

Information for Schools & Early Years Settings

Allergy Medications



There are two types of medication that you are likely to see in schools and Early Years' settings:

ANTIHISTAMINES

These medicines block the effects of histamine in the body. Histamine is normally released when the body detects something harmful (like an infection). It causes blood vessels to expand and skin to swell which protects the body. When a child has an allergy, their body mistakes something harmless (for example peanuts or pollen) as a threat, and the body releases histamine which causes the allergic reaction symptoms. Antihistamines help to stop this happening if they are taken before the child encounters the trigger allergen and they also help to reduce symptoms if taken after exposure.

Some commonly prescribed antihistamines are Cetirizine, Loratadine, Fexofenadine and Chlorphenamine.

Some children will take antihistamines daily as a preventative treatment (e.g. in those with hayfever) and some will keep them at school/nursery as emergency medication.

For children who need antihistamines after a reaction, most can be given a second dose after 15-20 minutes if they still have symptoms. The correct dose for each child should be written on their Allergy Action Plan (please see separate information sheet: '[Allergy Action Plans](#)' for more details).

ADRENALINE AUTO-INJECTORS

Adrenaline is the most important drug used to treat anaphylaxis. Adrenaline Auto-Injectors (AAIs) are pen-like devices which are pre-loaded with a dose of adrenaline. You are likely to know AAIs by their brand names; "Jext" and "EpiPen."

Children who have been prescribed an AAI should always have two devices available for immediate use. This is because a second dose can be given after 5 minutes if the first dose is not effective. Every child with an AAI should have an Allergy Action Plan.

AAIs should be kept somewhere easily accessible or be carried with the child (most appropriate for secondary school-aged children.) **AAIs should not be kept in a locked cupboard.** AAIs must be taken with the child if they go off site. Consideration should be given to taking pens with the child to PE/playtime if the site is large and the children are likely to be a long way from where the AAI is usually stored. Provision for AAI storage and use during after school activities/clubs should also be considered, especially if these are not run by yje school.

All AAIs have an expiry date. It is parent's responsibility to ensure AAIs kept in school/nursery remain in date, although it is good practice to regularly check any AAIs kept on school premises. Both Jext and EpiPen provide an "expiry alert service" which can be accessed through their respective websites.

Only staff who have been trained should use AAIs. Both [Jext](#) and [EpiPen](#) have training videos available via their websites, and AAI administration should be covered in First Aid Training. Alternatively, you can also contact your School Nurses.

A third brand of AAI called "Emerade" have been recalled by the manufacturer and **should not be used.** If one of the children in your care has an Emerade pen, please ask the child's parents to discuss this with their GP or healthcare professional.