A smiling woman with a red and blue ribbon in her hair, standing in a field of pink flowers. The background is a lush garden with green foliage and various pink flowers.

# **A Guide to Allergy Relief**

**David Kane**

**How to stop sneezing,  
itching and scratching**

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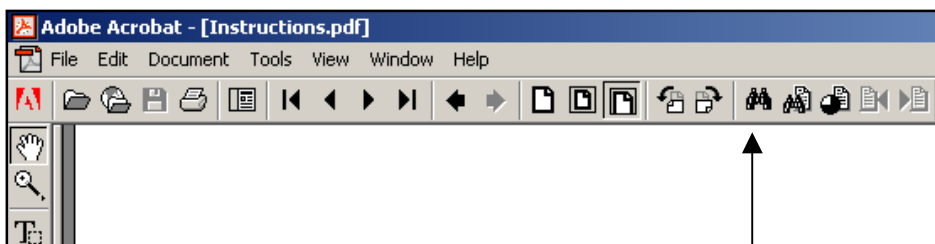
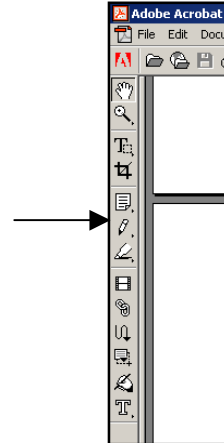
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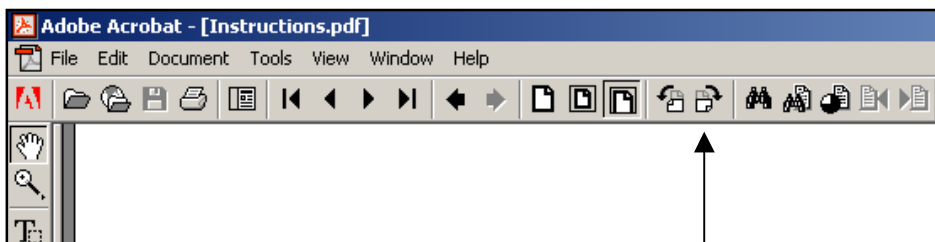
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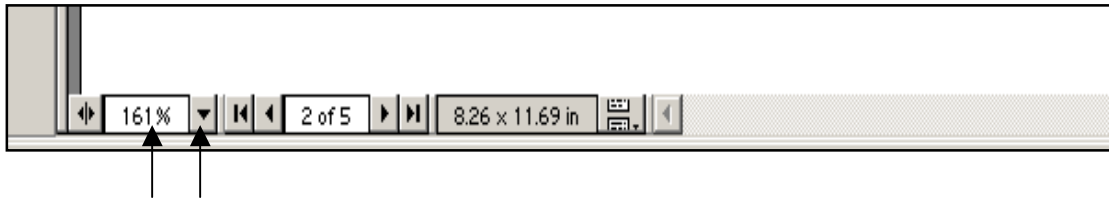
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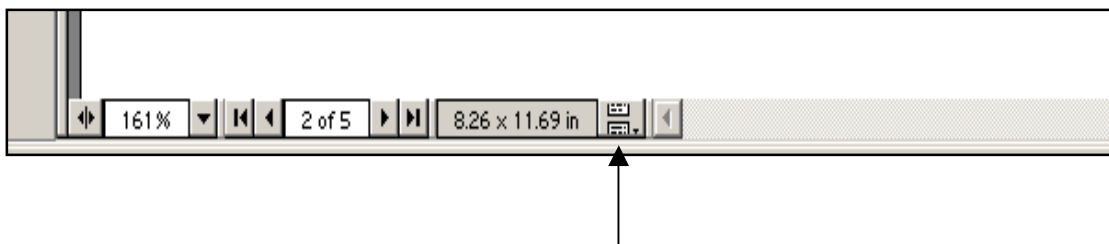
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## Introduction

It is estimated that about 35 million Americans suffer from pollen allergies. Employee absence due to allergies costs American companies over \$250 million a year in missed workdays and lost productivity.

Hay fever is responsible for about 2 million lost school days each year. Many students may under perform in exams because of the symptoms or the sedating effects of the medication they are taking.

