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Adult and Pediatric Allergic Disease, Asthma and Immunology

Diplomates: American Board of Allergy and Clinical Immunology

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ALLERGY DIET #2

FOOD ALLOWED:

<u>MEAT</u>: Lamb Chicken <u>RICE PRODUCTS</u>: Rice Rice Bread Puffed Rice Rice Milk Rice Cakes/Crackers Rice Krispies

<u>FRUITS</u>: The juice and nectar from the fruits listed below are allowed, as well as the fruits either fresh or canned.

Apricots Apples Cranberries Peaches Pears Pineapple

VEGETABLES:

Asparagus Beets Carrots Lettuce Potato MICELLANEOUS: Tapioca White Vinegar Olive Oil Honey – 2oz a day Cane or beet juice Salt Oleomargarine- milk free (Kosher) Crisco

INSTRUCTIONS:

- 1. Eat only the foods listed above during the trial elimination period. Be sure to read product labels carefully for all ingredients.
- 2. Avoid coffee, tea, soft drinks, chewing gum, and all medication, vitamins, etc., except as ordered by your physician.
- 3. Health food stores carry many specialty items not available in the local grocery stores.

AVOID ANY FOOD NOT ON THIS LIST (CHECK PRODUCT LABELS CAREFULLY)

Dietary restriction for the purpose of diagnosing food allergy.

If the patient has symptoms that may be attributed to food allergy such as hives or swelling of a body part, an allergist will sometimes put them on a restrictive diet such as our diet #1; the rice and lamb diet. The purpose of this is to remove all of the commonly eaten foods from the diet except for those foods which rarely cause allergy and provide an alternative source of nutrition in the absence of the patient's regular diet. If the symptoms disappear while on the diet, this may be evidence that the symptoms were due to food allergy. The diet#1 has been liberalized by our diet #2 and #3 which can be used alternatively as starting points depending on patient motivation, clinical history, and other factors. If the allergic type symptoms are eliminated by dietary restriction then major food groups can be added back one at a time such as milk, wheat, eggs, etc., to see if the symptoms flare. Ideally, the offending food should be removed from the diet and again introduced another times in order to further document the flare of symptoms when that food is introduced.

During the time of dietary restriction and the adding back of foods, a thorough diet history should be kept. For this purpose our "14 Day Diet Diary" should be used by the patient as a means by which to conveniently keep a food diary that can be inspected by the physician for signs of causality.

If symptoms are intermittent, or other than constant, the "14 Day Diet Diary" may be used as a means by which to collect prospective information without any dietary restrictions. The patient should maintain a diary of foods eaten, symptoms which have occurred, and medications taken in prospective fashion. This type of information is much more reliable than retrospective or historical information. These types of food diaries are then studied for clues regarding the potential cause and effect of various foods.