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Preventing allergic disease: Why early action matters for patients and families

Dr Michael Perkin reports on preventing allergy.

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Allergic diseases are now part of everyday life for millions of people across the UK. From food allergies and eczema to asthma and severe allergic reactions, allergies affect how people eat, work, learn, socialise and feel. Prevention is better than cure.

While better treatment is vital, the most powerful way to tackle the growing allergy burden is prevention – stopping allergies from developing in the first place or reducing their severity before they become life-changing.

Goal 3 of the National Allergy Strategy (NAS) focuses on prevention strategies to reduce the burden of allergic disease. The aim is simple but ambitious: to help people live healthier lives by lowering the risk of allergies, preventing avoidable complications and reducing deaths from severe allergic reactions. For patients, this means fewer emergencies, better quality of life and more confidence to live life fully and safely.

Why prevention matters

Preventing allergic disease benefits individuals, families and the wider health system. For patients, effective prevention can mean:

- fewer hospital visits and medical emergencies
- reduced risk of severe reactions, including anaphylaxis
- better mental wellbeing, with less anxiety and stress around everyday activities

- improved ability to attend school, work and social events.

At a national level, prevention helps reduce healthcare costs, lowers pressure on services and supports better long-term health outcomes for future generations.

Making prevention fair and inclusive

A core priority is ensuring that allergy prevention strategies are inclusive and equitable across the UK. Not everyone currently has the same access to information, support or care. People from lower socioeconomic backgrounds or ethnic minority communities, those with language barriers, and individuals with disabilities or learning difficulties may face additional challenges.

The goal is to identify and tackle these barriers so that everyone – regardless of background – can benefit from clear, accurate allergy prevention advice. For patients and families, this means:

- information that is understandable, culturally appropriate and accessible
- support that reaches the communities most at risk
- more consistent advice across healthcare and community settings.

Preventing deaths from anaphylaxis

Anaphylaxis is a severe, potentially fatal allergic reaction that can happen quickly and without warning. While rare, every death from anaphylaxis is devastating, and many are preventable.

The NAS aims to improve how anaphylaxis is monitored, investigated and learned from across the UK. This includes better reporting of severe reactions seen in hospitals, strengthening the work of the UK Fatal Anaphylaxis Register to record all anaphylaxis deaths, and more robust follow-up when risks are identified.

For patients, this means:

- faster identification of hidden dangers, such as undisclosed allergens
- improved food safety and clearer warnings
- a healthcare system that learns from every serious incident to prevent future harm.

Learning from what works

There is growing evidence that early-life factors play a major role in the development of allergies. Successful programmes, such as the Finnish Allergy Programme, have shown that changing how we think about exposure, lifestyle and immune development can reduce allergy rates at a population level.

The NAS supports learning from this evidence and applying it carefully in the UK. Areas of interest include:

- supporting healthy development of the immune system early in life
- encouraging time outdoors and contact with natural environments
- reducing unnecessary antibiotic use
- supporting breastfeeding and healthy birth practices.

For families, this approach shifts the message away from avoidance, towards healthy exposure to a microbially rich environment.

Preventing specific allergic conditions

Different allergic conditions need tailored prevention strategies, while still keeping messaging clear and consistent for patients.

Food allergy

For food allergy, prevention focuses on clear, evidence-based guidance around infant feeding. Research shows that introducing allergenic foods promptly at the time of solid food introduction, and maintaining regular consumption, can significantly reduce the risk of food allergy developing. This advice applies to all children, regardless of their individual risk of developing food allergies.

Key actions include:

- nationally consistent advice for parents and carers
- better support for introducing allergenic foods safely
- improved access to infant-appropriate and safe forms of food allergens
- reducing confusion caused by conflicting or outdated messages.

For parents, this means clearer guidance, less fear around introducing allergenic foods and better support from healthcare professionals who understand the benefits of prompt allergenic food introduction.

To optimise allergy prevention, we recommend strategies such as considering introducing other nuts into the diet for children with a nut allergy. Screening of asymptomatic children for food sensitisation often results in delaying starting the consumption of the allergenic foods and is not recommended.

Eczema

Eczema in infancy is not just a skin condition; it can increase the risk of developing food allergies later. The NAS supports better early management of eczema through education and coordinated care.

Patients and families benefit from improved advice on managing eczema early, reduced risk of complications and better coordination between healthcare professionals.

Respiratory allergies

Respiratory allergies and asthma are strongly influenced by environmental factors. Prevention efforts include discouraging smoking and vaping, improving indoor air quality and reducing exposure to pollutants and allergens, especially in high-risk environments such as poor housing, schools and healthcare settings.

For patients, this can mean fewer symptoms, healthier lungs and an improved home and work environment.

Drug allergy

Many people are labelled as 'drug allergic' when they are not, leading to unnecessary avoidance of effective treatments. The NAS promotes better diagnosis, education and access to specialist services to prevent harm caused by incorrect allergy labels.

For patients, this reduces unnecessary restrictions on medications, use of less effective or more harmful alternatives, and anxiety and confusion around medical treatment.

Using allergy tests wisely

Not all positive allergy tests mean someone is truly allergic. A positive allergy test result (skin prick test or blood test) in an individual with no clinical allergy is common. Overdiagnosis can lead to unnecessary food avoidance, increased anxiety and even higher allergy risk over time.

We aim to improve how allergy tests are used and interpreted, and to raise awareness of unproven tests often marketed outside the NHS. Patients can benefit from more accurate diagnoses, less unnecessary restriction and greater confidence in medical advice.

Equally, there is a need for better tools for diagnosing non-immunoglobulin-E (IgE)/delayed-type milk allergy, the symptoms of which overlap extensively with the normal allergy symptoms in infancy. This makes diagnosis difficult and susceptible to significant overdiagnosis with subsequent unnecessary dietary restriction.

A healthier future for patients

At its heart, this is about empowering people – especially parents and carers – with the knowledge, support and systems they need to reduce the impact of allergic disease. By focusing on prevention, equity and evidence-based care, this approach offers hope for a future where fewer people develop severe allergies, fewer lives are lost to anaphylaxis and where living with allergies becomes less frightening and restrictive.

Prevention saves money and it saves lives. The NAS offers the opportunity to place allergy prevention at the heart of allergy healthcare, giving everyone the best possible chance of an allergy-free life.

Meet the author



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