

Allergy. You Asked, We Answered

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Thanks for reading!

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Allergy Facts:

(Source: CDC, AAFA)

50-60 million Americans suffer from all types of allergies (1 in 5 Americans)

Allergy prevalence has been increasing across all age, sex and racial groups.

Allergy is the 5th leading chronic disease among all ages.

3rdmost common chronic disease among children under 18 years.

40 million Americans have indoor/outdoor allergies as their primary allergy.

10 million people are allergic to cat dander

7% of allergy sufferers have skin allergies

6% of allergy sufferers have food/drug allergies

4% of allergy sufferers have latex allergy

4% of allergy sufferers have insect allergies

Allergies account for more than 17 million outpatient office visits

Food allergies account for 30,000 visits to the emergency room each year

The annual cost of allergies is estimated to be nearly \$7 billion.

4 million missed or lost workdays per year

Total cost of more than \$700 million in lost productivity.

Percentage of the people in the U.S. who *believe* they have a food allergy: up to 15%.

Percentage of the people in the U.S. who *actually* have a food allergy: 3% to 4%.

Indoor pollution in U.S. homes exceed levels of outdoor pollution: two to 100 times

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If you or your loved ones have allergies, it affects you 100%. Are you ready to do something about it? If so, let's begin.

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1, Introduction.

I want to begin by saying thank you for opening this book to read today. I want to provide you with insights in early recognition of allergy symptoms, identify allergy triggers, guide to the right professionals and foster a belief that you can get better and live a great life despite allergies. You are allowing my desire to help you unfold as you read these words. Thank You.

I have treated more than 20,000 patients and influenced 100,000+ lives as an allergist so far and have earned the nickname the "AmazingAllergist" from patients and peers. I find the most rewarding part of my work is numerous complements of smiling patients and their families. This book was written to help you, parents and children, understand more about allergies, believe that you can get better, and take the next steps in learning to treat them.

The questions of my patients I have answered over the years, led to a weekly column called "Ask Your Allergist" in a local publication. We have made an effort to compile these questions and answers here to serve your needs.

I believe that this will be a starting point as you embark on an "Allergy Free" life. If you find this book useful, please spread the word and forward the link. You will improve the life of someone you love, as well as of those who you even do not know.

Written with special love for all the allergic kids around the world (and parents too!)

Dr. Atul N. Shah



2, Author's Background.

Atul N. Shah, MD, FACAAI, FAAAAI, is an author of the upcoming AmazingAllergist book series, founder of the AmazingAllergist Group and the Medical Director of the Center4AsthmaAllergy.com. He is a Board Certified Allergist who has earned an honor of fellowships in both, the American College of Allergy, Asthma & Immunology and the American Academy of Allergy, Asthma & Immunology.

He has personally treated more than 20,000 patients and made significant impact in more than 100,000 lives as an allergist so far and has earned the nick name the "AmazingAllergist" from his patients and peers. His work is rewarded daily with numerous complements of smiling patients and their families.

He has been recognized with the various awards, including the America's Top Physicians' Award, the Patients' Choice Award and the Most Compassionate Physicians' Award. He believes that every allergic child and individual has a potential to live a great life, allergy free. His desire to empower allergic individuals translated into the series of books.

Dr. Atul Shah enjoys reading, travelling and spending time with his family. He calls Long Island, NY his home, supports various charities and loves making a difference.

More about Dr. Shah at Dr. Shah, the AmazingAllergist

3, What not to expect.

This book is a collection of various questions and answers published in various patient education articles and weekly columns written by Dr. Shah. The contents have been organized to provide better understanding on allergy subject. It is not in any way a complete guide to diagnosis and treatment of allergic conditions.

As a reader you agree that the information in this book is intended for guidance and is not a substitute for your physician's advice. You agree to consult healthcare professionals before implementing any ideas or you will implement at your own risk. Publisher's Disclaimer: The material in this book is for information and education purpose only. As each individual is unique and their situations are different, you should use proper discretion, in consultation with your healthcare providers, before implementing any idea discussed in this book. The author and publisher expressly disclaim responsibility for any adverse outcome that may result from the use or application of information contained in this book. As a reader, you agree with these statements. Disclaimer: Our Disclaimer

4, How this book can help you.

Please browse through the book to pick the area that interests you. You can read it from start to finish or you may choose to read the questions and answers that are relevant to you.

You can learn a lot more by clicking the links and visiting the resources. Our team continues to add and update resources on the website links. Resources: <u>Patient Resources</u>

Feel free to spread the word about this book and resources to help other allergy sufferers.

5, Adopt a mindset to get better.

First step is to recognize that you have allergies. Allergy-symptoms

Second and very important step is to believe that YOU CAN live a great life despite the allergies. It has been a reality for many who have believed this and taken actions to get there. If you agree that you will get better, you will be open to learning and finding and using resources that can help you get there. The professionals can guide you, but you will need to take control for making these choices. Various allergic conditions: <u>Allergy-conditions</u>

6, Take the next step.

Please read the following pages with questions and answers on various allergy topics. If you learn the information relevant to your condition, click the link to learn more on that topic. Explore other websites to get better understanding.

