

Your quick guide to: FPIES (Food Protein Induced Enterocolitis Syndrome)

Food protein-induced enterocolitis syndrome (FPIES) is a severe non IgE (delayed) form of food allergy. It is much less common than IgE-mediated food allergy, and typically occurs in babies and infants.

FPIES presents in infants with repetitive continued vomiting that begin approximately 1-4 hours after the allergenic food is eaten. Other symptoms include;

- Looking pale / lethargic / limpness / floppy
- Diarrhoea
- Dehydration, which may require emergency treatment.

FPIES does NOT result in skin rashes or problems with breathing.

Sometimes the symptoms are mistaken as an infection and also because blood tests may show a raised white cell count.

What foods can trigger FPIES?

The most common triggers are cows' milk (dairy), egg, fish and fruit and vegetables (e.g. avocado, banana & sweet potato). Other foods include meat, soya, rice and oats. However, almost any food can cause a FPIES reaction.

A recent UK study recently showed that FPIES is a very rare form of food allergy. More than 70% of infants with FPIES only react to a single food and 20% to two foods. Therefore, it is very unlikely to have multiple foods causing FPIES.

You will need guidance from a dietitian and paediatrician who can guide you through the weaning process. Individual advice for your infant if weaning is important as presentation can vary. Good first foods in weaning include root vegetables like parsnip and turnip or blended fruits like plum, peach or apricot.

Diagnosis

There is no allergy test which can confirm a diagnosis of FPIES. Skin tests and blood tests to measure IgE levels do not help, as

the reaction is not caused by IgE antibody. This can make FPIES difficult to diagnose. Your doctor may recommend an oral food challenge when the history is not clear, or if foods from a similar food group are being introduced into the diet of a child who has FPIES. These challenges should always take place under specialist supervision in a hospital.

Treatment

The only treatment for FPIES is to avoid the trigger food. Your doctor will advise as to how to alter the diet to achieve this, and you may receive advice from a dietitian if the foods to be removed include a major food group.

There is no specific treatment for a child during a FPIES reaction. However, sometimes intravenous (IV) fluids will be required, due to the dehydration. If the vomiting is ongoing an anti-sickness medicine called Ondansetron may be used to help. Most families of children with FPIES will be given a letter to present to emergency departments explaining their child's condition and the appropriate treatment.

There is no role for the use of adrenaline devices in the management of FPIES.

Does FPIES resolve?

Most children outgrow FPIES by the time they are about three to four years of age. The best way to determine whether a child has outgrown their FPIES is for them to have an oral food challenge; this should always take place under specialist supervision in a hospital. This challenge normally takes several hours as reactions can occur several hours after eating the culprit food.

How can I get more help?

A referral to a dietitian and paediatrician is essential for further advice and guidance. There is a dedicated charity to FPIES who will also be able to offer more information about the diagnosis:

<https://www.fpiesuk.org/whatisfpies>

Key facts:

You will need **guidance from a dietitian** and **paediatrician** who can guide you through the weaning process

FPIES presents in infants with **repetitive continued vomiting** approx. 1-4 hours after the allergenic food is eaten

The most common triggers are **cows' milk** (dairy), **egg**, **fish** and **fruit** and **vegetables**

Clinical contributions:

Allergy UK Clinical Team

Laura Phillips, Clinical Dietetic Advisor
Lydia Collins-Hussey, Clinical Dietetic Advisor

Allergy UK Health Advisory Board

Dr Gary Stiefel, Consultant in Paediatric Allergy, University Hospital in Leicester NHS Trust

Allergy UK Helpline

Mon-Fri, 9am-5pm:

Call: 01322 619 898

Email: info@allergyuk.org

Visit us at:

allergyuk.org