Those who suffer with allergies have to try to make it through the day with itchy, watery eyes, sniffles and a head that feels clogged full of wool. Medication may make them drowsy. Holding down a job or continuing with studies is hard enough without the burden of an allergy.

Some allergies are related to inheritance. Children are more likely to have allergies if their parents do too. If one parent has an allergy there is a one in three chance that the child will also have allergies. If both parents have allergies the odds jump to seven in every ten children also having allergies. Other allergies seem to start if a person is exposed to an allergen when their body's defenses are weak.

Allergies can be severe, even life-threatening. They have also been linked to chronic fatigue syndrome, depression and possibly some headaches and migraines. There are even some who suggest there is a link between food allergies and ADHD.

Allergy symptoms are often mistaken for the symptoms of a cold. However there are some differences. Allergy symptoms usually start when you are

around an allergen and subside when you are not. Cold symptoms, which unlike an allergy can include fever, aches and pains, tend to last up to a week. However if symptoms last for weeks on end it may be that you are spending a lot of time near an allergen.

This book has been written to give you a basic understanding of the different types of allergy and how they can be treated. We start with the basics about allergies, how they and their triggers can be identified, and the medicines and complementary therapies that can be used to counteract them. Then we look specifically at hay fever, skin allergies, food allergies and allergic asthma. This book certainly does not mean you will never have to refer to a doctor again, but it will help you understand your allergy and how to fight it.

# Understanding Allergies

## Your immune system

Your immune system is incredible. It identifies the allergens (foreign microorganisms and their toxins that produce an allergic response) that enter your body and remembers them. In a lifetime it can remember hundreds of trillions of different allergens. This is like remembering every human, animal and plant on the planet and knowing how to engage with it.

This incredible memory means your immune system will recognize an allergen after it is first encountered and be able to initiate the correct response to neutralize and dispose of the allergen before it affects the body. This is why diseases like chicken pox and measles are usually only suffered once.

Allergies are the result of having an immune system that overreacts to the presence of antigens. The immune system is hypersensitive. It's like having an air force that responds to an incoming jet fighter and an incoming fly!

It is also believed stress can start allergic reactions too. Stress makes the adrenal gland produce more cortisol. This prompts overproduction of epinephrine and norepinephrine. These hormones reduce the effectiveness of the immune system. Stress can also worsen skin allergies simply because some states of mind (e.g. frustration or anger) may lead you to scratch more.

## **Anaphylaxis**

Anaphylaxis is a rare, potentially life-threatening form of allergic reaction. It can happen within seconds, minutes or even hours of coming into contact with an allergen.

Symptoms include sudden reddening of the skin, itchiness over the entire body, itchy rash or hives, sneezing, running nose, watery eyes, swelling of the throat and/or tongue, coughing, dizziness or fainting, nausea, vomiting, a sense of impending doom. As the condition worsens the person will experience difficulty breathing, dropping blood pressure, irregular heartbeat, abdominal pains, diarrhea, unconsciousness. Changes in circulation and airways are similar to the changes that occur during shock. This can be a life-threatening situation.

Most common triggers for anaphylaxis are insect stings, drugs, foods and latex rubber. Foods are the most common cause of anaphylaxis in children. Drugs cause most episodes with increasing age.

If you see someone suffering anaphylactic shock make sure someone calls for medical help. Ensure the person who has summoned help confirms this to you so you know it is on the way. Settle the casualty in the position most comfortable for breathing. This is usually sitting upright. Check to see whether the casualty is wearing something like a Medic-Alert bracelet or necklace. See if they are carrying medication for anaphylactic shock and be prepared to help them if necessary.

The injection of epinephrine (adrenaline) is the best treatment for anaphylaxis. It opens the airways and constricts the blood vessels in the digestive tract and skin, thereby raising blood pressure. In severe cases a dose

tends to last for 10 to 20 minutes. If further injections are not possible taking an antihistamine may help.

Monitor vital signs and try to reassure the casualty and keep them calm. Stay with the casualty until medical help arrives. When the casualty arrives at ER they will probably be given further epinephrine, antihistamines and steroids.

