

Suspected drug allergy investigations

This leaflet explains what to expect when your child has an investigation of their suspected drug allergy at the children's allergy service at St Thomas' Hospital. If you have any questions or concerns, please speak to a doctor or nurse caring for your child.

Why your child has been referred

Your child has been referred to our service because of an unwanted (adverse) reaction. These symptoms resulted in a healthcare professional becoming concerned that they might have been caused by a drug allergy. Currently your child is avoiding, or has not had a need for, the medicine suspected of causing the reaction.

Adverse reactions to medicines are quite common, but very few are because of an allergy. For example, if a child develops a rash while taking antibiotics, it is difficult to know if the rash was caused by the infection or the medicine (or both). This is why your GP will usually be careful and state your child is allergic to that particular drug, rather than risk them having an allergic reaction. It is important to investigate a **suspected** drug allergy to achieve an accurate diagnosis, in case your child ever needs that particular drug again.

How we investigate

First we talk to you and your child about what happened when the suspected medicine was given (clinical history). If this strongly suggests the reaction was caused by the medicine, we will not proceed any further. For most children their clinical history does not suggest an allergic reaction.

Next, we give your child gradually larger (incremental) doses of the medicine, by mouth, under supervision. This is known as a drug provocation test or challenge. Sometimes we do other tests, such as:

- skin prick tests – where a small amount of the medicine is placed on your child's skin and the skin is 'pricked' through the medicine (see our information, **Skin prick testing**, for more details)
- intra-dermal tests – where a small amount of the suspected drug is injected into the top layer of the skin
- blood tests

The test we do will depend on the drug in question, and the symptoms associated with your child's reaction. The tests will be done by staff who can recognise and treat an allergic reaction, if one happens.

Depending on your child's reaction, and the type of medicine they were given, they might be referred to the rapid access drug allergy service or the consultant outpatient drug allergy service.

Rapid access drug allergy service

We will try to see your child within 6 weeks of referral to this clinic. Alternatively, we will speak to you as part of our telephone drug allergy clinic. Having discussed the details of your child's reaction on the phone, we will decide what sort of tests are needed for your child and plan a hospital appointment, if necessary.

At your child's appointment you will be seen by the consultant nurse or clinical nurse specialist, whose area of expertise includes drug allergy investigations. They will ask you about your child's suspected allergic reaction, and assess your child to make sure they are well on the day of their appointment. This includes listening to their chest with a stethoscope, taking their temperature, pulse, blood pressure and respiratory (breathing) rate.

If the nurse feels it is appropriate, they will carry out a drug provocation test. Your child will be given the medicine suspected of causing the allergic reaction by mouth in one full dose, or a few incremental doses given every 30 minutes. They will be observed for 1 hour to check for any signs of an allergic reaction. If your child tolerates the medicine you will be given a supply of the medicine to take at home. Your child will continue to take this for 3 or 5 days to make sure they can tolerate the medicine without any further reaction, such as a rash.

If your child has an allergic reaction, this will be treated immediately and they might need to stay in hospital for more observation. A doctor is always available if they are needed.

If your child is currently taking **any medicines**, please call the allergy nurses, **phone:** 020 7188 3300 **at least 2 weeks before** their appointment.

Some medicines can affect the results of the tests we do and might need to be stopped before the tests. Your child must also be completely well on the day of the appointment. If they are unwell we might not be able to do the testing.

Consultant outpatient drug allergy service

Your child might not be suitable for investigation in our rapid access service.

If this is the case, they will be referred to our outpatient drug allergy service. They will be seen at first in the outpatient clinic or assessed as part of the telephone drug allergy clinic. If appropriate, they will be referred to the day case unit for further testing.

This testing might include skin prick, intra-dermal, or drug provocation tests. The clinician who you see in the outpatient clinic will discuss this with you.

Risks associated with drug allergy investigations

There is a risk that your child will have an allergic reaction to the medicine they are being tested to. This is why the tests are done in a hospital. Your child will be closely observed by an allergy nurse specialist who will monitor them for any signs of allergic reaction, such as an itchy rash or breathing difficulties. A doctor will always be available if needed.

If your child does have an allergic reaction, a medicine will be given to relieve the symptoms and to stop the reaction from getting worse. This might be an antihistamine such as chlorphenamine (Piriton®) or in a severe reaction, adrenaline (EpiPen® or Jext®).

Are there other options?

You might choose for your child to not have the suspected drug allergy investigated. The staff in the drug allergy service will talk to you about what this might mean for your child. Your child should then continue to avoid the medicine suspected of causing a reaction, in case they are allergic to that it. You should make sure that all clinicians caring for your child are aware that your child might be allergic to that medicine and that a safe, alternative medicine should be used.

After the investigation

What happens next depends on whether your child has a positive or negative test result.

Positive test results

This is when your child reacts to the medicine they are being tested for. A positive reaction means your child **is** allergic and needs to avoid that medicine. The doctors and nurses will treat the reaction as needed, and your child will be monitored for 2 to 4 hours after their reaction. Sometimes, children need to be observed for longer and might need to stay in hospital overnight. If your child does stay overnight, you can stay with them.

You will need to tell all clinicians who are involved in caring for your child that they are allergic to that medicine, so that it is not used and an alternative is given instead. This diagnosis should be recorded on all health records including your child's red book (personal child health record), GP notes and hospital notes. It might also be necessary to record the allergy on a medical identification bracelet.

Negative test results

This is when your child has no reaction to any of the medicine, including after the observation period. If the medicine is an antibiotic, your child will be given a short course of the medicine to take at home for 3 days. This is to make sure there is no delayed reaction.

Follow-up appointments

We will talk with you about this during your visit. Depending upon the reaction, and if there are any more medicines suspected of causing an allergic reaction, another appointment might be needed. We will send you and your child's GP a letter with information about their test results.

Contact us

If you have any questions or concerns about the procedure, please contact a children's allergy nurse, **phone:** 020 7188 3300, Monday to Friday, 9am to 5pm. Or book a nurse telephone call back, **web:** my.drdoctor.co.uk/clinic/childrensallergynursehelpline

If you would like to cancel or change your child's appointment, speak to the day case coordinator, **phone:** 020 7188 6390

For more information on conditions, procedures, treatments and services offered at our hospitals, please **web:** visit www.evelinalondon.nhs.uk/leaflets

Leaflet number: 4030/VER4

Date published: August 2021

Review date: August 2024

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A list of sources is available on request