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## How Do I Know If My Child Has Allergies?

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"It must be allergies."

How often do parents hear that?

Very.

But is it really the answer to all things stuffy and runny? Maybe yes, but maybe no. Presence or absence of allergies is oftentimes puzzling for parents. Especially nowadays, where food allergies are running rampant, everyone seems to be allergic to something, and these allergies seem to start at younger and younger ages, the issue of *environmental* allergies has become even fuzzier. By environmental (as opposed to food or medication) allergies, I am referring to allergies to outdoor allergens such as pollen, trees, and grasses, as well as indoor allergens such as dust, mold, feather pillows, and pet hair.

Allergies to environmental substances are different types of reactions than allergies to foods are medicines, and are most easily assessed in children over three or four years old. The reason for this is that an environmental allergy is a 'hyper' immune reaction, or an immune system

working in 'overdrive'. Younger children have immature immune systems, which are not yet able to be in 'overdrive', making it somewhat more difficult to accurately evaluate presence or absence of specific allergies.

Formal testing aside, most allergies can be recognized based on careful observation of a child's symptoms, including time of day, season, or worsening symptoms with specific exposures (for instance, your child develops itchiness and watery eyes after playing with a neighbor's cat, or playing in a field of fresh-cut grass). Classic signs of environmental allergies include:

- Clear runny nose (may or may not be stuffy)
- Watery eyes (sometimes the white part of the eye can turn red)
- Sneezing
- Generalized itchiness, even without a rash
- Puffiness or dark circles under the eyes (this
  occurs because nasal congestion can lead to
  congestion of the tear ducts, which, in turn,
  causes the tissues around the eyes to swell
  and become a bit darker. It is also a result
  of overall facial congestion or 'puffiness',

- secondary to chronic nasal stuffiness and con stant breathing through the mouth)
- A straight horizontal line of lighter skin (it almost looks like a fine scar) over the middle part of the nose (this is termed an 'allergic salute', as it develops from a child continually rubbing his or her nose in a upward direction due to itchiness or mucus—it appears as if they are 'saluting' their nose.

Indications that your child may have allergies also include the fact that your child may get sicker during his allergy 'seasons'. This is because a child with allergies tends to have a baseline degree of nasal swelling and mucus, which may make them more predisposed to respiratory illnesses such as viral colds, bad coughs, or bacterial sinusitis when allergies are at their worst.

If you are concerned that your child may have allergies, testing can be done by either blood tests or skin ('scratch') tests. Once specific allergens are identified, you will be better able to 'target' them, which usually means avoidance of the allergy trigger, if at all possible. If avoidance is not an option, many medications, both over-the-counter and by prescription, are considered to be safe for children ages 2 years and up. My personal favorite medication to treat stuffy noses from allergies, colds, or just plain congestion, is nasal saline. This can be used in newborns to the elderly. There is no concern for chemicals, as the saline is matched to the body's natural pH. It can be used as nasal drops, a nasal spray, or as an irrigant. It flushes out viruses, bacteria, and even allergens. And there is no such thing as using nasal saline 'too much', which is an added safety feature.

So if you think your child may have allergies, take a good look at him. Has there been a pattern to his symptoms? Time of day or season? Indoor or outdoor? Specific exposures that trigger discomfort? If so, avoidance is a first step, if for no other reason than to help identify the allergy. Medications are a last resort, with nasal saline being a great first choice. **QC** 

