Dear Administrator Dickson:

I am writing to you today on behalf of the Asthma and Allergy Foundation of America (AAFA) to urge you to issue regulations requiring airplanes to include epinephrine auto-injectors in adult and pediatric dosages in all onboard emergency medical kits. AAFA is the leading patient organization advocating for people with asthma and allergies, and the oldest asthma and allergy patient group in the world. The millions of Americans with life-threatening food allergies need regulations to protect their health and lives while traveling on airplanes.

Severe food allergies are common. According to the most recent data, at least one in ten adults has a food allergy.\(^1\) Prevalence is nearly as high among children, at 9.3 percent and rising.\(^2\) From 2005 to 2014, the rate of emergency room visits for food-related anaphylaxis rose by 124%.\(^3\) Food-related anaphylaxis has led to the deaths of adults and children, particularly when prompt treatment with epinephrine is not available.\(^4\)

Airplanes are a fraught environment for people with allergies, particularly food allergies. Food residue can be present on all surfaces, and people are seated in close quarters with others who are eating. Common allergens such as nuts are frequently served and sold. As in all settings, the food that people with allergies eat may contain unlabeled or accidental allergens.

Exposure to an allergen can lead to anaphylaxis, a severe reaction that may be fatal without treatment. Prompt administration of epinephrine is the only available treatment for anaphylaxis. Both children and adults can have new or undiagnosed allergies, and therefore may experience their first reaction without an epinephrine autoinjector on hand. Even a traveler carrying epinephrine autoinjectors may be unable to direct others to them if experiencing a medical emergency.

\(^1\) Gupta et al., Prevalence and Severity of Food Allergies Among US Adults. *JAMA Netw Open.* 2019 Jan 4;2(1)
Onboard medical kits currently contain epinephrine, but it is typically present in a vial and must be withdrawn and administered by syringe. This approach is extremely difficult for most laypeople, and can even be challenging for medical professionals if turbulence is present. An epinephrine autoinjector, in contrast, is designed for lay use and can be easily and quickly administered by a flight attendant or another passenger as appropriate. The Aerospace Medical Association recently noted in its revised recommendations for medical kits for passenger aircraft that while a vial of epinephrine is typically available onboard, auto-injectors are preferable:

When available and cost effective, auto-injectors are easier to use and can be used by cabin crew under order from ground medical advisor if there are no health professionals on board. The AAP endorsed this suggestion as well as suggested its availability in pediatric dosage.5

In addition, it is important that epinephrine autoinjectors be available in the cabin and readily accessible. AAFA’s understanding is that current medical kits are locked in the cockpit. In anaphylaxis, time is of the essence: delayed treatment can increase the severity of the reaction and increase the risk of death. Epinephrine autoinjectors should be available in the first aid kit within the plane’s cabin so that they can be quickly accessed and used.

AAFA therefore urges the FAA to require passenger airplanes to carry epinephrine autoinjectors in cabin first aid kits on all flights, in both pediatric and adult dosages. We would be happy to work with the agency to help flesh out the parameters and implementation of this requirement.

Thank you for your time and your attention to this important opportunity to protect passenger health and safety.

Sincerely,

Kenneth Mendez
President and Chief Executive Officer
Asthma and Allergy Foundation of America

https://www.asma.org/news-events/asma-news/asma-makes-recommendations-for-emks-to-faa