## Allergy Triggers

There are two basic approaches to dealing with allergies. One attempts to change the way your body reacts to a perceived threat. The other is to change the environment around you so your body does not encounter a threat. Both of these approaches require an understanding of the things that trigger an allergy.

Wind-borne pollens from trees, grasses and weeds can trigger allergies.

Irritants can also intensify your body's reaction to an allergen. These include tobacco smoke, aerosols, glue, perfumes, soaps and scents.

### Keeping the air clean

Smoke is often an irritant that can aggravate symptoms in an allergic person. Try to make your home a no-smoking zone.

Consider using filters on your air conditioning system if your triggers are airborne. You need to extract as many of the allergy causing contaminants as possible. Replace or clean the filters every month. Continually using your air conditioning will increase your utility bills and replacing filters regularly can add up, but the improvement in symptoms is worth the added cost if you suffer from dust related allergies.

HEPA (High Efficiency Particulate Matter) filters retain over 99.9% of particles larger than 0.3 microns. To put this in context the average human hair is 80 to 100 microns in diameter.

Stand-alone HEPA units can be used if you do not have an air conditioning system. There are also HEPA vacuum cleaners available. If you find your

allergy symptoms arise after housework it may be worth investing in one of these.

You can also get filter devices that consist of electrically charged plates. These attract allergens without setting up large air currents that would move large volumes of air around and exacerbate the problem.

## Testing and Treating

### Identifying triggers

To help your doctor determine the type of allergy you have and what triggers it, make a note of where you were and what you were doing at the time of the allergic reaction. Also record what the symptoms were and the time of day and year they occurred.

Once you have identified your triggers you need to think about situations in which you may come into contact with the triggers and decide how to avoid them or minimize your chances of coming into contact with them. This may mean some changes in your lifestyle, routine, home and workplace. Ask your doctor to suggest effective allergy countermeasures.

### The skin test

The most common method of evaluating a possible allergy is the skin test. This takes the form of a scratch test on the surface of the skin, usually on the back or forearm. A positive allergic reaction usually occurs within 20 minutes and produces a swelling at the test site, like an insect bite. You should remain under observation for at least 30 minutes after the test. This is so your reaction can be evaluated and, if you do suffer a severe reaction, there are trained personnel at hand to assist you. Do not be alarmed. A severe reaction is rare.

If the skin test fails to give positive results the allergist may do an intracutaneous test. This involves a series of small injections of allergen solution.

While waiting after a skin test tell the nurse immediately if you notice any of the following: itchiness of the hands, feet, groin or armpits; skin reactions like

reddening or hives; dizziness; respiratory symptoms including sneezing, coughing or a tightness in the chest; itchy eyes or throat; difficulty swallowing; nausea, stomach cramps or diarrhea.

If you are using antihistamines it is important you discontinue for several days before the skin test as they can interfere with the results.

If a skin test is inappropriate or the results are inconclusive you may need to have a blood test. This can identify reactions to more than 500 allergens and is not influenced by medications.

## **Allergy shots**

Remember I mentioned the phenomenal memory of the immune system? Immunization is a way of implanting a memory into the immune system in such a way that it believes it has already encountered an infection. If you are exposed to the real infection it will be able to react quickly and effectively to protect you.

The allergens most commonly used in immunotherapy are those from mold spores, and pollens from trees, weeds and grasses. Unfortunately immunotherapy does not provide relief for food allergies.

Avoid vigorous exercise a couple of hours before and after your allergy shots. Exercise increases blood circulation and may cause rapid absorption of the allergen and a severe reaction. If you have a fever it may be difficult to detect an adverse reaction to the allergy shot.

You can continue an immunotherapy course during pregnancy, though your allergist may want to reduce the dose to minimize the risk of any reaction.

Completely stopping the treatment may lead to worsening symptoms and the need to take medication that is best not taken whilst pregnant. If you are not already on a course of allergy shots it is best not to start until after the baby is delivered.

A common course of immunotherapy works as follows: You get shots of a very small amount of the diluted allergen once or twice a week; The amount and concentration of the allergen is gradually increased over a period of three to six months until you reach the maintenance dose. This is the maximum dose that you can receive without adverse reactions. After this stage has been reached you should start to notice relief of symptoms. The maintenance dose will continue, but the interval between the shots may be extended. Many patients with pollen allergies experience a significant improvement after a year of treatment and are able to stop taking the shots after three years.

