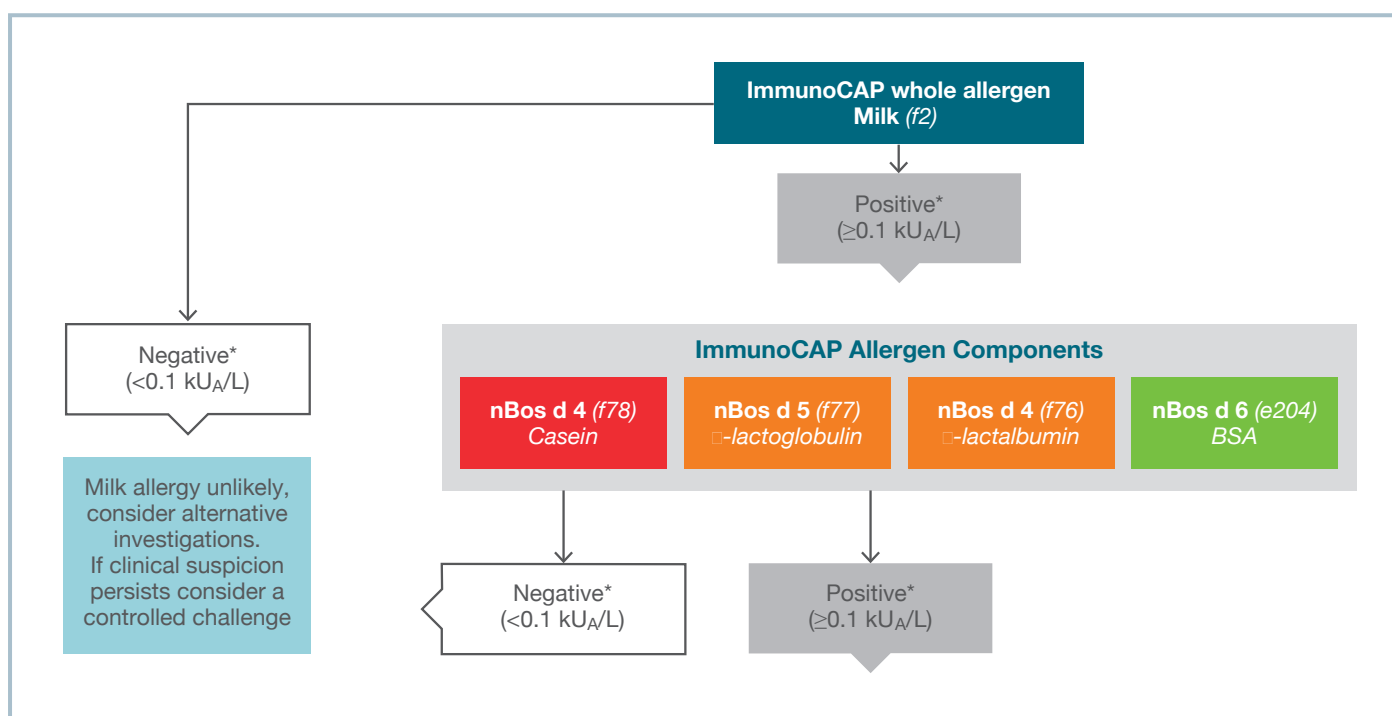


# How to test for milk allergy



## Interpreting results

### Reaction to raw and cooked milk<sup>1-17</sup>

- Primary, persistent, milk allergy to both raw and cooked milk is likely<sup>1-17</sup>

#### Management considerations

- Milk avoidance
- Consider, in context of other risk factors, prescription of an adrenaline autoinjector

### Reaction to raw milk<sup>1,10-12,17</sup>

- Primary milk allergy is likely
- Likely to be tolerant to extensively cooked/baked milk if nBos d 6 is negative

#### Management considerations

- Avoidance of raw milk – consider controlled challenge of cooked/baked milk

### Reaction to raw milk<sup>1,10-12,17</sup> and cross reaction to beef<sup>18,19</sup>

- Primary milk allergy is likely
- Likely to be tolerant to extensively cooked/baked milk if nBos d 8 is negative

#### Management considerations

- Avoidance of raw milk – consider controlled challenge of cooked/baked milk
- Consider risk of concomitant beef allergy and risk of cross reaction with other serum albumins, e.g. pork (f26)/mutton (f88)

If all components in the algorithm are negative and f2 is positive, the patient might be sensitised to a panallergen

\*Results should be interpreted in the context of the history.; ImmunoCAP Allergen f2, Milk; ImmunoCAP Allergen f76, Allergen component nBos d 4 Alpha-lactalbumin, Milk; ImmunoCAP Allergen f17, Allergen component nBos d 5 Beta-lactoglobulin, Milk; ImmunoCAP Allergen e204, Allergen component nBos d 6 BSA, Cow; ImmunoCAP Allergen f18, Allergen component nBos d 8 Casein, Milk

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