Next, most important step is to take actions to help yourself. Do something with what you learn. Change your environment. Share your knowledge to help someone. Locate a professional for help. Make a list of things you can do to get better. Every step you take will bring you closer to your "Allergy Free" lifestyle. It is possible. Many allergy sufferers chose to do that and are now living great lives. You too can be allergy free.



ALLERGY. You Asked, We Answered.

Q1: What is an allergy?

A: When our body's immune mechanisms over react to exposure, it is called an allergy. For example, when a person without allergies to tree pollen inhales the pollen, there is no response. If the allergic person inhales tree pollen, his or her body will over react to the pollen and will cause allergic response, making him sneeze, having watery eyes, runny nose etc. Allergy

Q2: When I have runny nose, how do I know whether it is from a cold or from my allergies?

It can be difficult in the first few days of the runny nose to know whether it is from a cold or from allergies. There are some tips to help you differentiate them and to take appropriate steps for their treatment.

Look for the associated symptoms in either condition. The symptoms of a "common cold" include runny nose, mild or low grade fever, body ache or feeling tired, occasional sneezing, sore throat, mild cough, headache and sometimes stomach upset or diarrhea. These symptoms are

caused by a variety of viruses. The condition is usually self- limiting and gets better within 7-10 days. The treatment is supportive to control symptoms.

The symptoms associated with allergies include runny nose, violent and prolonged spells of sneezing, stuffy nose, itchy nose, itchy eyes, itchy ears, itchy throat and symptoms of other allergic conditions like asthma, eczema or sinusitis. Sometimes, may be associated with scratchy throat, feeling tired or headache. The main differentiating feature is the presence of mild fever in common cold and absence in allergy related conditions.

The duration of these symptoms can be helpful. The cold symptoms usually subside in 7-10 days while the allergy symptoms can last for weeks or months. The allergy symptoms can be seasonal or all year around. Seasonal allergy from grass or tree pollen, ragweed or other weeds can trigger symptoms in specific seasons (spring, summer or fall). If it is all year around, it can be related to indoor allergens like dust, dust-mites, feathers, molds, cockroaches, dog, cat etc.

A survey released by the American Lung Association reveals that 83 % of parents and patients in households with allergy sufferers claim to know the difference between symptoms of allergies and the cold. If you have ongoing allergies, your experience with previous and similar symptoms may also help in differentiating. Frequent-infections

The management of runny nose from allergies includes many other things besides allergy pills and a prescription nose spray. Allergy skin tests or blood tests help determine the cause of your problem and avoiding the cause can help significantly. In severe conditions, allergy vaccination with shots or drops can be very useful and help prevent the recurrence of allergy related symptoms. It improves asthma, nasal, eye or sinus conditions and helps reduce the amount of medications needed to control allergy symptoms.

Q3: What is Hay Fever?

The word "hay fever" was initially used for severe Flu like symptoms after exposure to hay during the summer pollen season. Now, it is being used in general for allergy symptoms arising after pollen exposure in the spring, summer and fall. Hay fever is related to hay but usually there is no fever in hay fever! The other names include Seasonal allergic rhinitis and pollen allergy. The word hay relates to Timothy grass but now is used in general for all the pollen producing plants. In simple words, it refers to allergy symptoms due to pollen exposure.

If you have hay fever, you are not alone. An estimated 26-30 million Americans have hay fever symptoms each year. The usual symptoms involve one or all of these- runny nose, violent and prolonged spells of sneezing, stuffy nose, itchy nose, itchy eyes, red-swollen eyes, watery eyes, mucus in the eyes, itchy ears, itchy-scratchy throat, sore throat, itchy palate etc. It may affect sinuses and lungs causing headaches, bronchitis or seasonal asthma.

These symptoms are caused by pollen exposure during the season, depending on the person's sensitivity to pollen and the amount of the pollen in the air. In our area, the season usually starts in March and continues through the summer and fall, up to the frost. The types and the amount of the pollen in the air depend on the season and the weather conditions. In general, the tree pollen is high in the spring, the grass pollen in the early summer, weeds in summer & early fall and ragweed in the fall. For an allergic person, the severity of symptoms is directly related to the amount of pollen exposure. The warm & sunny days allow the plants to grow and produce the

pollen and mild breeze causes them to travel longer distance while in the air. Heavy rain and frost help settle the pollen and lower the amount of pollen in the air. If the amount of pollen is very high, it can come indoors during air exchange through doors and open windows.

Allergy skin tests or blood tests help determine the type of pollen allergy and the cause of your symptoms and avoiding them can help to some extent. Based on that information, the doctors can determine the best management plan for you. In many patients, allergy vaccination with shots or drops can be very useful and help prevent the recurrence of hay fever symptoms the next season. It improves asthma, nasal, eye or sinus conditions and helps reduce the amount of medications needed to control allergy symptoms. The hay fever, if managed properly, should not hold you back from enjoying your outdoor activities. Hay Fever

Q4: Is allergy suggestive of a weak immune system?

A: No. The immune system protects us from getting infections and helps clear them once we are exposed to germs. When this immune system gets over activated in response to other exposures like pollen, it is considered an allergy. So, in simple terms, allergy is an over active immune system and not a weak immune system.

