Nutr Clin Pract. 2010 Apr;25(2):192-8. Testing for food reactions: the good, the bad, and the ugly. Mullin GE, Swift KM, Lipski L, Turnbull LK, Rampertab SD. Source Johns Hopkins University School of Medicine, Baltimore, MD 21205, USA. gmullin1@jhmi.edu

## Abstract

An increasing number of commercial tests for food allergies are marketed to consumers and healthcare practitioners with tenuous claims. The aim of this article is to provide an evidencebased review of the tests and procedures that currently are used for patients with suspected food allergy. A systematic review of the literature evaluating the validity of tests and procedures used in food reactions was performed using conventional search engines (eg, PubMed, Ovid) as well as consumer sites (eg, Google, Bing). The National Library of Medicine Medical Subject Headings (MeSH) term food hypersensitivity was used along with food allergy testing, food sensitivity testing, food intolerance testing, and adverse food reactions. Of the results obtained, testing for immunoglobulin E (IgE)-mediated food allergy was best represented in PubMed. IgE-based testing continues to be the gold standard for suspected food allergies. Among modalities used by many conventional and alternative practitioners, immunoglobulin G (IgG)-based testing showed promise, with clinically meaningful results. It has been proven useful as a guide for elimination diets, with clinical impact for a variety of diseases. Mediator release testing and antigen leukocyte cellular antibody testing were only represented on consumer sites. Further investigation into the validity and the clinical application of these tests and procedures is required. Disclosing the basis for food reactions continues to present a diagnostic challenge, and testing for food allergies in the context of an appropriate clinical history is paramount to making the correct diagnosis.