

Lactose Intolerance vs. Dairy Allergy What's the Difference?

People often confuse lactose intolerance with a dairy allergy, yet there's a crucial difference: People with lactose intolerance can still find ways to enjoy dairy!

	Lactose Intolerance	Dairy Allergy
Cause	Gastrointestinal response from inadequate ability to digest lactose (milk sugar)	Immune system reaction to the protein in dairy (whey and/or casein)
Severity	Causes temporary discomfort	Can be life threatening (anaphylaxis)
Onset	Primarily affects adults	Primarily affects children
Symptoms	 Diarrhea, nausea, abdominal cramping Bloating, fullness, gas 	 Diarrhea, vomiting, abdominal cramping Angioedema or swelling Hives or red, itchy skin Stuffy or itchy nose; sneezing or itchy, teary eyes

Diagnosing Lactose Intolerance

Lactose intolerance is the No. 1 barrier to physicians recommending dairy. It can be diagnosed using one of these three methods:

- Lactose tolerance test: measuring glucose in the blood after drinking a high-lactose beverage
- Hydrogen breath test: measuring hydrogen levels in the breath after drinking high-lactose beverage
- **Stool acidity test:** only used if unable to tolerate either of the above tests¹

5 Ways to Enjoy Dairy With Lactose Intolerance

- **Sip It:** Start with small amounts of milk and increase it slowly over days or weeks to find the amount that works for you.
- **Try It:** Opt for lactose-free milk real, great tasting milk, just without the lactose providing the same nutrients as regular dairy foods and an easy swap in recipes.
- **Stir It:** Pair milk with meals or mix it with other foods, such as soup or cereal, to help slow digestion.
- Slice It: Use natural cheeses such as cheddar, Colby, Monterey
 Jack, mozzarella and Swiss, which are naturally very low in lactose
 per serving.
- **Spoon It:** Yogurt contains live and active cultures that help digest lactose it's also a great base for a smoothie, dressing or dip.



Food Allergy 101: What Your Patients Need to Know

Testing for Food Allergies

Accurate diagnosis of a food allergy should include a medical history, physical examination and clinical diagnostic testing. Blood tests and skin-prick tests can be an important piece of the puzzle, but are not adequate for diagnosis alone. The double-blind, placebo-controlled food challenge is the gold standard for diagnosing a true food allergy.²

Dairy Allergy Prominence

Dairy allergy is the most common food allergy in infants and young children, affecting 2-3 percent. Nearly all infants who develop milk allergies do so within their first year of life. Fortunately, most children outgrow their dairy allergy.

Dairy Allergy Treatment

The treatment for dairy allergy is to avoid the food completely. Guidance by a registered dietitian nutritionist is strongly recommended to navigate an allergen-free, nutrient-rich diet.²

Cautions About Nutritional Gaps

Food allergies have the potential to affect nutrition and growth. Scientists found the average weight, height and body mass index (BMI) percentiles were significantly lower for children with dairy allergies. They also reported lower vitamin D and fewer calories consumed.³



Stay Informed

To ensure that our patients who have food intolerances and allergies are still getting all the nutrients they need, we need to be accurate, accessible and accountable. Learn more about food allergies at FoodAllergy.org and more about lactose intolerance at DairyMAX.org.

Resources

- American College of Allergy, Asthma & Immunology: https://acaai.org/allergies
- Food Allergy Research & Education®: https://www.foodallergy.org/
- National Institute of Allergy and Infectious Disease: https://www.niaid.nih.gov/diseases-conditions/food-allergy

References

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- 2. Collins SC. Practice Paper of the Academy of Nutrition and Dietetics: Role of the Registered Dietitian Nutritionist in the Diagnosis and Management of Food Allergies J Acad Nutr Diet. 2016;116:1621-1631.
- 3. Robbinns et al. Persistent Cow's Milk Allergy is Associated with Decreased Growth: A Longitudinal Study. J Allergy Clin Immunol. February 2018 Volume 141, Issue 2, Supplement, Page AB150.