Q5: What are Allergic Rhinitis and Allergic Conjunctivitis?

A: It simply means the inflammation of the nose and eyes from the allergic response. When the nose and the eyes are exposed to the allergy triggers, they produce some chemicals under their lining. This makes it red and swollen, called, inflamed. This inflammation is the reason for all the symptoms.

Q6: What are the signs and symptoms of Allergic Rhinitis and Allergic Conjunctivitis?

A: The common ones are one or all of these. Runny nose, sneezing, itchy nose, red nose, swelling inside the nose, congestion, stuffy nose, mouth breathing, snoring, sinus pressure, headaches, nasal tone, horizontal line on the outside of the nose, nose bleeds, throat clearing, itchy throat, post nasal drip, itchy ears, fatigue, not feeling well, itchy eyes, tearing, red eyes, swollen eyes, feeling of sand in the eyes, light sensitivity, cough. Allergic Eyes

Q7: What allergic conditions do allergy specialists treat?

A: Besides the seasonal Allergic Rhinitis and Allergic Conjunctivitis, the allergy specialist can help with the similar conditions from indoor allergies, like dust mites, dog, cat, mold, cockroach etc. The other conditions associated with allergies are listed here. Asthma, eczema, food allergy, hives, sinus conditions, insect venom allergy, drug allergy, latex allergy, chemical and cosmetics contact allergy, poison ivy, plant dermatitis, frequent infections, ear infections, chronic cough etc Allergy-conditions

Q8: How do you find pet allergies and what can we do if I have pets?

Let me give some information about pets and associated allergy before answering your question.

More than 70 percent of U.S. households have a dog or cat and you are one of them! An estimated 10 percent of the population may be allergic to animals. Approximately 20 to 30 percent of individuals with asthma have pet allergies. The common household pets are dogs, cats, birds, hamsters, rabbits, mice, gerbils, rats and guinea pigs. Larger animals such as horses, goats, cows, chickens, ducks and geese, even though kept outdoors, can also cause symptoms in allergic individuals. The number of pets in the U.S. is estimated at more than 100,000,000. This large number increases the likely hood of exposure to animals and so, the development of allergies. Pet-allergy

If you have symptoms related to allergy, it is prudent to find out what causes you to have these symptoms. Commonly, they involve nose, eyes, ears, throat, upper airway, lungs and skin. These symptoms usually occur after direct or indirect exposure to pets. The symptoms may include one or all of these - runny nose, sneezing, stuffy nose, itchy nose, itchy eyes, red eyes, itchy ears, fluid in the ears, itchy throat, headache, sinus pressure, throat clearing, cough, wheezing, asthma, eczema, rash, hives etc.

In general discussion about dogs and cats, there is a frequent misconception that shorthaired animals cause fewer problems. It is the dander (skin scales) that causes the most significant allergic reactions - not the length or amount of hair on the pet. Allergens are also found in pet's saliva and urine. If the person exposed to the pet has pollen allergy, bringing the pet in from outside after a walk during pollen season can bring pollen allergens inside to trigger allergies.

There are two common ways to find out about what causes you to have allergy symptoms. It can be by Blood tests or Skin tests. Your physician can order specific blood tests (IgE) for different allergens including dog and cat. It measures an antibody (protein) against the allergen (trigger) in question. You may consider seeing an allergist, who can do skin tests in the office. Allergy skin test can give you the answer within 30 minutes after the tests are done.

Once you have learned about what allergies you have, you can take proper steps to prevent or minimize your exposure to pet allergens. This can help to decrease pet related allergy symptoms and improve your quality of life.

Q9: Who can help me with my allergies?

A: You and your family can help you more than anyone else can. The allergy specialists as well as other healthcare professionals can give you guidance, but you are the one who can help you the most. The long term relief from allergies involves your active participation in decisions and treatments.

The main stream professionals who can help include the allergist, pediatricians, family physicians, internists, and otolaryngologists. Other complementary professionals, if trained to treat allergic conditions, may also contribute to your wellness and include naturopaths, herbalists, chiropractors, massage therapists and acupuncturist.

Q10: How do you diagnose allergy?

A: First of all, we ask a lot of questions about your symptoms, environment, family, what is working, what is not working, etc. We examine your body for clues that might suggest the presence or absence of allergies. Next step is to do some tests to confirm or eliminate allergy as the cause of your symptoms. The allergy tests include prick skin tests, scratch skin tests or blood tests. The allergists prefer skin tests that can be done while you are in the office. Allergy Tests

Q11: How do I learn about what allergies I have?

If you have symptoms related to allergy, it is prudent to find out what causes you to have these symptoms. Your symptoms and their triggers may give clues to the possible causes.

The allergic disorders can manifest by involving different parts and systems of the body. Commonly, they involve nose, eyes, ears, throat, upper airway, lungs and skin. The stomach, intestines and other systems may get involved with food allergy or allergic reactions. The symptoms may include one or all of these - runny nose, sneezing, stuffy nose, itchy nose, itchy eyes, red eyes, itchy ears, fluid in the ears, itchy throat, headache, sinus pressure, throat clearing, cough, wheezing, asthma, eczema, rash, hives etc.

