

# LATEX ALLERGY: ARE YOU AWARE ?

*Roberta Blakely Clinical Resource Nurse - Nephrology*

Are you familiar with nursing standards and protocols for managing patients with Latex allergies? The following article will provide the reader with an overview of Latex allergy information. Please consult your facility's Nursing Manual for specific nursing protocols for the management of patients with known or suspected allergies.

## What is latex?

Natural rubber latex (NRL) and Latex are terms that describe the liquid obtained from the rubber tree. Repeated exposure to latex products can sensitise some individuals who later develop a systemic or local allergic response to the latex proteins.

## Are there other types of reactions to latex besides latex allergy?

Yes, the most common reaction to latex products is irritant contact dermatitis - the development of dry, itchy, irritated areas on the skin, usually the hands. This reaction is caused by irritation from wearing gloves and by exposure to the powders added to them. Irritant contact dermatitis is not a true allergy. Allergic contact dermatitis - results from the chemicals added to latex during harvesting, processing, or manufacturing. Neither irritant contact dermatitis nor allergic contact dermatitis are true allergies.

## Signs & Symptoms

Allergic reactions can occur when a person comes into contact with latex. Symptoms of an allergic reaction may vary from mild (i.e. rash, runny nose, sneezing, itchy eyes) to severe or life threatening (i.e. difficulty in breathing, palpitations, swelling of throat and tongue, chest tightness). Symptoms usually occur within 30 minutes of exposure to the allergen (substance that causes the reaction) but have also been known to occur several hours after exposure. A person may have been exposed to latex in the past without having a reaction. Once they have a reaction, they will usually react when exposed again.

## Assessing Latex Risk

People at higher risk of developing a latex allergy are:

- Children with history of several surgeries/procedures involving contact with latex (i.e. spina bifida, genito-urinary problems).
- Occupational exposure to latex products, particularly with powder, or to latex aerosols.
- History of allergy/progressive reactions to foods known to cross-react with latex. (i.e. bananas, kiwifruit, etc...)
- History of generalised urticaria, rhinconjunctivitis, asthma, or bronchospasm when in contact with latex

## What do I do when I have a latex allergic patient?

If you have a patient identified as being latex allergic or in the high-risk group they must be provided with the safest possible environment during their stay in a hospital. They will require an armband identifying the allergy, a sign on the room door and a box containing

latex free products that will accompany the patient throughout his/her stay in the hospital. All items containing latex should be avoided when caring for the latex allergic patient. Special attention should be paid to gloves and dressings used. The Nursing Manual should contain a "safe list" for commonly used items.

- All patients should be assessed for latex allergy or latex allergy risk at each admission.
- Latex reactions must be documented on the patient chart and reported to the physician and Unit Manager.
- Latex allergic patients must be provided with equipment and supplies for a latex-safe environment. Latex-Free Kits should be readily available.
- A Stores Catalogue should be available to indicate whether any stock item contains latex or not (NRL is Natural Rubber latex, LF is Latex-Free).

## Common items that may contain NRL

adhesive tape, syringes, blood pressure cuffs, electrodes, infusion sets, stethoscopes, gloves, urinary catheters, operating room hats, balloons, hot water bottles, rubber bands

### The Latex Free Kit

- Should be prepared and kept in a central, easily accessible location (i.e. stores department) Kits should also be available in the Emergency department, the Employee Health and Walk-in Clinics.
- Should be returned to stores when finished or it needs to be restocked
- Should go everywhere the patient goes
- Contains allergy bands, signs for room and chart, and basic care equipment (items that are required that are not in the kit should be ordered from stores)

## What do I advise my patient to do at home

After discharge, your patient should be advised to avoid contact with all items containing latex and to advise any other health care providers (physicians, nurses, dentists, etc.) of the latex allergy.

Ideally a latex allergic person should carry some form of allergy identification on them such as a Medic Alert bracelet or a wallet card.

## Who can I ask if I have a question?

If, after reading this article you still have



unanswered questions, please contact your manager or educator to discuss the issue. If your facility does not have a non-latex protocol in place, consider volunteering to create one.