



Loss Control TIPS

Technical Information Paper Series

Innovative Safety and Health SolutionsSM

Latex Allergies

Understanding the Problem and Minimizing the Risk

Background

Producers and users of latex rubber products have developed concerns about allergic reactions to latex rubber in products common in everyday use. Products ranging from pacifiers and toys to medical catheters and condoms have the potential for causing life-threatening medical emergencies to latex-sensitive individuals, even from extremely small exposures. The United States Food and Drug Administration has published, and the United States Occupational Safety and Health Administration has promised, regulatory action to address these risks.

Extent of the Problem

Some estimates place the percentage of the general population who are latex sensitive at 2.5%. But several groups are at a significantly higher risk of developing this allergy, including:

- Children with spina bifida or other conditions that may have required significant surgical intervention at a young age (up to 78% sensitive)
- Rubber industry workers
- Healthcare industry workers, including medical and dental professionals (up to 17% sensitive for medical, 50% for dental)
- Individuals prone to allergies (atopy)

Medical Consequences of Latex Allergy

The allergen(s) thought to be responsible for latex allergy are one or more of the proteins that occur naturally in the latex sap. The allergy can develop without warning and unpredictably. Continued contact with the allergen may build the sensitivity.

Two reactions could take place:

- (1) The more frequent—and less severe—*delayed hypersensitivity reaction*, similar to that experienced after contact with poison ivy. Symptoms, most commonly dermatitis on the body part contacting the latex product, emerge six to 72 hours after exposure.



- (2) Far more serious, but fortunately much less frequent, is the second type of reaction, that of *immediate hypersensitivity*, an IgE mediated immune response. The reactions of an *allergic* individual toward penicillin or a bee sting are indicative of this class. Clinical signs and symptoms include a broad spectrum of problems ranging from localized hives and swelling to anaphylactic shock (which can result in death).

To prevent a reaction in a latex-sensitive individual, the only safe environment is one which is free from latex. Even residues of latex products (e.g., dust from gloves, etc.) can be a sufficient provocation to elicit a medically serious response in a sensitive individual.

What You Can Do to Reduce Risks from Latex Allergy

- *Substitution.* Until allergen free materials are widely available for all products, manufacturers and consumers (both institutional and individual) must look for acceptable substitute materials. The source of the largest exposure, medical gloves, *currently has* an acceptable substitute, FDA-approved nitrile gloves. “Hypoallergenic” claims on latex products are misleading and are banned on medical devices.
- *Education.* At the present time, some employers, physicians, and even patients themselves, minimize the significance and consequences of the exposure. All potential users of latex products must understand the allergy and recognize its symptoms. Clinicians must recognize the condition and make appropriate referrals to allergists for *safe* confirmation and recommendations. Public institutions (e.g., schools, hospitals, etc.) must be informed of the significance of the allergy and the appropriate means to protect latex sensitive individuals.
- *Labeling.* The Food and Drug administration recently published a proposed rule that would require labeling of medical devices containing latex components. However, in light of the medical consequences to sensitive individuals, manufacturers of all types of latex products are urged to embrace this ‘duty to warn’ *now*, without waiting for a regulatory mandate.
- *Specific Controls at Medical Institutions.* Medical facilities should institute a formal policy and procedure that embraces:
 - Wide-spread dissemination of information about the clinical signs and symptoms of latex allergy
 - Enhanced medical histories for all patients, including specific questions on latex allergy
 - Establishment of “latex-safer” operating rooms, emergency rooms, recovery rooms, patient suites, dental operatories, etc.
 - Identification of latex sensitive patients through wrist band markings, chart markings, and room markings.
 - When medically appropriate and safe, sensitivity testing of suspect latex allergies.
- *Individual Controls.* Sensitive individuals can greatly reduce their chance of serious medical problems by adopting the following strategy:
 - Become knowledgeable about the allergy and the sources of allergen
 - Avoid contact with any product that might contain latex until it is verified as latex-free
 - Alert all health professionals encountered about the latex sensitivity
 - Carry non-latex gloves for emergency use by health professionals
 - Wear a Medic-Alert bracelet or tag to identify the allergy
 - Carry an emergency epinephrine kit (auto-injector) to self administer epinephrine in the case of incipient anaphylactic shock.

References

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