For simplification, the allergy triggers (allergens) can be classified into three groups - airborne (environmental), food or contact allergen. The airborne allergens are usually responsible for causing the symptoms related to nose, eyes, ears, throat, lungs and skin. Food allergy commonly affects stomach, intestines and skin.

The airborne triggers include indoor and outdoor allergens. The indoor allergens (dog, cat, dust, dust-mites, molds, cockroach, feathers etc) are present all the time and can cause symptoms all year around. Seasonal allergy symptoms from grass, tree, ragweed, mold spores or other weed pollen allergy are linked to the amount of the outdoor pollen and spores in that specific season.

There are two common ways to find out about what causes you to have allergy symptoms. It can be by Blood tests or Skin tests. Your primary care physician can order specific blood tests (IgE) for different allergens based on your symptoms and possible triggers. It measures an antibody (protein) against the allergen (trigger) in question. You may consider seeing an allergist, who can do skin tests in the office.

Allergy skin test can give you the answer within 30 minutes after the tests are done. It involves placing a very small amount of fluid on the skin and using a needle free device to pass it under the first layer. The fluid contains an allergen (trigger in question). The response of your skin to these allergens gives the answer. Which tests are necessary (indoor, outdoor or food) is decided based on your symptoms. Multiple tests can be done at the same time. Once you learn about your allergens, either by skin tests or blood tests, you should avoid the triggers to the extent possible to minimize your allergy symptoms.

Q12: What are the Needle Free allergy skin tests?

A: The latest methods of allergy skin tests involves using disposable plastic devices that feel like brush and is applied on the upper back or on the forearms. We use various testing liquids (allergens) on its tips to check for individual allergies to indoor, outdoor or food allergens. The list can include grass pollen, tree pollen, ragweed, weeds, dust mites, dog, cat, molds, milk, eggs,

wheat, soy, peanuts, tree nuts, shellfish, fish and many more. Once the test is applied, you wait for 20 minutes without touching or scratching and the test results are interpreted based on the size, swelling and the redness around each dot. In the presence of the true allergies, these dots get red and look like mosquito bites. Skin tests

Q13: What do the positive allergy skin tests mean?

A: The positive skin tests to different allergens reflect the presence of Immunoglobulin E (IgE) against these allergens in the allergic individual. The exposure to these allergens has a potential to trigger over active immune response that can cause allergy symptoms. The severity of allergy symptoms depends on many factors.

Q14: Who needs allergy blood tests?

A: The patients who cannot be tested on the skin as well as some of the skin tested patients may need blood tests. <u>Allergy-blood-tests</u>

Q15: My teenage son has red, swollen & very itchy eyes for last few weeks. What can be done to help him?

It seems that he may have allergy related eye symptoms. The red, puffy, swollen, itchy, and watery eyes, every year around specific time in the season is likely related to pollen allergy. The "pink eye" is from virus or bacterial infection and is usually associated with other constitutional symptoms like mild fever, sore throat, runny nose etc. The virus infection related eye symptoms are self-limited and disappear within a week or so. The eye allergy can also be associated with runny nose, sneezing, congestion, sore throat etc, but fever is usually absent.

Around the time of the year with high pollen in the air, when children are enjoying soccer, baseball and other outdoor activities, the natural exposure to pollen is unavoidable. If you do not have allergies, this exposure does not cause any problem. Once someone has developed allergies, the pollen exposure can be troublesome and can produce a wide range of symptoms.

The allergy related symptoms of the eyes are labeled as allergic conjunctivitis in medical terms. It is one of the components of a major allergy symptom complex called "hayfever". An estimated 26-30 million Americans have hay fever symptoms each year. The usual symptoms involve one or all of these- runny nose, violent and prolonged spells of sneezing, stuffy nose, itchy nose, itchy eyes, red-swollen eyes, watery eyes, mucus in the eyes, itchy ears, itchy-scratchy throat, sore throat, itchy palate etc. It may affect sinuses and lungs causing headaches, bronchitis or seasonal asthma. The warm & sunny days allow the plants to grow and produce the pollen and mild breeze causes them to travel longer distance while in the air. When the pollen is high, it comes indoors during air exchange through doors and open windows.

If you keep the bedroom windows closed and car windows closed while driving, it may help reduce his pollen exposure. Also, encourage him to wash his eyes, especially after outdoor activities. This is a simple procedure that helps significantly to lower the amount of pollen lodged in the eyes. You may consult a physician or a specialist who will recommend eye drops, nose sprays and pills, based on the severity to manage his current problem. You may ask about

eye drops and other treatment options to be started before the season starts so that you can prevent this problem next year. If managed properly, his allergies should not hold him back from enjoying the outdoor activities.

Q16: How do you fix allergies, once diagnosed?

A: The first step is to avoid or reduce the exposure to these allergens. The second step is to use non drug supportive measures to reduce the need for medications. The third step is to find a combination of medicines to bring the life back to normal. The goal is to use the minimum number of medicines for the shortest duration possible. The most important and the last step, is to consider allergy vaccines, to modify over active immune responses. <u>Allergy Care Options</u>

Q17: How do we avoid dust mites?

