

Audit: Food Allergy in Children

An audit of the proportion of infants <12 months with eczema who have had a documented discussion regarding food allergy prevention with either a GP or practice nurse.

Cycle 1

Identify all infants under 12 months in the practice with eczema- search for coded eczema in medical history, and search for prescribed topical steroids and emollients (although these will also have been purchased over the counter especially in the case of patients without medical cards). The search could be limited to patients seen in the previous 12 months, and if the number are high a randomised proportion of these could be selected to audit. The notes (electronic health records) of infants selected for audit can be reviewed for evidence/documentation of a discussion regarding food allergy prevention and early allergen introduction. The age at which this occurred should be recorded. Any record or coding of food allergies diagnoses should also be documented.

Intervention

It is likely the rates of such a discussion being documented will be low in cycle 1. Following cycle 1, a practice meeting could be held with all GPs and nurses in the practice. This can be an opportunity to raise awareness of the need for allergy prevention in infants with eczema, especially if severe or early onset. Egg allergy, as another strong indicator for early introduction of peanut, should also be discussed. A plan can be made at this point to be vigilant for infants presenting with eczema, and to aim to discuss the benefits or early introduction of food allergens for these infants, especially egg and peanut. The 4 months baby vaccines can be used as an opportunity for practice nurses to have this discussion, and also to encourage no delay in allergen introduction in the general population. Communication may also be made with local pharmacists who may identify patients presenting for over the counter hydrocortisone and emollients.

Cycle 2

A further sample population of infants <12 months should be found in the same manner as for cycle 1. The proportion of these who have had a documented discussion in their notes regarding allergen prevention and early allergen introduction should be identified by reviewing their charts. The age at which this discussion occurred should be recorded.