



Peanut-healthy but Risky for a Young Child

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Introduction

Peanut or groundnut is considered as nutritious food, as it is rich in many essential nutrients which include calories, protein, vitamins, and dietary minerals [1]. Peanuts also contain polyphenols, polyunsaturated and monounsaturated fats, phytosterols and dietary fibers [2]. They are indeed a good source of nutrition, especially for children.

On the other hand, peanut is also a common cause of food allergy, which sometimes can be fatal. The incidence of peanut allergy was on the increase, in spite of avoiding peanuts for children with high risk of peanut allergy. National Institute of Allergy and Infectious Diseases while issuing the guidelines for diagnosis and management of food allergies, recommend feed peanuts as early as four to six months for an infant with a high risk of peanut allergy [3]. They observed that early exposure to peanut would lead to desensitization, and reducing the severity of peanut allergy in such infants, citing dual allergen exposure hypothesis which states that early oral exposure to food allergen induces tolerance.

However, it is not safe to feed peanuts for a child before the age of four years, as these kids will not be able to chew the nut to be able to swallow safely. Consumption of whole peanuts proves fatal for some kids when it is aspirated into the airway. Most of the studies have reported peanuts as the most common foreign body in children undergoing bronchoscopy for suspected foreign body aspiration [4]. Mortality or hypoxic brain injury occurs in 4% of

patients with foreign body aspiration. The incidence of foreign body aspiration is more common in children less than three years, which can be attributed to poorly coordinate swallowing and lack of posterior dentition [5]. A high index of clinical suspicion is most important for the diagnosis of foreign body aspiration, as also eliciting the history of choking and a clinical assessment of the respiratory system which is followed by a radiograph of the chest. Missed or delayed diagnosis of an aspirated peanut can result in respiratory complications like recurrent pneumonia and chronic cough [5]. The best method to diagnose and treat a case of foreign body bronchus is rigid bronchoscopy, which carries its own associated risk [4].

The American Academy of Pediatrics suggests the parents use peanut butter instead of the whole nut. The guidelines emphasize using "infant safe" forms of peanut, like peanut butter thinned with warm water or mixed into pureed fruit or vegetables [6]. Crushed peanuts mixed with jaggery, which is a common sweet dish, is an equally good alternative. Prevention is always a better option especially in the case of foreign body aspiration, which can be done by educating the public about the proper feeding methods and the risk associated with improper feeding habits. While we observe Children's day on 20th of November, Otolaryngologists should take the responsibility of educating the public in this regard; hence at least a few lives can be saved [7].

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