A: The dust mites are microscopic creatures found mainly in the mattress, pillows and in the spaces that collect dust. The exposure can be reduced significantly by encasing the pillows, mattress and the box spring with dust mite barrier covers with zippers. Reducing the clutter, especially in the bedroom and removing the stuffed toys can be very helpful.

Q18: What can we do for pets?

A: The best solution is to find another home for your pet. If this is not possible, at least, do not allow pets in the bedroom, have someone wash the pets frequently and consider air purifiers. Also, washing hands and changing clothes after direct pet exposure can be helpful.

Q19: Is there any way to reduce pollen exposure?

A: Keeping the bed room windows closed and car windows rolled up during the high pollen season can reduce exposure. Planning outdoor activities around the low pollen count and taking a shower, washing hair and changing clothes after outdoor exposure can help. Knowing the pollen count can help. Check Pollen Count in your area.

Q20: What are the non drug supportive methods?

A: Avoidance of allergen exposure is the beginning. Washing nose, sinuses and eyes with saline can remove allergens and restore normal functions. Some of the nutritional supplements and herbs used under professional guidance can reduce the need for medications. Some nasal and breathing exercises and facial massage and posturing are showing promising results in reducing symptoms and draining secretions.

Q21: What medications do I use for nasal and eye allergies?

A: Please allow an allergy professional to make this decision. The commonly used medications can be with or without prescription. They are in the form of nose sprays, eye drops, pills,

chewable tablets, liquids or capsules. The common oral medications are antihistamines, decongestants, anti leukotrienes and steroids. The nose sprays contain corticosteroids, cell stabilizers or antihistamines.

Various eye drops work through many mechanisms. Based on the assessment, the allergy professional will decide one or all the groups of different medications to maximize the relief with minimum side effects. Some of the medications are to be used daily and some only while having allergy symptoms.

Q22: What are allergy vaccines and how do they work?

A: The allergy medications are very helpful in controlling symptoms but do not cure allergies. As you know, the allergic individual has high IgE for the allergens they are allergic to. When the allergic individual is exposed to these allergens, their body triggers an over active immune response to these allergens. In the process of allergy vaccination, also known as immunotherapy, the allergens are given to the patient, starting at a dose they can tolerate and gradually given more and more of these allergens over a period of time. In doing so, the allergic individual's body starts developing tolerance to these allergens and stops over reacting. It reduces inflammation. This in turn spells relief. The need for medication goes down and many patients can live normally without having allergy symptoms. The most common and widely practiced method is called Subcutaneous Immunotherapy. The oral or sublingual immunotherapy is beginning to get attention. Allergen immunotherapy is the only thing that brings you close to cure for allergies. Allergen Immunotherapy.

Q23: What are allergy shots and who needs them?

"Allergy shots" is the term often used for allergen immunotherapy treatment or allergy vaccination. This immunotherapy is an effective vaccination program that decreases the sensitivity to substances called allergens and helps develop tolerance to these triggers and reduces your allergy symptoms.

Allergen immunotherapy involves administering gradually increasing amounts of an allergen to a patient over several months. The injections are first given on a weekly or twice a week basis, and when the maintenance level is reached, eventually on a monthly basis. This process reduces symptoms that are otherwise triggered by allergen exposure. Immunotherapy treatment is the closest thing to a "cure" for allergic symptoms. Once you reach a maintenance dose of allergen vaccine or have finished your course of treatment, your symptoms are typically greatly reduced.

Allergy shots work like a vaccination. Through your body's exposure to small, injected amounts of a particular allergen, in gradually increasing doses, your body builds up tolerance to the allergen(s) to which you are allergic. This means that when you encounter these allergens (triggers) in future, you will have a reduced or very minor allergic response and fewer symptoms.

If you begin allergen immunotherapy treatment, it is very important to continue the injections on a regular basis until the treatment is discontinued. Otherwise, the treatment will not be beneficial. Generally, patients receive injections for three to five years or longer. During and after that, their sensitivity to the particular allergen to which they are allergic is reduced, often for years

following the discontinuation of therapy. This can mean, for instance, that they may be able to tolerate the outdoors during specific pollinating seasons without experiencing symptoms.

Allergy shots are considered when allergy symptoms are moderate to severe during a specific season (spring, summer, fall), occur throughout most of the year, do not respond adequately to medications, and are triggered by an allergen not easily avoided, such as pollens, house dust mite allergens or pets. Allergy immunotherapy can be given for grass, tree pollens, weeds, ragweed, molds, dog, cat, dust mites and stinging insect venoms. If taken regularly per the schedule, it can provide significant benefits and relief. The allergy related symptoms are greatly reduced. The need for medication is less and the quality of life improves significantly.

Q24: My 6-year-old son has asthma and I am concerned about damage to his lungs. Can asthma damage the lungs?

I can understand your concerns that many parents have in mind. It is true that asthma can cause lung damage but it depends on many factors including the severity of asthma, duration of the condition, frequency of attacks, triggers for asthma, frequency of infections and many more.

