



# Preventing Peanut Allergy

Early Peanut Introduction to Infants



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## Preventing Peanut Allergy Development in Infants

Given the large potential beneficial impact on a population level, the guidelines recommend that age appropriate peanut-containing foods be introduced to all infants prior to 11 months of age, and ideally closer to 6 months of age. The basis for these guidelines comes from the findings of the Learning Early About Peanut Allergy (LEAP) study. For full background information and specific details, please read the guideline document. The information contained here will serve as an introduction to new concepts and a general guide.

Beginning around 4 months of age, infants will need to be stratified according to risk of peanut allergy prior to introduction and will fall into 4 groups:

1. Severe eczema, egg allergy or both
2. Mild to moderate eczema
3. No eczema or any food allergy
4. No/mild eczema and no food allergy but a family history of peanut allergy in 1st degree relative

### Group 1: Severe eczema, egg allergy or both

- This group is at highest risk to develop peanut allergy and would benefit most from early introduction
- These infants should be evaluated for peanut sensitization prior to introduction
- No sensitization (negative IgE testing) indicates very low risk for allergic reaction upon introduction
- The presence of mild sensitization should not prevent peanut introduction, but may alter the manner in which it is introduced
- High levels of sensitization indicate probable peanut allergy and they should be evaluated by an allergist to determine management and next steps

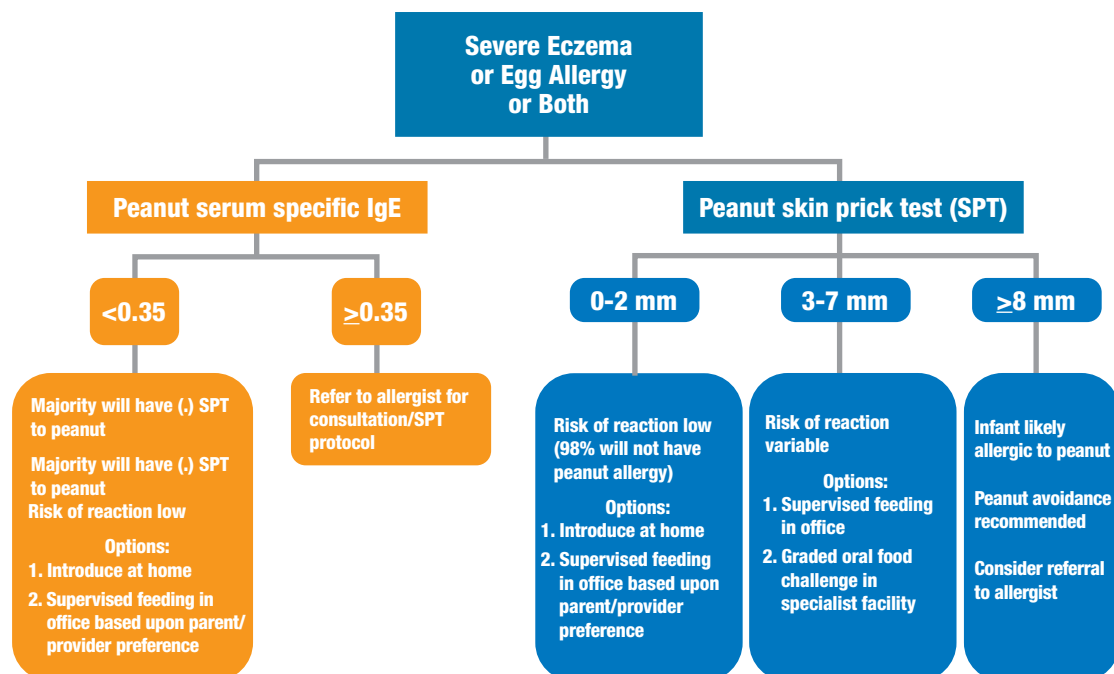


Figure 1. Recommendations for evaluation of children with severe eczema and/or egg allergy prior to peanut introduction.

## **Group 2: Mild to moderate eczema**

- These infants do not require peanut IgE testing prior to introduction
- It is recommended that these infants be introduced to age appropriate peanut containing foods as early as 4 to 6 months of age
- Ideally, infants will already be eating other solid foods to demonstrate developmental readiness to incorporate peanut containing foods into their diet
- It is recognized that some caregivers and health care providers may desire an in office supervised feeding and/or evaluation prior to introduction

## **Group 3: No history of eczema or food allergy**

- These infants do not require peanut IgE testing prior to introduction
- It is recommended that these infants be introduced to age appropriate peanut containing foods as early as 4 to 6 months of age
- These infants do not require a supervised feeding

## **Group 4: No/mild history of eczema or food allergy but a peanut allergy family history**

- The LEAP trial did not address this scenario
- Data from randomized controlled trials are non-existent in this cohort of infants
- Data are limited regarding risk of peanut allergy in this group of infants but some studies show increased risk of peanut allergy compared with infants who do not have a family history
- Due to potential benefit, it is recommended that these infants have age appropriate peanut containing foods introduced into their diets around 4-6 months of age
- However, due to a lack of interventional studies in this cohort, evaluation and method of introduction can be left to the discretion of parental and health care provider preference

## **How Much Peanut Do Infants Need to Eat?**

- LEAP criteria fed infants 6 grams of peanut 3 times a week
- It remains unknown whether lesser amounts or less frequent feedings will offer the same benefit in prevention of peanut allergy
- Once peanut is successfully introduced into the infants diet, it should continue to be regularly consumed indefinitely (unless concerns for a new onset allergic reaction arise)
- The total amount of peanut protein to be consumed per week should be 6 to 7 grams over 3 or more feedings
- In the LEAP study, 75% of children were able to consume this amount of peanut through the entire 4+ years of intervention

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## Referrals and Consultations

Online: [NationwideChildrens.org](https://www.NationwideChildrens.org)

Phone: (614) 722-6200 or (877) 722-6220 | Fax: (614) 722-4000

Physician Direct Connect Line for 24-hour urgent physician consultations:  
(614) 355-0221 or (877) 355-0221.

