the student in a single suite apartment (where the student will not share a kitchen). This costs an additional $1,000 USD per semester.

After learning that the new housing is a 10-15 minute walk from her original housing where the other students are living and that she won’t be sharing a kitchen with others, Maria says that this housing won’t work for her either as she afraid of being isolated from others and won’t make any friends.
IFSA Case Study continued...

• Questions to consider:
  • What is the greater risk to the student? Increased exposure to her life-threatening allergy or the effects of feeling isolated on her depression and anxiety?
  • Who pays that additional $1,000?
  • What could have prevented or helped this situation?
  • Who makes the final decision of where the student will live?
  • Next steps?
RESOURCES

• Food Allergy Research & Education (FARE)
  One specific helpful resource is the Food Allergy & Anaphylaxis Emergency Care Plan (a printable sheet
describing the person’s allergies, symptoms of an allergic reaction, medication needed, how to
administer epinephrine, and emergency contacts.

• AllergySmartz
  An app for Android/Apple phones designed to help people communicate their food allergies/precautions
needed for safe food preparation, despite language barriers. The top 13 allergens are available (milk,
eggs, wheat, soy, peanuts, legumes, tree nuts, fish, crustacean shellfish, molluscan shellfish, sesame,
mustard, and corn) in 20 languages. No internet access is required after downloading the app.
https://foodallergylowdown.com/allergysmartz/

• Survival Kit: Studying Abroad with a Food Allergy (GoAbroad.com)
  This article provides helpful tips for someone preparing to travel abroad, pointing out items to take care
of such as medications, travel insurance, and understanding food customs of the country to where you
travel.
https://www.goabroad.com/articles/study-abroad/survival-kit-studying-abroad-with-a-food-allergy
RESOURCES

• **Meaningful Travel Tips and Tales: Health & Chronic Illness Abroad** (GoAbroad.com) This downloadable travel booklet covers common issues for those that have chronic illness and travel abroad. Information is provided on pre-departure steps, volunteering in a developing country with a chronic illness, and how to manage your symptoms. [https://www.goabroad.com/downloads/meaningful-travel-tips-tales-for-chronic-illness-Goabroad.com.pdf](https://www.goabroad.com/downloads/meaningful-travel-tips-tales-for-chronic-illness-Goabroad.com.pdf)

• **Translation Cards for Food & Drug allergies, Special Diets and Medical Needs** We provide cards. We provide translations. We provide knowledge. We specialize in food allergies, drug allergies, diet restrictions and medical emergency translations in more than 60 languages from Italian to Indonesian to Chinese to Japanese. [https://www.selectwisely.com/](https://www.selectwisely.com/)

• **Allergic Living: Studying Abroad with Food Allergies** Written by a student who has studied abroad, this resource provides personal tales of what it’s like to travel with a food allergy. They point out important things to consider such as always carrying medicine, planning day trips around what you can and cannot eat, and choosing a country to travel to. [https://www.allergicliving.com/2017/01/12/studying-abroad-food-allergies-experience-not-missed/](https://www.allergicliving.com/2017/01/12/studying-abroad-food-allergies-experience-not-missed/)
RESOURCES

• (United Kingdom specific organization, but helpful overall information) **Anaphylaxis Campaign**
  A great resource to discover information about anaphylaxis, care plans, and the effects of different allergies. They provide factsheets with general advice and information, guidance for parents/carers/schools, food allergens, and non-food allergens.
  https://www.anaphylaxis.org.uk/

• **IES Abroad: 9 Tips for Studying Abroad and Traveling with a Food Allergy**
  This resource provides information that has been previously stated, but has a few new tips. These include learning how to explain your allergy in the local language(s) (i.e. your allergy, ingredients related to allergy, food prep related to allergy, etc), finding treatment centers abroad, and the suggestion of carrying a “chef card” explaining your allergy in local language(s).
  https://www.iesabroad.org/news/9-tips-studying-abroad-and-traveling-food-allergy#sthash.v9PYqAZz.HIoZmRTj.dpbs

• **Emily’s Top 5 Tips on Traveling with a Life-Threatening Food Allergy**
  “Traveling with a food allergy or other dietary restrictions can be a scary experience.”