Asthma patients have inflammation (swelling) inside the small airways of the lungs. It is the duration and the extent of the inflammation that determines the damage. In simple terms, the longer the duration of uncontrolled asthma, the higher the chances of developing irreversible and permanent damage. This also means that better control of asthma can lower or eliminate the possibility of permanent damage.

It is good to know that you can prevent this by the appropriate management of asthma. This includes paying attention to asthma symptoms, knowing what triggers asthma attacks, avoiding the triggers to an extent possible and using the right combination of medications. There are many approved prescription medications and inhalers available that can be used to prevent this damage by decreasing the inflammation in the airways. Some of the medications are required on daily basis till this goal is achieved. Please discuss this with your son's doctor and he or she will choose the right combination for him that will help prevent this from happening. The sooner, the better. Asthma Treatment.

The proper asthma control means NORMAL life, with NO night time or activity related symptoms and NO asthma attacks. A person with uncontrolled asthma may feel that this goal is not realistic. But, it is very true and possible that by proper care of your asthma, you should be able to live a great, productive life without any symptoms.

Many asthma patients are allergic to indoor and outdoor allergens. Once you recognize the asthma triggers and avoid the exposure, it can help prevent asthma related symptoms. The right combination of asthma medications is equally important. Allergy vaccination can help reduce the inflammation and also the need for medication.

New developments and clinical studies have shown that the children who have better control of their asthma with less or no inflammation in their airways have higher chances to outgrow their asthma.

Q25: I am usually fine during day time but feel very congested and stuffy every morning. Can you help?

When you are feeling fine during day time and get symptoms when you wake up, it is usually something inside the bed room or the house that is responsible for your symptoms. I believe that your symptoms are everyday and all year around. If you have some or all of these symptomsnasal congestion, runny nose, itchy nose, sneezing, sinus pressure, headache, feeling tired, fluid in the ears, post nasal drip, throat irritation, coughing, wheezing, asthma etc., it is likely from indoor allergies. If you are exposed to second hand smoke or any strong odor, it may cause the similar symptoms.

When you are considering the possibility of indoor allergies, try to look into the possible exposure in the house and the bedroom. The common exposures include dust, dust mites, molds, animal dander, cockroaches and feather. If you do not have allergies to them, they do not produce reaction. Once you have developed allergies to one or all of them, it can impact the quality of life.

When you are not in the home or bedroom environment, you are not exposed to them and you are fine. When your nasal passages are exposed to these allergens while breathing the air in the bedroom for 6-8 hours while sleeping, you are waking up in the morning with all these symptoms. If you have pets (dog, cat, rabbit, birds) and they are sharing the bedroom with you, they can be triggering these symptoms. The dust mites are microscopic creatures present in the mattress, pillows, rugs and carpets. They require and grow well in the humid and warm temperature (the usual bedroom environment) and are present in a very large number in the mattress and pillows. While sleeping, you are being exposed to dust mite allergens and if you are allergic to them, it can be the main reason for your symptoms. If you have feather pillows or down comforters, besides feathers, they contain a lot of dust mite allergens.

You should try to find out what allergies you have and minimizing the exposure will help you get better. Allergy skin test or blood tests can help find the answer. Meanwhile, few simple steps can be very useful. Keep the pets out of your bedroom (day and night). If you let them in during the day time, they leave enough dander behind for you to breath at night. Optimize the humidity and temperature in the bedroom to minimize the dust mite growth. Remove the down products if feather and dust mite are responsible. Cover the mattress and pillows with special dust mite barrier covers. If the need be, remove the carpet from the bedroom, use an air conditioner and an air purifier. These simple steps can go a long way.

Q26: My 4 year old son has severe eczema; can it be due to allergies? What can we do about it?

Allergies can manifest in many ways and can affect different organ systems in the body. Nose, ears, eyes, throat, sinuses, lungs, stomach, intestines, and skin can get involved. It can be hay fever, seasonal allergies, sinusitis, asthma, hives, eczema, skin rash, food allergy, drug allergy and in many more ways. <u>Eczema</u>

Eczema means very dry skin with patches on different areas with itching. In severe cases it can affect skin all over the body and patches can crack and bleed. There are many different

conditions that give rise to eczema. The most common form is atopic dermatitis. When eczema is associated with allergies, it is called atopic dermatitis.

If allergic eczema starts very early in life (as an infant) it is usually from food allergy. It may be due to milk allergy or other common food ingredients like wheat, soy, peanut, egg, or nuts. If it starts after infancy, it is usually due to environmental allergies. The common indoor allergens in children include dust, dust mites, dog, cat, feathers and molds. Occasionally, outdoor allergens (like tree pollen, grass pollen, weeds etc.) can make existing eczema worse, if the child has developed sensitivity to them.

If your son started eczema as an infant, you should consider him having allergy tested for foods. If it started later or got worse in last 1-2 years, he should have allergy tests for environmental allergens. If you find out and know about his allergies, avoiding those foods or keeping him out of that environment can help significantly. It will improve his skin and prevent eczema from getting worse. Food Allergy.

Learn more about his skin care and using medications and creams to stop itch-scratch cycle. Itching leads to scratching and scratching causes more itching. This cycle makes eczema worse and it is very important to break this cycle.

Q27: I am 16 years old and I start coughing every time I play sports or run tracks. Is this normal?

