Food allergy is common chronic disease affecting up to 5-8% of the population. The only option after diagnosis is eviction of the food. No definite treatment is currently available. The pathogenesis of IgE mediated food allergy is well understood. After initial sensitisation through the skin or the gut, specific IgE is produced and reexposure to the food will elicit classic symptoms of immediate type food allergy.

Most strategies of immunomodulation of food allergy address the regulation of T-cell activation and production of IgE. A first set of studies address prevention of sensitisation and development of food allergy. The environment of the young child is essential for modulation and protection of food allergy. It has been well defined by epidemiological studies that an environment rich in high bacterial loads will prevent from allergies. Also, early exposure to the food may prevent from allergies.

In patients who have developed food allergies, current strategies are exploring therapeutic options such as with Chinese herbs. Most commonly, current strategies are exploring oral desensitisation protocols which are at least, partially effective. Interestingly, modifications of the immune system are similar to those induced by subcutaneous desensitisation. In addition to the strategies exposing the immune system through the gut, current studies are also addressing tolerance induction through the skin. Although the cure of food allergy has not been found yet, current studies are promising and patients with food allergy might be provided with solutions at least diminishing the burden of their allergies in the next few years.