

FACTSHEET

This fact sheet is for education purposes only. Please consult with your doctor or other health professionals to make sure this information is right for your child. If you would like to provide feedback on this fact sheet, please visit: www.schn.health.nsw.gov.au/parents-and-carers/fact-sheets/feedback-form.

EpiPen® Use

What is an EpiPen®?

EpiPen® is an emergency device that can inject adrenaline. It is used to treat severe allergic reactions (anaphylaxis). Adrenaline, (a naturally occurring hormone) reverses a severe allergic reaction and can be lifesaving.

Should my child have an EpiPen®?

All allergists agree that children who have had a serious allergic reaction with involvement of the breathing passages or poor circulation, should have an EpiPen® if there is the possibility that re-exposure to the allergen can occur. The need for other children to have an EpiPen® depends on a number of factors which should be discussed with your doctor. If you have an EpiPen® it is very important that you understand how to use it and that you have a written ASCIA action plan for anaphylaxis provided by your doctor.

If you have an EpiPen® you must also have an ASCIA Action plan for Anaphylaxis, signed by your doctor. This plan should be kept up to date.

What is an ASCIA action plan for Anaphylaxis?

An ASCIA action plan for anaphylaxis describes what to do if your child has an allergic reaction and when to give the EpiPen®. This is the only plan that should be provided with your EpiPen. A copy of this ASCIA action plan can be found at www.allergy.org.au

A copy should be kept with **each** of your child's EpiPens, so that if your child has an allergic reaction, you can follow the recommended action.

Give the original to the school and keep a copy for your own use.

When should I use the EpiPen®?

The anaphylaxis action plan tells you when you should give the EpiPen®. Refer to it during an allergic reaction.

Give the EpiPen when **any one** of the following symptoms of Anaphylaxis are present:

- difficulty/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking and/or hoarse voice
- wheeze or persistent cough (Note- an important feature of all of these symptoms is that they involve the breathing passages)
- *persistent dizziness* or collapse
- pale and floppy (young preschool age children may become pale and floppy without other symptoms).

If you are in doubt it is better to use the EpiPen® unnecessarily rather than not treat a serious reaction.

What is an EpiPen® trainer?

An EpiPen® Trainer is a device that looks like an EpiPen® but which does not have a needle or contain medicine. It is used for practice in giving the EpiPen®. You can obtain a free trainer by joining the EpiClub www.epiclub.com.au



Which end contains the needle?

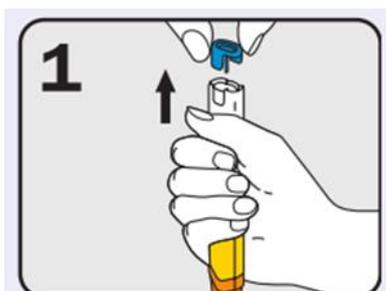
It is very important that you remember the orange tip contains the needle. You should **not** touch the orange tip with your fingers, thumb or hand.



How do I use the EpiPen®?

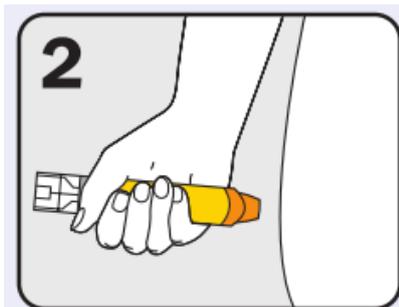
There are 3 steps.

1. Remove the EpiPen from the container. Form a fist around the EpiPen® and pull off blue safety release cap. A useful rhyme to help you know how to hold the EpiPen is: "blue for the sky, orange for the thigh".



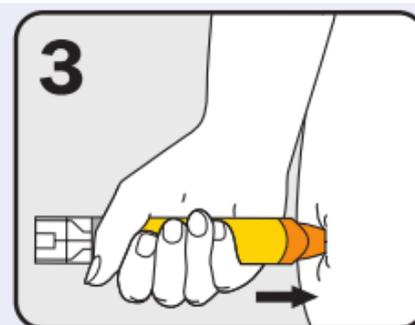
Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE.

2. Place orange tip against the outer mid-thigh of the child. The mid outer thigh is the 'fleshiest' or meatiest part of the thigh, where the muscle is. (Note; there is no need to 'swing and jab') A sudden jab may cause the child to jump and the needle to be discharged before the adrenaline is injected. It is important to hold your child securely while administering the EpiPen®. Your doctor or nurse should show you the best way to do this). It may be given through light clothing. If the clothing is difficult to remove you should not waste time attempting to do this.



PLACE ORANGE END against outer mid-thigh (with or without clothing).

3. Push HARD until a loud click is heard or felt and hold in place for 10 seconds



PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds.

Remove EpiPen®. Massage injection site for 10 seconds.