As a teenager, you are full of life. You should be able to do sports, run tracks and live a normal life. The cough you have, every time you do some kind of physical activity, is NOT normal. You need to find out why you have cough with exercise.

There are many reasons for having cough during and after physical activities. The most common cause among children, adolescents and young adults is a type of asthma. This is called Exercised Induced Asthma or Exercise Triggered Asthma.

The usual symptom of Exercise Induced Asthma is in the form of cough. It may or may not be associated with wheezing (whistle like sound coming from chest while breathing). It depends on the many factors (type of exercise, with or without warm up time, place-indoor/outdoor, cold air, presence of other triggers and associated allergic asthma).

Pay attention to your symptoms and discuss with your pediatrician, family physician or a specialist. This is a serious condition and you should not take it lightly. Deaths have been reported among teenagers due to severe asthma attacks during physical activities. This does NOT mean that you should stop participating in sports and skip the Gym class! This is an alarm to do something about it. See your doctor, discuss with him or her and get the right advice.

When you get cough with exercise and if it is due to exercise induced asthma, the airway is becoming narrow during exercise. This can happen to someone who has existing asthma or someone who has developed exercise induced asthma. You can determine this by using objective parameters like peak flow meter or spirometer. These tests are simple and help significantly to make the right diagnosis. It can be done before and after the exercise to check for any changes. They are computerized and can be done in your doctor or specialist's office. Breathing tests.

Once you know about what you have, there are many ways to handle this problem. The goal should be to prevent your symptoms from happening in the first place. Some warm up time before exercise and avoiding cold air may help to an extent. You may need some prescription pills or inhalers, before exercise regimen.

Do not neglect this. It is affecting your quality of life and it can be life threatening, if ignored. You can live a great life and enjoy the sports, without coughing, with the right management.

Q28: I get hay fever and bronchitis every year in August or September. Can we do something now to prevent it?

When you have hay fever symptoms and bronchitis every fall, it is likely related to fall pollen. The bronchitis may be a sign of underlying seasonal asthma.

Some patients have "bronchitis" in every spring or fall. This is also possibly from the seasonal allergies. The symptoms of seasonal asthma or bronchitis include one or all of these -cough, shortness of breath, chest tightness, wheezing, noisy breathing etc. These symptoms are usually associated with other hay fever symptoms like nasal congestion, sneezing, runny nose, post nasal drip, itchy throat, itchy-watery eyes, sinus congestion, headache, itchy-heavy ears etc.

The seasonal asthma symptoms begin with and are related to the pollen in the air. In our area, the fall pollen season runs from late August through early frost. The fall symptoms are related to the amount of ragweed pollen, weed pollen and mold-mildew allergens in the air.

There are some preventive medications available that can be started 3-4 weeks before the fall allergy season begins. This will help minimize the development of nasal and asthma symptoms and reduce the need for other symptomatic allergy medications during the height of the pollen season. Asthma symptoms are related to the narrowing of small airways inside the lungs. This narrowing is usually from the constriction of the airway muscles (bronchospasm) and the airway swelling (inflammation). There is increased mucus production also. These changes happen during seasonal asthma too. If you discuss with your doctor or a specialist, they will prescribe certain medications to start before the pollen season and it will help prevent seasonal asthma symptoms.

If the seasonal asthma or bronchitis occurs every season for last few years, it is prudent to find out about your allergies through blood tests or skin tests. This information will help to plan your activities with minimal pollen exposure. For patients with severe pollen allergies, allergy vaccination with shots or drops can be very helpful. If started before the season begins, they lower your sensitivity to allergy causing pollen and help prevent the symptoms from coming back. The need for medication is less and the quality of life improves significantly. It is time to do something about your fall allergies now so that you do not have to be miserable in coming fall. Asthma Prevention.

Q29: I am an otherwise healthy adult but my doctor told me that I have "Post Nasal Drip". What is it?

If you break the word "Post-nasal-drip", it may explain the meaning. Post-is behind, Nasal-is related to the nose and drip-is the dripping of the mucus or the secretions. This word is used when a physician notices mucus or secretions dripping in the back of your throat.

The mucus can be thin or thick, white-yellow-green or brown. It can be there all the time or only during certain times of the day (early morning or late evening). It can be perennial (all year around) or seasonal (spring, summer, fall or winter). It may or may not have bad odor. The associated symptoms include throat clearing, sore throat, cough, phlegm, altered voice, choking etc. When the mucus is noted in the back of the throat, it is usually coming from nasal cavities or from the sinus openings. There can be associated nasal or sinus symptoms.

Once the post nasal drip has been noted and its color, duration, character and other associated symptoms have been looked into, it gives an idea to a physician about its origin. This helps in determining the management of the cause of your postnasal drip. If it is coming from nasal cavities or from sinus opening or both, there has to be a reason for having more secretions.

