

Food Allergy Facts and Figures

A food allergy occurs when the body's immune system sees a certain food as harmful and reacts by causing symptoms. This is an allergic reaction. Foods that cause allergic reactions are called [allergens](#).

Allergic reactions can involve the skin, mouth, eyes, lungs, heart, gut and brain. Mild and severe symptoms can lead to a serious allergic reaction called [anaphylaxis](#) (anna-fih-LACK-sis). This reaction usually involves more than one part of the body and can worsen quickly. Anaphylaxis must be treated right away to provide the best chance for improvement and prevent serious, potentially life-threatening complications.

How Common Are Food Allergies?

- About 32 million people have food allergies in the U.S.^{1,2}
 - About 26 million (10.8%) U.S. adults have food allergies.¹
 - About 5.6 million (7.6%) U.S. children have food allergies.²
- In 2018, 4.8 million (6.5%) children under 18 years of age had food allergies over the previous 12 months.³
- In 2018, 6% of Black and Hispanic children had food allergies over the previous 12 months, compared to 6.6% of white children³
 - Food allergy has increased among U.S. children over the past 20 years, with the greatest increase in Black children⁴
- Milk, egg, wheat and soy allergies are often outgrown. Most people do not outgrow peanut, tree nut, fish and shellfish allergies.⁵
- Children with food allergies are two to four times more likely to have asthma or other allergic disease.⁶

What Are the Most Frequent Food Allergens?

- Eight foods cause 90 percent of most food allergy reactions⁷:
 - Milk
 - Egg
 - Peanut
 - Tree nut (e.g., almonds, walnut, pecans, cashews, pistachios)
 - Wheat
 - Soy
 - Fish (e.g., bass, flounder, cod)
 - Shellfish (e.g., crab, shrimp, scallop, clams)
- Sesame is also a rising food allergy. It impacts an estimated 1 million people in the United States. It was recently declared a major allergen by Congress.

Allergies to peanuts, tree nuts, fish and shellfish tend to persist lifelong. Allergies to milk, egg, wheat and soy often disappear with age, but not always.⁵

What Is Anaphylaxis?

Anaphylaxis is a life-threatening allergic reaction. Not all allergic reactions are anaphylactic.⁷

- Anaphylaxis can cause:
 - Tightening of the airways
 - Swelling of the throat

- Severely low blood pressure
- Shock⁷
- Symptoms of a severe allergic reaction can include:
 - Skin: hives (often very itchy), flushed skin or rash
 - Mouth: swelling of the lips, tongue and throat; tingling or itchy feeling in the mouth
 - Lungs: shortness of breath, trouble breathing, coughing or wheezing
 - Heart: dizziness, lightheadedness
 - Stomach: vomiting, diarrhea⁷
- Each year in the U.S., it is estimated that severe reactions to food cause:
 - 30,000 emergency room visits
 - 2,000 hospitalizations
 - 150 deaths⁸

How Are Food Allergies Managed and Treated?

- Although new treatments are being developed, there is currently no cure for food allergies.⁷
- Avoiding the allergen is the most important way to prevent a reaction.⁷
- Those with food allergies should carefully read food labels and always ask about ingredients before eating the food.⁷
- Epinephrine is the first line of treatment for anaphylaxis.⁷
- Those with food allergies should always have epinephrine on hand.⁷
- If a person is having anaphylaxis, they should:
 - Follow their [Anaphylaxis Action Plan](#)
 - Use their epinephrine
 - Call 911⁹

[Medical Review](#) September 2017. Updated April 2021.

References

- [1] Gupta, R. S., Warren, C. M., Smith, B. M., Jiang, J., Blumenstock, J. A., Davis, M. M., Schleimer, R. P., & Nadeau, K. C. (2019). Prevalence and Severity of Food Allergies Among US Adults. *JAMA Network Open*, 2(1), e185630. <https://doi.org/10.1001/jamanetworkopen.2018.5630>
- [2] Gupta, R. S., Warren, C. M., Smith, B. M., Blumenstock, J. A., Jiang, J., Davis, M. M., & Nadeau, K. C. (2018). The Public Health Impact of Parent-Reported Childhood Food Allergies in the United States. *Pediatrics*, 142(6). <https://doi.org/10.1542/peds.2018-1235>
- [3] Centers for Disease Control and Prevention. (2019). 2018 National Health Interview Survey data. U.S. Department of Health and Human Services. Retrieved from <https://www.cdc.gov/nchs/fastats/allergies.htm>
- [4] Keet, C. A., Savage, J. H., Seopaul, S., Peng, R. D., Wood, R. A., & Matsui, E. C. (2014). Temporal trends and racial/ethnic disparity in self-reported pediatric food allergy in the United States. *Annals of Allergy, Asthma & Immunology*, 112(3), 222-229.e3. <https://doi.org/10.1016/j.anaai.2013.12.007>
- [5] Sicherer, S. H., & Sampson, H. A. (2014). Food allergy: Epidemiology, pathogenesis, diagnosis, and treatment. *Journal of Allergy and Clinical Immunology*, 133(2), 291-307.e5. <https://doi.org/10.1016/j.jaci.2013.11.020>
- [6] Branum, A., & Lukacs, S. (2019). *Food Allergy Among U.S. Children: Trends in Prevalence and Hospitalizations*. Centers for Disease Control and Prevention; National Center for Health Statistics. <https://www.cdc.gov/nchs/products/databriefs/db10.htm#:~:text=From%201997%20to%202007%2C%20the>
- [7] U.S. Food & Drug Administration. (2021). Food Allergies: What You Need to Know. U.S. Department of Health and Human Services. Retrieved from: <https://www.fda.gov/media/79019/download>
- [8] FoodSafety.gov. (2020). Protect Yourself from Food Allergies. U.S. Department of Health and Human Services. <https://www.foodsafety.gov/blog/protect-yourself-food-allergies>
- [9] Simons, F. E. R., Arduzzo, L. R. F., Bilò, M. B., El-Gamal, Y. M., Ledford, D. K., Ring, J., Sanchez-Borges, M., Senna, G. E., Sheikh, A., & Thong, B. Y. (2011). World Allergy Organization Guidelines for the Assessment and Management of Anaphylaxis. *World Allergy Organization Journal*, 4(2), 13–37. <https://doi.org/10.1097/wox.0b013e318211496c>