As with the skin test you will have to remain at the practice for about 30 minutes in case of any adverse reaction.

If you do not like the thought of all those injections there is currently work on nasal and oral delivery systems. In the latter doses of increasingly potent allergen extract are placed under the tongue until the body becomes desensitized to the allergen. You treat yourself at home with a liquid or quick-dissolving tablet up to three times daily. This 'sublingual immunotherapy' has been used in Europe where it was found to ease symptoms by 42%.

Even if immunotherapy greatly reduces your allergy symptoms it is still advisable to continue avoiding your triggers.

## Medicines

The basic types of drug used to treat allergies are:

- Antihistamines

These counter the effects of histamine, a chemical released by the immune system when an allergen enters the body.

There are two classes of antihistamine. The older, first generation antihistamine provides relief for about three to six hours. The second generation antihistamines can relieve symptoms for up to 24 hours.

- Decongestants

These work by constricting blood vessels to shrink irritated and swollen mucosal membranes, so reducing the amount of fluid leaking into the membranes and decreasing nasal congestion.

Oral decongestants available over-the-counter are some of the most widely used medications in the world. They can cause side effects including sleeplessness, loss of appetite, high blood pressure and heart palpitations if used over a long period of time.

Check with your doctor before using a decongestant if you have arrhythmia, coronary heart disease, diabetes, hypertension, hyperthyroidism, glaucoma or urinary dysfunction. They should also be given to children with caution because of their stimulant effect.

Heed the warning on the label about not using for more than three to

five days. Overuse can inflame the mucous membranes further, leading to serious congestion. This may lead some people to use the decongestant more, which makes the situation worse.

Antihistamines and decongestants are often more effective when combined into one product.

- Topical nasal corticosteroid sprays

These are effective for controlling the main symptoms of allergic rhinitis. They clear the nose by suppressing the inflammation of the nasal passages. They are not effective if your nose is seriously congested. You will probably have to use a decongestant first.

Make sure you follow the instructions for using the spray and aim the medication towards your ear, away from the septum (the bone that divides the nose into two nostrils).

There have been some concerns about possible effects this medication has on the growth rate of children. The steroids used in this medication (and in some asthma medications) are completely different from the anabolic steroids used by athletes.

- Topical mast cell stabilizer sprays

These work by preventing the release of histamine and other chemicals. An example is Cromolyn sodium which is most effective if you start using it before you are exposed to allergens.

- Anticholinergic nasal sprays

These work by reducing the amount of mucus produced in your nose.

If your symptoms do not improve go back to your doctor or allergist. If you feel your doctor is a little uninformed check out the treatment guidelines given by the Joint Task Force on Practice Parameters in Allergy, Asthma, and Immunology ([www.jcaai.org](http://www.jcaai.org)).

Do not use over-the-counter allergy remedies if you have diabetes, emphysema, heart or kidney disease. Such remedies can interact with the prescription medications for these conditions.

### **Complementary Therapies**

It is believed that taking supplements can strengthen the immune system and therefore help allergies. If you decide to try supplements discuss this first with your doctor. With his approval use a multivitamin that gives 100% of the daily requirement for most nutrients.

Vitamin C is a natural antihistamine.

Vitamin E is essential for the immune system to work properly and has been found to help relieve some of the symptoms of hay fever, particularly a reduction in nasal stuffiness.

Quercetin is a nutrient found in onions and is similar to cromolyn sodium, a drug used to treat hay fever. There is some evidence it controls the release of histamine and other chemicals that initiate an allergic response.

Nettle extract has also been found to relieve hay fever symptoms. Use products made from the whole plant, not just the root of the nettle.

Bromelain is an enzyme derived from the pineapple that acts as an anti-inflammatory. However do not take it if you are allergic to pineapple.

Butterbur gets its name from once being used to wrap butter, but it was also known as plague-flower from its use as a bubonic plague remedy. More recently its extract has been shown to be just as effective as a prescription antihistamine in relieving the discomfort of hay fever.

