



Candida Allergen Fact Sheet

About candida

Capable of causing fungal infections in humans, Candida is often referred to as a yeast, but it's actually a special kind of fungus (aka mold) and is sometimes called a pseudo yeast. Candida albicans is the most common species, and it typically affects the skin, mouth, intestinal tract, vagina, and other moist, warm, and dark areas of the body.¹ Candida can also be found in soil and organic debris but is rarely recorded in surveys of airborne spores.²

There's some disagreement about whether Candida causes allergy, but many studies indicate that it plays a role in the development of allergic diseases, and some practitioners believe repeated Candida albicans imbalances can lead to chronic sensitivity to this pseudo yeast.^{3,4} While Candida albicans is a normal part of the human body, it can sometimes overgrow due to several considerations including hormones, stress, and various immunity factors.⁵ And while another mold, Aspergillus fumigatus, is the most frequent cause of a severe lung condition called allergic bronchopulmonary mycoses (ABPM), Candida is also a known cause of this disease.⁶

Where is candida found?

Candida can live in soil and organic debris, but Candida albicans commonly lives on the skin and in the mouth, intestinal tract, vagina, and other moist, warm, and dark areas of the body. Plus, yeast is found in many foods.^{1,2} As such, management of a yeast allergy may require elimination of foods that contain yeast, such as baked goods, some alcohol, savory spreads such as Marmite and Vegemite, sourdough breads, and certain multivitamins.¹

Are there other allergens I could be sensitized to?*

Some people with Candida albicans allergy may also experience symptoms when exposed to other types of yeast and mold. This is called cross reactivity and occurs when your body's immune system identifies the proteins, or components, in different substances as being structurally similar or biologically related, thus triggering a response.³



HOW DO I KNOW IF I'M ALLERGIC?*

Together with your symptom history, skin-prick testing or specific IgE blood testing can help determine if you are allergic to a particular allergen. If you are diagnosed with an allergy, your healthcare provider will work with you to create a management plan.

COMMON SYMPTOMS

Mold allergy symptoms can range from mild to severe and vary person to person.⁷ Reactions can happen almost immediately after exposure, or they can be delayed. Symptoms are most common in mid-summer to early fall, but since molds grow both indoors and out, allergic reactions can occur all year.⁸

Symptoms typically include one or more of the following:^{7,9}

- Nasal congestion
- Runny nose
- Sneezing
- Irritated, watery eyes
- Coughing
- Wheezing
- Itchy eyes, nose, and throat
- Dry, scaly skin

Most mold allergy reactions involve the preceding symptoms.⁷ However, mold sensitization is also a major risk factor for developing upper and lower respiratory diseases such as asthma.¹⁰

In addition, other reactions to Candida can include Allergic bronchopulmonary mycoses (ABPM). Candida albicans can colonize in the bronchial tracts of asthmatics, causing severe asthma and low lung functions, sometimes leading to a severe condition called allergic bronchopulmonary aspergillosis (ABPA) or allergic bronchopulmonary mycoses (ABPM).⁶ The condition involves both an allergic and inflammatory response to mold, and symptoms may include severe wheezing, coughing, shortness of breath, fever, weakness/malaise, and cough producing brown flecks or bloody mucus.¹¹ In terms of prevalence, ABPA has been reported to occur in 1 to 40 percent of chronic asthmatics and 2 to 10 percent of those with cystic fibrosis.⁵

A small percentage of asthmatics with inhaled mold allergy can also develop allergic urticaria (aka hives) when they eat or drink anything containing yeast or mold.⁴ In addition to causing allergic reactions, molds can also lead to infections along with toxic reactions.¹²

In addition to worsening atopic dermatitis, Candida can lead to conditions such as vulvovaginitis, oral thrush, and skin and diaper rashes.¹³



IS THERE A RISK FOR A SEVERE EVENT?

There are no credible reports in medical literature documenting indoor exposure to molds as a cause of anaphylaxis.¹⁴ However, exposure and sensitization to fungal allergens can promote the development and worsening of allergic diseases such as allergic rhinitis and asthma.³

How do I manage my allergy?

If you are allergic to mold, your healthcare provider may recommend a plan that includes the following.^{7,8,15,16}

Exposure reduction

- Limit your outdoor time during seasons when mold is most active.
- Wear a mask when disturbing or moving plant materials, and avoid raking and burning dry leaves.
- Avoid barns, silos, hay, straw, and peat moss.
- Use a certified asthma and allergy friendly filter attachment on your heating and air conditioning unit, and change filters regularly.
- Employ dehumidifiers to lower indoor humidity levels to less than 45 percent to create an environment where mold is less likely to thrive.
- Improve air flow through rooms by opening doors between spaces, moving furniture away from the walls, and operating fans.
- Use exhaust fans in bathrooms and kitchens to pull moisture out of the rooms.
- Fix any plumbing leaks, check windows for condensation, and remove sources of dampness.
- Repair roof leaks, clean gutters, and ensure rainwater drains away from your dwelling.
- Clean thoroughly and regularly, including sinks and tubs, refrigerator door gaskets, and garbage cans.
- Remove clothes from washing machines promptly and clean rubber seals regularly.

- Eliminate sources of dampness in basements, such as pipe leaks and groundwater seepage.
- Run ventilation fans during and after showers and baths.
- Remove any carpet from bathrooms and basements.

Symptom relief

Your healthcare provider may direct you to take one of the following medications to improve your allergy symptoms:

- Antihistamines are commonly used to reduce symptoms such as sneezing, itching, and runny nose.
- Nasal corticosteroids are used to reduce swelling in the nose and block allergic reactions.
- Oral and nasal spray decongestants can be employed to relieve stuffiness.
- Anti-inflammatory such as montelukast, which can be effective in treating mold allergy.
- Daily nasal lavage using a squeeze bottle filled with salt water can help clean out irritants and alleviate nasal symptoms.

View all references at the bottom of the online allergen fact sheets at [AllergyInsider.com](https://www.allergyinsider.com) >

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