Wasp and Bee Allergy

Exceptional healthcare, personally delivered
Introduction

Wasp and Bees belong to the family known as Hymenoptera, which also include Yellow Jacket Wasps, Hornets, Bumble Bees and Ants.

It has been estimated that a non allergic person would require 1500 stings to deliver a lethal dose of venom to an adult weighing 70Kgs.

In the UK 2-9 deaths are reported to Bee or Wasp stings every year, these deaths are attributed to a severe allergic reaction known as anaphylaxis (a sudden drop in blood pressure).

For comparison more people are struck by lightning then die from an actual sting.

In the UK the majority of allergic reactions are due to wasp stings. Bee sting allergy tends to be in people with high risk occupations, for example beekeepers and gardeners.

You can sometimes tell the difference between a wasp and a bee sting because the bee leaves its stinger behind and dies shortly after delivering its sting.

What are the symptoms?

Symptoms can be divided into two main types;

Local Reactions

a) Mild local reactions
It is normal to have pain, redness, itching and local swelling, this is not an allergy but the body’s response to the venom, the reaction develops over a few hours with no adverse reactions and settles over a period of hours.

b) Severe local reactions
A large hard swelling at the site of the sting, lasting for several days after the sting, suggests that you may be becoming more allergic, consult your doctor for further advice.
Severe or anaphylactic reactions

These symptoms may develop within 10 minutes of a sting

- Generalised Itching (urticaria)
- Hives (nettle rash)
- Flushing of the skin
- Abdominal cramps and nausea
- Increased heart rate
- Difficulty in breathing due to asthma or throat swelling
- Feeling of weakness (due to a sudden drop of blood pressure)
- A sense of doom
- Collapse and unconsciousness

What should I do if I get stung?

Local reactions, swelling, redness and pain will normally respond quickly to a fast acting antihistamine, or the application of ice to the swelling.

If you are stung by a bee and the stinger is still present, scrape the stinger out with a finger nail; removing the stinger by grasping the stinger between thumb and forefinger causes the venom sac to discharge a full load of venom into the wound.

Seek immediate medical attention for any stings in the mouth, as this could cause local swelling and therefore restrict the airways.

More severe and generalised reactions should be treated promptly, in the first instance with an oral antihistamine.
If your symptoms fail to respond to this treatment, **AND YOU START TO EXPERIENCE BREATHING DIFFICULTIES** (an Epipen should be administered if this has been prescribed for you) immediate medical attention must be sought. Call an ambulance 999.

**How do I know if I am allergic to wasps or Bees?**

For allergy to be suspected you will have one or more of the following:

- A very large swelling at the site of the sting, for example a whole arm or whole leg
- An all over rash not just at the site of the sting
- Swelling of the face throat or tongue
- Loss of consciousness (a sign of drop in blood pressure)

You have been referred to this clinic for investigation of your suspected allergy. You will be seen by an Immunology doctor specialising in allergy who will take a detailed clinical history.

**How is this diagnosis made?**

You will be seen by an Immunology doctor specialising in allergy who will take a detailed clinical history.

Skin prick testing (see our leaflet on skin prick testing) to both wasp and bee will be performed.

You may also have a blood test.

**What treatment options do I have?**

1) **Avoidance measures:**

- Avoid perfumes and bright colours as this attracts the insects
- If a wasp or bee approaches do not try and swat it away as this will aggravate them, and make them more likely to
sting, remain calm until they go away.
- Avoid sugary drinks and food outdoors as this also attracts the insects
- If you come across a wasps nest or bee hive do not disturb it, seek help in getting it removed.
- Wear shoes out side; do not walk on grass barefoot.
- Sweat also attracts wasp and bees particularly when sun bathing with sun screen.

2) Self Help:
If the risk of a reaction or sting is low your specialist may advise you to carry antihistamines and an adrenaline injection (Epipen) this is to self treat if a sting occurs, prior to seeking medical help.

The need for you to carry an Epipen will be assessed by your individual Immunology Doctor, at the time of your consultation.

You may also wish to wear an SOS medical emblem; for example a Medic Alert emblem. This instantly informs others what treatment you may require, as vital medical details are held on these emblems.

Information on the different emblems is available from our Immunology department or via the internet

3) Desensitisation:
Desensitisation is a very effective and safe treatment. It requires expert management and can be only carried out in specialist hospital clinics by staff specialising in allergy.

What does this treatment involve?
This treatment requires weekly injections over the first 12-16 weeks, then monthly injection for 3 years. Please see our leaflet on desensitisation treatment for more information.
References and Sources of Further Information

The Anaphylaxis campaign (2007) allergy to wasp and bee stings fact sheet


British Allergy Foundation
Helpline Telephone No 01322 619898
Web: www.allergyuk.org [Last accessed November 2010]
Email: info@aaaai.org

www.anaphylaxis.org.uk [Last accessed November 2010]

www.insectstings.co.uk [Last accessed November 2010]

NHS Constitution. Information on your rights and responsibilities. Available at www.nhs.uk/aboutnhs/constitution
If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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