Preventing Latex Reactions

Continued exposure to latex allergens increases sensitization and worsens allergic reactions. There is no treatment for a latex allergy except avoidance.

- If you have latex allergy, avoid all contact with latex gloves and other latex-containing materials. Also, avoid areas where you might inhale the powder from latex gloves worn by others.
- Wear non-latex gloves for activities that are not likely to involve contact with infectious materials (i.e., food preparation, chemical handling in laboratories, routine housekeeping, maintenance, etc.). Nitrile gloves are very durable, and may be substituted for latex in many applications. For chemical protection, use a glove tested for permeability against the specific chemical in question.
- If latex gloves are used, choose gloves that are powder-free and have a reduced protein content.
- When wearing latex gloves, do not use oil-based hand creams or lotions.
- After removing latex gloves, wash hands with mild soap and dry thoroughly.

If you develop symptoms of latex allergy, avoid direct contact with latex-containing products until you can see a physician experienced in treating latex allergies. Diagnosing latex sensitivity includes a thorough medical history, skin testing (skin prick and skin patch), blood tests, and breathing tests. It is important to clearly confirm or rule out the diagnosis of latex sensitivity.

If the allergy is confirmed, tell your employer and your other health care providers you have latex allergy so that appropriate product substitutions can be made. Also, wear a medical alert bracelet and carefully follow your physician’s instructions for dealing with allergic reactions.

Getting Assistance

If you have any questions about latex allergies or substituting non-latex containing products in your work environment, contact EH&S.

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Latex in the Workplace

Because of its high strength, elasticity and low cost, natural latex rubber is used in many medical devices and household goods. However, in recent years, a number of people, often those with frequent exposure to latex in the workplace, have begun to develop sensitivity to latex.

Natural latex rubber is manufactured from the milky white sap of the Brazilian rubber plant and is a major ingredient in most rubber products. It may be found in such diverse items as medical gloves, dental dams, first aid tape, bandages, pacifiers, baby bottle nipples, cleaning gloves, balloons, balls, racquet handles, erasers, masks, elastic fabric (waistbands), underwear, carpet backing, rubber mats, automobile tires, bicycle hand grips, swimming goggles, shoe soles, rubber aprons, surgical masks, and respirators.

Latex allergy is a serious medical problem for a growing number of workers, particularly in individuals with other allergies and who are exposed to latex usually at work or by virtue of a medical condition which exposes them to latex products.

Irritant Contact Dermatitis

The most common reaction to latex products is irritant contact dermatitis—dry, itchy, irritated areas on the skin, usually the hands. This reaction is caused by using gloves and possibly by exposure to other workplace products and chemicals. The reaction can also result from repeated hand washing and drying, incomplete hand drying, use of cleaners and sanitizers, and exposure to powders added to gloves. Irritant contact dermatitis is not a true allergy.

Chemical Sensitivity Dermatitis

Allergic contact dermatitis (delayed hypersensitivity) results from chemicals added to latex during harvesting, processing, or manufacturing causing skin reactions similar to those caused by poison ivy. As with poison ivy, the rash usually begins 24 to 48 hours after contact and may progress to oozing skin blisters or spread away from the area of skin touched by the latex. With each exposure, the person becomes more allergic and reactions increase in severity.

Latex Allergy

A true latex allergy (immediate hypersensitivity) can be a more serious reaction to latex than irritant or allergic contact dermatitis. Certain proteins in latex may cause sensitization. Although the amount of exposure needed to cause sensitization or symptoms is not known, exposures at even very low levels can trigger allergic reactions in sensitized individuals.

Reactions usually begin within minutes of exposure to latex, but they can occur hours later and can produce various symptoms. Mild reactions to latex involve skin redness, hives, or itching. More severe reactions may involve respiratory symptoms such as sneezing, itchy eyes, scratchy throat, and asthma. Rarely, shock, and even death, may occur. The severity of reaction depends on the level of sensitivity, the amount of allergen, and the site of exposure.

Risk Factors

Persons who frequently use latex gloves and other latex-containing materials are at risk for developing latex allergy. Also, atopic individuals (those with multiple allergic conditions) are at increased risk for developing latex allergy. Latex allergy is also associated with allergies to certain foods, especially avocado, potato, banana, tomato, chestnuts, kiwi fruit, and papaya.

The diagnosis of latex allergy is best made by a positive latex prick skin test, which is a relatively safe procedure, and other tests may be employed to rule out sensitivity to other allergenic materials.