

It's Worth a Shot

**By Reg P. Wydeven
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As many readers know, my 9-year-old son suffers from severe food allergies. He's allergic to peanuts, tree nuts, eggs and dairy products. We are very careful to monitor what he eats so he won't have any allergic reactions.

Because of his allergies, we were thrilled years ago when Congress passed a law requiring food manufacturers to clearly identify whether their products contained any of the eight major food allergens. With allergens clearly labeled, we're able to ensure what he eats at home is safe.

We are also very grateful that most restaurants are extremely accommodating in helping us identify his trigger allergens in the ingredients of their food, including any oil they may be prepared in. Many places even take steps to make sure the pans and utensils used to prepare his food are clean, so as to not cross-contaminate his meal. So we feel pretty safe eating at certain restaurants, knowing he won't have a reaction.

The environment we have the least control over his allergen exposure is school. Again, we are so blessed that his school takes his allergies seriously. His teachers are thoughtful and warn other parents of his allergies if they decide to send birthday treats to school. He's got a special "peanut-free zone" in the lunch room where he can eat without having to worry about sitting next to a kid who innocently whips out a peanut butter sandwich.

In addition, in 2011, Wisconsin passed a law that allows our son to possess an epinephrine auto-injector at school with his doctor's and our approval. The most common type of injector is an EpiPen, which contains a short, spring - activated needle that injects epinephrine when jabbed against his thigh. The law also releases the school of any liability for any injury caused by him using his EpiPen.

We feel that EpiPens are a Godsend. Unfortunately, we've had to use them on our son twice when he began having severe allergic reactions, known as anaphylaxis, which included a tightened throat, wheezing and hives. Within minutes of injecting him, his symptoms would subside. Because of this, we carry EpiPens everywhere. All of our family members have them, too, just in case.

While the law is great, Wisconsin was the 49th state in the U.S. to allow students to possess EpiPens at school. Once again, we are behind the curve when it comes to allergy legislation.

2013 marks the 25th anniversary of the U.S. Food and Drug Administration's approval of EpiPens for the treatment of anaphylaxis. Coincidentally, sixteen states have passed laws this year that allow schools to keep epinephrine on hand without requiring a prescription for an individual student, and provide legal protection for staff members who administer it. Eleven states already had such a law on the books. Unfortunately, Wisconsin has not yet joined them. Four states - Virginia, Maryland, Nebraska and Nevada - actually require schools to keep epinephrine handy.

Earlier this year, the U.S. House of Representatives passed a bill that would give states special preference of asthma-related grants if they come up with policies to make epinephrine available in schools, and further incentives if the states actually passed such laws.

Many kids don't know if they have allergies, not only to foods but also bee and wasp stings. Without knowing, these kids wouldn't have prescriptions for EpiPens, which is why allowing schools to stock them is so important.

I hope the EpiPens sit in a drawer and gather dust, but if they're ever needed, they're literally lifesavers.

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