

Anaphylaxis – Adult

Anaphylaxis is a life-threatening allergic reaction that happens very quickly. It can be caused by food, medicine or insect stings. Call 999 if you think you or someone else is having an anaphylactic reaction.

Causes of anaphylaxis

Anaphylaxis happens when your body has a serious reaction to something you're allergic to. Allergies that can sometimes cause anaphylaxis include:

- foods such as nuts, cows' milk, eggs, fish or sesame seeds
- medicines such as antibiotics or non-steroidal anti-inflammatory drugs (NSAIDs)
- insect stings such as wasp and bee stings
- anaesthetics
- latex (a type of rubber found in some rubber gloves and condoms)
- Sometimes it's not known what caused an anaphylactic reaction.

Things you can do to help prevent anaphylaxis

There are some things you can do to help prevent anaphylaxis or prepare for if it happens.

Do

- avoid the food, medicine or thing that you're allergic to – for example, if you have a food allergy, check food labels carefully and tell staff at restaurants and cafes about your allergy
- carry 2 adrenaline auto-injectors with you at all times
- check your adrenaline auto-injector expiry dates regularly and get new ones before they expire
- practice how to use your adrenaline auto-injector by using a trainer injector (an injector that has no needle or medicine in it) – you can order one online from the company that makes your injector
- teach friends, family, colleagues or carers how and when to use your adrenaline auto-injector
- use your adrenaline auto-injector if you think you may have anaphylaxis, even if your symptoms are mild
- wear medical alert jewellery such as a bracelet with information about your allergy – this tells other people about your allergy in case of an emergency

Don't

- do not leave your adrenaline auto-injectors anywhere too hot or cold such as in the fridge or outside in the sun

Symptoms of Anaphylaxis

Symptoms of anaphylaxis usually start very quickly (within minutes), after coming into contact with something you're allergic to, such as a food, medicine or insect sting. Symptoms include:

- swelling of your throat and tongue
- difficulty breathing or breathing very fast

- difficulty swallowing, tightness in your throat or a hoarse voice
- wheezing, coughing or noisy breathing
- feeling tired or confused
- feeling faint, dizzy or fainting
- skin that feels cold to the touch
- blue, grey or pale skin, lips or tongue – if you have brown or black skin, this may be easier to see on the palms of your hands or soles of your feet

You may also have a rash that's swollen, raised or itchy.

What to do if you have Anaphylaxis

Follow these steps if you think you or someone you're with is having an anaphylactic reaction:

- Use an adrenaline auto-injector (such as an EpiPen) if you have one – instructions are included on the side of the injector.
- Call 999 for an ambulance and say "ANAPHYLAXIS (ANA-FIL-AXIS)".
- Lie down – you can raise your legs, and if you're struggling to breathe, raise your shoulders or sit up slowly (if you're pregnant, lie on your left side).
- If you have been stung by an insect, try to remove the sting if it's still in the skin.
- If your symptoms have not improved after 5 minutes, use a 2nd adrenaline auto-injector.
- Do not stand or walk at any time, even if you feel better.

Treatment for Anaphylaxis

Anaphylaxis needs to be treated in hospital immediately. Treatments can include adrenaline given by an injection or drip, oxygen and fluids given by a drip in your vein.

What is a Biphasic Reaction?

This means that after anaphylaxis is treated and the symptoms go away, they return without you coming into contact with your trigger (allergen) again. The second reaction can be less severe, equal to or more severe than the first reaction. This makes them concerning as some people may think that they are fully recovered and they may not have their adrenaline auto-injector as they will have used it to treat their first reaction. A second reaction can occur as little as 2 hours and as much as 72 hours after the first reaction. The average length between reactions is 6-10 hours.

How to use an adrenaline auto-injector

There are different types of adrenaline auto-injectors (EpiPen®, JEXT®, Emerade) and each one is given slightly differently, see below, also watch the MHRA video for general advice.

