



Dear Senators,

As a pediatric allergist and Director of the Center of Allergy and Immunology at Akron Children's Hospital, I am writing to provide enthusiastic support for the Senate to pass House Bill 231, also known as "The Allison Rose Act". This legislation will positively support prior legislation in Ohio surrounding food allergies in schools, including House Bill 296, which was passed in 2013. House Bill 296 allowed schools to voluntarily procure and stock epinephrine autoinjectors to use for any student or staff member experiencing anaphylaxis.

Food allergies affect up to 1 in 13 children, which averages 1 or 2 children in every classroom, in every school, throughout our state. Food allergy reactions range in severity, often causing itching and skin rash, but can also progress very rapidly to cause vomiting, difficulty breathing, or life-threatening anaphylaxis. Unfortunately, the prevalence of childhood food allergies has increased dramatically over the past two decades, which makes this even more pressing. In addition, research studies within schools have identified anaphylaxis occurring from accidental ingestion while on school grounds, increased anxiety among children with food allergies, unnecessary exclusion from certain activities, and also bullying from peers and even adults. In addition, many kids who have not been diagnosed with food allergies may have their first reactions at school. These children necessarily will not have their own epinephrine available to treat them. Having a stock epinephrine available to school officials will allow timely and effective management of these reactions. Similar to an automated external defibrillator- you never know when you will need it. And you would rather have it and not need it then need it and not have it.

The Allison Rose Act will encourage each school to include annual food allergy training for staff and students. By increasing the understanding of food allergy management and reactions, this will foster a more inclusive and safer environment for students with food allergies and those with severe allergies that are not yet diagnosed. In addition, this bill will also create a much-needed resource to help schools identify organizations and companies that can assist with their procurement of epinephrine autoinjectors, which can cost hundreds of dollars and require annual renewal due to expiration dates. As someone who has been writing prescriptions to help schools across Ohio obtain free epinephrine autoinjectors, I can attest that additional resources are absolutely needed. Despite passage of the stock epinephrine legislation in 2013, we still lack a centralized resource across Ohio to help schools obtain autoinjectors or track their distribution. This bill will help change that problem.

In summary, House Bill 231 will improve the safety of children with diagnosed and undiagnosed food or other severe allergies who attend school in Ohio. You know as well as anyone that it is important to making schools a safe place to learn and work. Please pass this important legislation to improve the management of severe allergic reactions for all school children.

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A handwritten signature in blue ink that reads "Brian Schroer".

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