A food trial (elimination trial) is the gold standard for detection of “food allergies”.

**Technique**

1. Compile a complete history of foods, flavoured medications, scraps and treats fed to the dog.
2. Select a commercial or homemade diet containing a single novel protein and a single novel carbohydrate (i.e. to which the dog has seldom or never been previously exposed), or a commercial hydrolysed diet.
3. Transition the dog to the elimination diet over 1-2 weeks (this can be done while treating parasites & infections if necessary).
4. Feed the elimination diet only for a minimum of 6 weeks (preferably 8 - 10 weeks). Any palatable treat, medication, supplement, toothpaste or vitamin should be discontinued throughout this time. A family log can be kept to record any flare-ups or accidental food challenges (e.g. stealing cat food or table scraps).
5. If the dog improves during the food trial, it is essential that it is rechallenged with its previous diet. If food allergy is present, relapse usually occurs within 1-14 days.
6. If the dog relapses during rechallenge, return to the elimination diet. If food allergy is present, the dog should rapidly improve again.
7. If food allergy is confirmed, identify a suitable maintenance diet. This may require challenge with individual foods to identify which are tolerated.

**Interpretation**

Food allergy is confirmed if:
- the dog improves on the elimination diet
- relapse is observed within 1 - 14 days of rechallenge with the original diet, and
- the dog improves again when switched back to the elimination diet

Partial resolution during diet trial
- Ensure any parasitic or secondary infections are resolved
- May indicate concurrent hypersensitivities such as atopic dermatitis

Note that partial resolution may be seen as a change in lesions or pattern of pruritus and not be noticed by the client as an obvious decrease in pruritus.

If the dog does not relapse when rechallenged, then it is likely any improvements seen during the food trial are the result of other factors such as seasonal changes in allergen exposure or improvement in other factors such as infections.