It can be infection, allergy or irritation. A simple common cold, can cause postnasal drip. It usually lasts for 1-2 weeks while you have cold. Acute or chronic sinus conditions have associated post nasal drip. If it lasts longer or happens in seasons or stays there every day, it may be from allergy or irritation. Seasonal allergy from grass or tree pollen, ragweed or other weeds can trigger symptoms in specific season. If it is all year around, it can be related to indoor allergens like dust, dust-mites, feathers, mold-mildew, cockroaches, dog, cat etc. It can be associated with irritation from smoke or strong odors from perfumes, cleaning chemicals etc. Sinusitis

There are various forms of prescription medications to treat postnasal drip. It is always a good idea to treat the problem that produces postnasal drip, so that it does not return after the treatment is over. If it is related to allergy or irritation, avoiding or minimizing your exposure to them can help significantly. Avoiding will improve the nasal or sinus conditions as well.

Q30: I have seasonal asthma in the spring and fall. Is it from allergies?

If you have asthma symptoms only in a specific season, your doctor might have referred it to as a seasonal asthma. If it is in the spring, summer, fall or in more than one of these, it is likely related to allergies. If it is only in the winter, it is usually cold air induced asthma.

Some patients have "bronchitis" in every spring or fall. This is also possibly from the seasonal allergies. The symptoms of seasonal asthma or bronchitis include one or all of these -cough, shortness of breath, chest tightness, wheezing, noisy breathing etc. These symptoms are usually associated with other hay fever symptoms like nasal congestion, sneezing, runny nose, post nasal drip, itchy throat, itchy-watery eyes, sinus congestion, headache, itchy-heavy ears etc.

The seasonal asthma symptoms begin with and are related to the pollen in the air. In our area, the pollen season runs from mid March through late fall. The onset of symptoms is related to the type of pollen allergy. The spring pollen allergy (mainly tree pollen, some grass, some weeds) produces symptoms beginning in the late March. If the severe symptoms are mainly in the months of May and June, it is usually from grass pollen, some weeds, some tree pollen and certain molds. The fall symptoms are related to ragweed, some weeds and mold spores.

Asthma symptoms are related to the narrowing of small airways inside the lungs. This narrowing is usually from the constriction of the airway muscles (bronchospasm) and the airway swelling (inflammation). There is increased mucus production also. These changes happen during seasonal asthma too. If you discuss with your doctor or a specialist, they will prescribe certain medications to start before the pollen season and it will help prevent seasonal asthma symptoms.

If the seasonal asthma or bronchitis occurs every season for last few years, it is prudent to find out about your allergies through blood tests or skin tests. This information will help to plan your activities with minimal pollen exposure. For patients with severe pollen allergies, allergy vaccination with shots or drops can be very helpful. They lead to reduced sensitivity to allergy causing pollen and help prevent the symptoms from coming back. The need for medication is less and the quality of life improves significantly. <u>Usining Inhalers.</u>

Q31: I get sinus problems from time to time and it causes me to have an asthma attack, why is this happening?

This is a very common occurrence for people who have asthma and develop sinus symptoms from time to time. Sinuses are small cavities inside the bones of your face and skull. Our skulls were designed this way so that our heads do not get too heavy with solid bones! These sinuses have been given different names based on their location and they vary in size. All of them open inside the nose by small holes. The inner skin (mucosa) of the sinus cavities is continuous with the inner skin of the nose.

When someone has nasal allergies, (due to dust, dust mites, molds, tree, weeds, grass pollen, dog, cat etc.) the inner skin of the nose gets swollen (inflammation). As this lining is continuous, it can trigger swelling inside the sinuses. This is called sinusitis. Similar changes can happen from irritation or infection. This swelling causes congestion and more mucus production.

The mucus from the sinuses can start dripping into the throat (post nasal drip) and can cause other symptoms. This leads to reflex broncho spasm (narrowing of the airway) and triggers asthma symptoms. The allergens that cause sinus problems can trigger asthma directly also.

You should discuss with your doctor to find out what type of sinusitis you have. Also consider finding the triggers for your sinus problems (allergies, infection, irritants, smoke etc.) This will help to minimize the frequency of your sinus condition and asthma attacks. There are medications available that can help avoid asthma attacks even after you have developed sinusitis.

Thanks for reading!

Thank you for taking the time to read the "Allergy. You Asked, We Answered." I trust that the information you learned here will help you get better control on your allergies and live a great life, despite allergies.

What are you going to do Next?

Please take at least ONE action step that will help you get closer to being allergy free. You choose what step you will take. I look forward to your allergy free life.

Do you have suggestions for us to provide more allergy tips to be included in future revisions? We welcome your feedback. If you found it useful, won't you please tell a friend? This book could forever alter the quality of someone's life....and it could be you who gives link to them. Without you, they might not ever find it. Think of the five people you know have allergies or asthma. They will be very grateful if they live better lives because you cared to pass on information about this book.

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Dr. Atul Shah has personally treated more than 20,000 patients and made significant impact in more than 100,000 lives as an allergist so far and has earned the nick name the "AmazingAllergist" from his patients and peers. His work is rewarded daily with numerous complements of smiling patients and their families. He has been recognized with the various awards, including the America's Top Physicians' Award, the Patients' Choice Award and the Most Compassionate Physicians' Award. He believes that every allergic child and individual has a potential to live a great life, allergy free. His desire to empower allergic individuals translated into this series of books. Please check out the awards at Our Awards.

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