Reishi mushroom has been used to treat allergies. It is a herbal preparation with steroid like properties.

Chinese herbal tea has shown considerable success in the treatment of atopic eczema.

If you would like to try some complementary therapies the following may be helpful:

- Homeopathy

This works in a similar way to immunology in that you take diluted doses to stimulate the body's response, but it uses natural substances. Expect an initial consultation to take up to two hours as all aspects of your health, lifestyle and symptoms are examined. A remedy will then be proposed. Some can be effective almost immediately, but others may take longer to give relief.

- **Massage**

The connection between stress and the immune system suggests that massage may be a way of avoiding allergic reactions. Massage can reduce stress-related hormone levels and improve airflow. Check that your massage therapist has some form of accreditation before starting a course of therapy.

- **Meditation**

This is a good way of relaxing which will help control allergies. Blood pressure, heart rate and breathing rate can all drop during meditation.

# Hay Fever

Hay fever gets its name from 19<sup>th</sup> century England where a study of farmers concluded that spring hay cutting caused the symptoms.

It does not cause a fever. If you do have an elevated temperature while experiencing hay fever symptoms you may have a bacterial or viral infection, like flu, sinusitis or pneumonia.

The correct name for hay fever is allergic rhinitis. Over 40 million Americans suffer from some form of this allergy, including up to 30% of adults and 40% of children. Most people with the condition develop it before their 20<sup>th</sup> birthday.

## Symptoms

Characteristic symptoms include runny nose with a clear discharge, stuffy nose, sneezing, and nasal discharge down the back of the throat (post nasal drip). You may also experience itchy nose, ears, palate and throat.

You can also get swollen, itchy, watery eyes (allergic conjunctivitis). This is often treated with the same type of drugs as allergic rhinitis.

The symptoms themselves can produce characteristic signs and gestures. People often rub the tip of their nose with the palm of the hand to relieve nasal itching and congestion. This is such a common allergy characteristic that it has become known as the 'allergy salute'. This rubbing can also cause a line to appear across the bridge of the nose. Congestion of small blood vessels beneath the surface of the skin under the eyes can produce dark circles, which make the

person look like an unsuccessful boxer. Swelling adenoids can give a sufferer a tired appearance.

## **Avoiding sinusitis**

The sinuses are cavities in your skull that contain mucus. This traps airborne viruses, bacteria, irritants and allergens and is swept into the nasal passages. From here it drains into your throat and into the stomach where the digestive system neutralizes the inhaled substances.

Sinusitis can lead to infections of the middle ear and sinuses.

More than half of children in the U.S. who have had sinusitis also had allergic rhinitis. If you have allergic rhinitis you can reduce your chances of developing sinusitis by taking the following measures, especially if you have a cold or allergy symptoms:

- drink plenty of water to keep the mucus thin so it can easily drain from your sinuses.
- Blow your nose gently, one nostril at a time.
- Avoid diving or flying; the pressure changes can block your sinuses.

## **Seasonal hay fever**

There are essentially three types of hay fever: perennial, seasonal and occupational allergic rhinitis.

Perennial allergic rhinitis produces symptoms throughout the year. It is caused by your immune system becoming too sensitized to one or a combination of triggering agents.

Seasonal allergic rhinitis is the most common type. Symptoms occur at specific times of year and can vary as the amount and quality of molds and pollens vary. Most people start experiencing problems when the count reaches 20 to 100 grains per cubic meter. Only small amounts of pollen from Bermuda or bluegrass, or trees like oak and elm can trigger an allergy. However, a large amount of pine pollen is needed to produce the same sort of problem. This is because the pine pollen is heavier than the others and is not dispersed in the air as easily.

In warmer climates tree pollens are airborne in late winter to late spring, grass pollens are the problem in late spring to early summer, and weed pollens cause problems from mid-summer to fall. In warmer climates weed pollens can still be around in December.

Ragweed causes up to one-third of seasonal allergic rhinitis cases in North America. This is partly because it is carried easily by the wind. Ragweed pollen has been collected high in our atmosphere and up to 400 miles out to sea.

