

Food Intolerance

Aziz Koleilat*

Pediatric department, Makassed University General Hospital, Lebanon

Received: July 09, 2017; **Published:** July 13, 2017

***Corresponding author:** Aziz Koleilat, Pediatric department, Gastroenterology and Nutrition, Makassed University General Hospital, Beirut- Lebanon, Tel: 009613231717, 00961130038 ; Email: drkoleilat@hotmail.com

Keywords: Allergy; Intolerance; Food; immunity; IgA

Editorial

Food intolerance was recognized as separate issue [1], after the Australian researchers published in 1978 details of an “exclusion diet” in order to exclude specific food chemicals from the diet of patients. In 1995 the European Academy of Allergology and Clinical Immunology (EAACI) suggested a classification on the basis of the responsible ‘pathogenesis’ mechanism. According to this classification: Non-toxic reactions can be divided into ‘food allergies’ when they recognize immunological mechanisms, and ‘food intolerances’ when there are no immunological implications.

Reactions secondary to food ingestion are defined generally as ‘adverse reactions to food’. In 2003 the Nomenclature Review Committee of the World Allergy Organization (WAO) issued a report of revised nomenclature for global use on food allergy and food intolerance that has had general acceptance with the following definitions: [2].

Food intolerance

Food intolerance (or non-allergic food hypersensitivity) is a detrimental reaction, often delayed, to a food, beverage, food additive, or compound found in foods that produces symptoms in one or more body organs and systems, but generally refers to reactions other than food allergy.

Food allergy

Food allergy is an immune system reaction that occurs soon after eating a certain food. Even a tiny amount of the allergy-causing food can trigger signs and symptoms such as digestive problems, hives or swollen airways.

Food aversion

Food aversion occurs when a person associates the taste of a certain food with symptoms caused by a toxic, spoiled, or poisonous substance. Generally, taste aversion is developed after ingestion of food that causes nausea, sickness, or vomiting.

Pseudo-allergy

Pseudo-allergy is a condition named for its similar presentation to a true allergy, though due to different causes. It may be due to alterations in the metabolism of histamine. It can be the cause of some forms of food intolerance.

Hypersensitivity

Hypersensitivity (also called hypersensitivity reaction or intolerance) is a set of undesirable reactions produced by the normal immune system, including allergies and autoimmunity. These reactions may be damaging, uncomfortable, or occasionally fatal [3].

Why food tolerance is on the rise?

Many factors are involved, genetics, the integrity of the natural barrier of the gut wall (“leaky gut”), the viability of phase I and phase II detoxification pathways (liver) [4], the presence or absence of other co-factors (in the liver), the amount of the food, the combination of foods, stress with increased cortisol levels (Brain-Gut Axis) where the protective secretory IgA antibodies in the gut decrease in response to stress. In this case the undigested food macromolecules invade the bloodstream and activate the immune system through the Tight Junction [5].

As final definition, food intolerance is described as a ‘non allergic hypersensitivity’ to food. Symptoms of food intolerance tend to take longer to appear than symptoms of allergies. The symptoms are varied and can include, migraine, cough, and stomach ache. Some food intolerance is caused by the lack of a particular enzyme. Food allergy, food intolerance, food sensitivity are three separate issues which has to be finally well defined, specified in order to clear the misconception and have a clear treatment approach.

References

1. Gibson AR, Clancy RL (1978) An Australian exclusion diet. *Med J Aust* 1(5): 290-292.

2. Johansson SG, Bieber T, Dahl R (2004) Revised nomenclature for allergy for global use: Report of the Nomenclature Review Committee of the World Allergy Organization, October 2003. *The Journal of Allergy and Clinical Immunology* 113(5): 832-836.
3. Montalto M, Santoro L, D'Onofrio F (2008) Adverse reactions to food: allergies and intolerances. *Dig Dis* 26(2): 96-103.
4. Xu C, Li CYT, Kong ANT (2005) Induction of phase I, II and III drug metabolism/transport by xenobiotics. *Arch Pharm Res* 28: 249.
5. Nicholas J, Mantis (2011) Secretory IgA's Complex Roles in Immunity and Mucosal Homeostasis in the Gut. *Mucosal Immunol* 4(6): 603-611.



Assets of Publishing with us

- Global archiving of articles
- Immediate, unrestricted online access
- Rigorous Peer Review Process
- Authors Retain Copyrights
- Unique DOI for all articles

<http://biomedres.us/>