

School staff know more than they think they do about treating anaphylaxis

November 11 2016

A study being presented at the American College of Allergy, Asthma and Immunology (ACAAI) Annual Scientific Meeting found only 18 percent of non-nurse school staff surveyed felt very confident in their ability to recognize anaphylaxis symptoms.

"Even though most of the non-nurse school staff weren't confident in their ability to recognize and treat a severe allergic reaction, the staff members were able to answer correctly, on average, 72 percent of the 12 knowledge-based questions in the survey," said allergist Angela Tsuang, MD, MSc, ACAAI member and lead study author. "In addition, 87 percent were able to identify the correct sequence of actions to take if a child is experiencing anaphylaxis. This tells us the majority of non-nurse staff know what to do in an allergic reaction emergency, and we should train a broader range of staff to increase confidence in these skills."

The surveys were completed by 143 non-nurse school staff at Colorado schools. The reported average food allergy training time was 29 minutes per year. Staff included teachers, office personnel, administrators and custodial workers. The largest number of respondents, 54 percent, were from rural schools, with 33 percent from suburban schools and 13 percent from urban schools.

"School staff training is critical to make sure kids who are having a severe allergic reaction are treated promptly and correctly," said allergist Julie Wang, MD, ACAAI Fellow and senior study author. "School personnel should know that epinephrine is the first line of defense in



treating anaphylaxis. The consequences of not using epinephrine when it's needed are much worse than using it when it might not be necessary."

Anaphylaxis is a potentially fatal allergic reaction that can affect many parts of the body at the same time. The trigger may be an insect sting, a food (such as peanuts) or a medication. If left untreated, anaphylaxis can be fatal. Just because an allergic person has never had an <u>anaphylactic</u> reaction in the past, doesn't mean that one won't occur in the future. In addition, anyone who has had an anaphylactic reaction in the past is at risk of future reactions.

According to ACAAI, school staff should administer epinephrine and call 911 at the first sign of anaphylaxis. In addition, guidelines from ACAAI indicate there is virtually no reason not to use epinephrine on a patient believed to be suffering a severe allergic reaction.

Provided by American College of Allergy, Asthma, and Immunology

Citation: School staff know more than they think they do about treating anaphylaxis (2016, November 11) retrieved 22 July 2023 from https://medicalxpress.com/news/2016-11-school-staff-anaphylaxis.html

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