The EpiPen® can only be used once. After it is used it should be given to the ambulance officers to dispose of and should be replaced as soon as possible.

What should I do after giving the EpiPen®?

You should always call an ambulance even if the EpiPen® relieves symptoms. Your anaphylaxis action plan provides the phone number. When an EpiPen® has been used, the patient should remain under medical observation for at least 4 hours after the symptoms have resolved.

Is a further dose of adrenaline ever necessary?

A single dose of EpiPen® is all that is required to treat an anaphylactic reaction in the majority of cases. If there is no response after 5 minutes to the initial dose of adrenaline, another EpiPen® may be given if available.

What should I do if the symptoms look like Asthma?

If you are not sure if the symptoms your child is experiencing are due to allergy or asthma and you feel they may have been exposed to an allergen (e.g. food), then the safest and best course of action is to give the EpiPen®. The adrenaline in the EpiPen® will quickly treat asthma or anaphylaxis and is safe to give. You can use a bronchodilator (asthma reliever) e.g. Ventolin, **after** you use the EpiPen®.

Can I use other medicines (antihistamines, cortisone) instead of the EpiPen®?

No. If symptoms indicating a severe allergic reaction (anaphylaxis) develop, you should **not** rely on these other medications to treat the reaction.

Are there side effects from using an EpiPen®?

It is very rare for children to suffer any serious side effects from administration of EpiPen®. The EpiPen® contains adrenaline which is a naturally occurring hormone. The skin around the injection site often becomes quite pale for a short period of time after the EpiPen® is given. Other symptoms which may occur in some cases are tremor, anxiety, palpitations, headache and nausea. These symptoms only last for a short time and are not serious.

What strength EpiPen® should I have?

ASCIA and Australian allergists recommend EpiPen® Jr for children between 10 and 20kg and EpiPen® for anyone over 20kg. An EpiPen® Jr is not usually recommended for

children less than 10kg. Most children weigh 20kg before they turn 6 and school age children usually need the full strength EpiPen®.

Who can prescribe an EpiPen®?

The first authority prescription needs to be given by an allergy specialist, emergency specialist or a paediatrician. Your family doctor (GP) can order a repeat prescription if he/she has information from a specialist indicating that the EpiPen® is necessary.

How many EpiPens® can I get?

The current Authority Scheme in Australia allows for up to a MAXIMUM of two EpiPens® for children and adults. Generally, children should have one EpiPen® kept in the preschool, primary or high school office at all times and the other EpiPen® is to be carried with them at all other times, usually carried by a parent. An older child who is travelling to and from school independently should carry the second EpiPen® with them, and in High school, students should carry this EpiPen® with them all the time.

If there is a requirement for more than 2 EpiPens® additional EpiPens® can be purchased at pharmacies/chemists at the full non authority cost without the need for a prescription. The Authority Scheme will not provide additional EpiPens®, no matter what the extenuating circumstances.

What should I do if the EpiPen® is expired?

Replace it with a new one as soon as possible, however keep the expired device until you have a new one because in an emergency it is better to use an expired EpiPen® than no EpiPen® at all. This may still work, but not as effectively as an in date EpiPen®.

The shelf life of the EpiPen® is normally 12-18 months from the date of manufacture.

To avoid an expired EpiPen®, mark on a calendar the expiry date, and replace before then.

Join the EpiClub www.epiclub.com.au. They will send you an email or text reminder 2 months prior to expiry date.

Should the EpiPen® go everywhere with my child?

Yes. Most reactions occur outside the home or at school. Food allergy reactions often occur in restaurants. You should have the EpiPen® and the ASCIA Action plan for Anaphylaxis with you whenever you take your child out. When your child becomes old enough to go out alone he/she should carry the EpiPen® and ASCIA action plan and know how and when it should be used.

If my child has an EpiPen® will they need it for the rest of their life?

Not necessarily. In some cases children can outgrow their allergy, or in the case of stinging insect allergy, the allergy may be successfully treated by desensitisation and eventually an EpiPen® may not need to be carried.

How should I store the EpiPen®?

Ideally the EpiPen® should be stored in a cool place at room temperature - but NOT refrigerated. It is important that you keep the EpiPen® in a place where it is readily available if you need to use it. Never lock the EpiPen® away e.g. in a high school locker.

Where can I find more information on the Internet?

- The Australian Society of Clinical Immunology and Allergy (ASCIA) website contains useful information on EpiPen® use written by Australian specialists: www.allergy.org.au
It also contains a comprehensive e-learning program which can be accessed by any individual in particular those who may be responsible for children including parents/carer's school staff and children's services staff.
- The patient support group Allergy and Anaphylaxis Australia offers updates and tips: www.allergyfacts.org.au