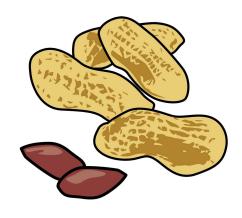
母親がピーナツを摂取しながらの母乳と児の早期(1歳まで)ピーナツ摂取がピーナツ感作リスクを下げる

Reduced risk of peanut sensitization following exposure through breast-feeding and early peanut introduction Tracy J. Pitt JACI 2018;141:620-5



背景

最近の研究では乳児期にピーナツを 避けているとピーナツアレルギーのリ スクが高まることが解っている。しかし 母親のピーナツ摂取については何も述 べられていない。

目的

母乳栄養中の母親のピーナツ摂取、その時期とピーナツ感作との関係について調べた。

方法

1995 年のカナダ喘息一次予防介入試験でのコホートでの二次的解析を行った。 母乳栄養、母親、乳児のピーナツ摂取について乳児期に繰り返しアンケートをおこなった。

結果

58.2%の母親が母乳栄養中にピーナツを摂取し、22.5%が乳児に 12 ヶ月までに直接ピーナツを与え、9.4%の小児がピーナツ

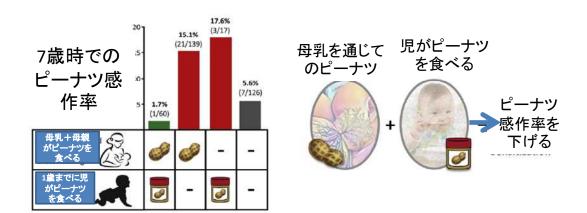
に感作された。最も感作が低かったのは (1.7%)母乳栄養中に母親がピーナツを食べ、 乳児が 12 ヶ月以前にピーナツを直接食べ た群であった(P<.05)。有意によりピーナツ 感作が高かった(15.1%)のは母親が母乳栄 養中にピーナツを摂取し、乳児が 12 ヶ月以 上過ぎてからピーナツを遅れて摂取した群、 または母親が母乳栄養中のピーナツ摂取を 避けて児は 12 ヶ月までに直接ピーナツを 摂取した群は 17.6%の感作率であった。 母 親のアトピー(アレルギー)と研究群での 解析では母乳中の母親のピーナツ摂取と児 の 12 ヶ月までのピーナツ摂取の組み合わ せがピーナツ感作を予防し、別個に母親だ けが摂食または児のみが摂食するのは感作 のリスクを上げた(P=.003)。

結論

この二次的解析では母乳栄養中の母親のピーナツ摂取と児の 1 歳までのピーナツ摂取が、母と児のピーナツ摂取の他の組み合わせと較べて最もピーナツ感作のリスクが低かった。

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母親がピーナツを摂取しながらの母乳と児の早期(1歳まで)ピーナツ摂取がピーナツ感作リスクを下げる



食物アレルギーの危険因子の ある母児は母親も児も食物アレル ギーの原因食物を制限しないで食 べる方が良いかもしれない。但し 既にアレルギーがあると解ってい る食物は医師の指示の元で食事を 進めるべきです。

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- Reduced risk of peanut sensitization following exposure through breast-feeding and early peanut introduction.
- Pitt TJ¹, Becker AB², Chan-Yeung M³, Chan ES⁴, Watson WTA⁵, Chooniedass R², Azad MB⁶.
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- Abstract
- BACKGROUND:
- Recent trials have shown that avoiding peanuts during

infancy increases the risk of peanut allergy; however, these studies did not address maternal peanut consumption.

- OBJECTIVE:
- We sought to investigate the relationship between maternal peanut consumption while breast-feeding, timing of direct peanut introduction, and peanut sensitization at age 7 years.
- METHODS:
- Secondary analysis of a nested cohort within the 1995 Canadian Asthma Primary

Prevention Study intervention study was performed. Breast-feeding and maternal and infant peanut consumption were captured by repeated questionnaires during infancy. Skin prick testing for peanut sensitization was performed at age 7 years.

• RESULTS:

• Overall, 58.2% of mothers consumed peanuts while breast-feeding and 22.5% directly introduced peanuts to their infant by 12 months. At 7 years, 9.4% of children were sensitized to peanuts. The

lowest incidence (1.7%) was observed among children whose mothers consumed peanuts while breast-feeding and directly introduced peanuts before 12 months. Incidence was significantly higher (P < .05) if mothers consumed peanuts while breast-feeding but delayed introducing peanuts to their infant beyond 12 months (15.1%), or if mothers avoided peanuts themselves but directly introduced peanuts by 12 months (17.6%). Interaction analyses controlling for study group

and maternal atopy confirmed that maternal peanut consumption while breast-feeding and infant peanut consumption by 12 months were protective in combination, whereas either exposure in isolation was associated with an increased risk of sensitization (P interaction = .003).

- CONCLUSIONS:
- In this secondary analysis, maternal peanut consumption while breast-feeding paired with direct introduction of peanuts in the first year of life was

associated with the lowest risk of peanut sensitization, compared with all other combinations of maternal and infant peanut consumption.