**MHRA using an
Adrenaline Auto-
Injector**



EpiPen® auto-injector



JEXT® auto-injector



Emerade auto-injector



Emergency Department Anaphylaxis Discharge Supplemental Information

<Name>

<Age>

<DoB>

<NHS Number> <Hosp Number> <ED Number>

AH

WRH

18.09.2023

Attended

<time and date of arrival>

Discharged

You were diagnosed as suffering from:

- ☐ **Anaphylaxis**
- ☐ **Angioedema**
- ☐ **Severe Allergy**

You were:

- ☐ treated with Adrenaline
- ☐ **NOT treated with Adrenaline**

The likely **trigger** was:

You have been advised to avoid this:

● Level of certainty regarding likely trigger:

- ☐ Possible
- ☐ Reasonable chance
- ☐ Likely
- ☐ Almost certain

You were documented to have the following **signs**:

- ☐ Sign of airway obstruction (swollen throat)
- ☐ Urticarial rash ('hives', itchy blotchy red rash)
- ☐ Bronchospasm (wheeze)
- ☐ Biphasic reaction (second wave of symptoms)
- ☐ Low blood pressure (feeling dizzy and faint)
- ☐ Abdominal pain
- ☐ Tachycardia (fast heart rate)
- ☐ Other..

The following **tests** were undertaken:

- ☐ FBC
 - ☐ Mast cell tryptase
 - ☐ on arrival
 - ☐ repeated
 - ☐ C1Esterase Inhibitor
- (how many hours later ?)

How many **Adrenaline Auto-injector** prescribed ?

- ☐ 2 (recommended best practice for anaphylaxis)
- ☐ 1
- ☐ Zero

● A referral to **Anaphylaxis / Allergy Clinic** ☐ has ☐ has not been made.

● Making an appointment to **see your GP** ☐ is advisable ☐ is not necessary

● You have been given the following additional **medication to take home***:

- ☐ Prednisolone
- ☐ Anti-histamine
- ☐ Other ..

* NICE: antihistamines and corticosteroids are no longer recommended for routine emergency treatment for anaphylaxis, although they are recommended for angio-oedema without anaphylaxis.

Discharge Checklist

	Yes	No
Patient Advice Leaflet		
Possibility of biphasic reaction explained (see PAL)		
Explained what to do if anaphylactic episode (see PAL – MHRA link)		
Patient aware which type of adrenaline auto-injector they have been prescribed		
Patient has accessed appropriate information for appropriate adrenaline auto-injector		
Patient aware what (suspected) trigger to avoid		
Patient aware what follow-up has been arranged		
Patient aware what follow-up they need to arrange		
Patient management plan questions explained		

Sources of information and Support

Anaphylaxis UK <https://www.anaphylaxis.org.uk/> Helpline: 01252 542029

British Society of Allergy and Clinical Immunology (BSACI) <https://www.bsaci.org/patients/>

Allergy UK <https://tinyurl.com/4ptkwhm3>

Medicines and Healthcare products Regulatory Agency (MHRA) <https://tinyurl.com/mtnacsmr>

Medicines and Healthcare products Regulatory Agency (MHRA) <https://youtu.be/4vNR5N1-iBw>

How to use your EpiPen (adrenaline auto-injector) <https://tinyurl.com/54rt5s8b>

How to use your JEXT (adrenaline auto-injector) <https://tinyurl.com/2p953zwx>

Now to use your Emerade (adrenaline auto-injector) <https://tinyurl.com/yz5v3uv2>

My Management Plan

1. My triggers are:

2. My anaphylaxis symptoms are:

3. To ensure I carry my adrenaline pan at all times I plan to:

4. To ensure my adrenaline pen is always in date I plan to:

5. To ensure I always use my adrenaline pen correctly if needed I plan to:

6. My emergency contact after dialling 999 is:

Healthcare professional

NAME

Designation

Date

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.

For additional medical advice, if your symptoms or condition worsens:

Contact your GP

NHS 111:

Get help with your symptoms, NHS111:

Information to help you manage your health:

Telephone 111

<https://111.nhs.uk/>

www.nhs.uk

In an emergency telephone 999

Emergency Department (A&E)
Alexandra Hospital
Woodrow Drive
Redditch B98 7UB
Tel: 01527 512030

Minor Injury Unit
Kidderminster Hospital
Bewdley Road
Kidderminster DY11 6RJ
Tel: 01562 513039

Emergency Department (A&E)
Worcestershire Royal Hospital
Charles Hastings Way
Worcester WR5 1DD
Tel: 01905 760743