It is not usually advisable to move to another part of the country in the hope of avoiding pollens. It is likely you would develop a pollen-triggered allergy in the new area too.

## **Dealing with pollen**

Wear natural fiber clothes during pollen season. Synthetic materials can build up an electrostatic charge that attracts pollen. Natural fibers also breathe well, which means they stay drier and are less hospitable sites for mold. Lightweight cotton T-shirts are best. Wash woolen sweaters regularly.

Australian researchers have found that the allergen level on a sweater can be ten times higher than in dust swept off a kitchen floor! Also wear wrap-around sunglasses to protect your eyes from pollen.

Be aware that pollen levels will probably be higher than average in parks. Stay away from vacant lots and fields. Most of the plants growing in these areas are likely to have gotten there by wind-blown pollen.

If you are allergic to pollens select your sports carefully. Swimming or clay court tennis may be preferable to golf. If necessary take antihistamines or other medication before you start exercising. Breathe through your nose as much as possible as it is a natural filter.

Pollen can enter your home through doors and windows, although you can buy pollen-proof screens that are over 90% efficient at keeping out pollens like ragweed. Pollen will also be brought in on hair and clothing. Pets will also carry these tiny particles into the house.

Dry, breezy days are the most likely to have a high pollen count. Check a newspaper, TV or the internet for the pollen count. Try to remain indoors if possible, especially between 5a.m. and 10a.m. and early evening.

If you have to venture out keep windows up and air conditioning on when driving. Remember to have your automobile's air conditioning checked regularly. You can buy HEPA filters that plug into the car's cigarette lighter and sit on the floor or behind the front seat. Be aware that exhaust from automobiles and factories can be irritants.

Remove your shoes before entering the house and change your clothing. Ideally have a shower, but if there is no time wash your hands and face and

rinse your hair as soon as possible. If possible engage someone else to mow the lawn and rake the leaves.

## **Gardening with allergies**

Another activity that may tempt you outside is gardening. Whilst beautiful flowers and an immaculate lawn may be the reward for all your efforts, the garden may trigger your allergy.

Wear long sleeves and pants while gardening to reduce the chance of pollen touching your skin. These should be put aside just for yard work and removed before reentering the house. Wash them before wearing them again. Wear a micro fiber mask whenever you mow the lawn, rake leaves or dig.

The best time for yard work is when the pollen index is low or after a long, soaking rain. However a heavy storm can fracture pollen grains and release the proteins that cause allergic reactions, so remain indoors for at least an hour. If you cannot get someone else to tend your garden take an antihistamine about 30 minutes before starting any yard work.

Before you start to make any changes in the garden see an allergist to make sure you are actually allergic to pollen. It's a waste of time cutting down an oak if you're not allergic to its pollen.

Avoid planting near entrances, exits and below bedroom windows. Use gravel instead of tree bark for mulch. If grass pollen is a problem keep the lawn well trimmed so the plant does not grow tall enough to develop flowers and pollen. You could try planting a low pollen variety like 'Princess 77' or just replace your lawn with paving. Encourage wild birds into your garden by putting up a feeder or birdbath. The birds are likely to eat the insects in your

garden too. This will reduce the insect population in your garden and the damage they cause that can lead to mold.

Do not plant too close together. Keeping your garden sunlit and airy will reduce the likelihood of mold growth. Molds can also grow where there is rotting vegetation including that pile of leaves you left at the side of the lawn. If you have a compost bin make sure it is sited away from the house.

Some people object to changing their garden, saying that there is no guarantee that the neighbor's plants won't populate your garden with pollens anyway. However, many pollens don't actually travel far. For example tests have shown that birch and oak pollen are highest nearest the trees that released them.

## **Molds**

Mold spores are present throughout the year, but are at their worst levels during late summer and fall. They can become airborne indoors as well as outside. Mold can develop in damp, dark places like basements and attics. They can also develop in refrigerators and garbage areas if they are not cleaned regularly and thoroughly. If your home suffers any wet damage due to a flood or burst pipe check carpets, drapes, ceiling tiles and upholstered furniture. If they cannot be dried out within a day it is best to dispose of them. Mold will quickly start to grow in the soaked material and trigger allergies.

Be aware that pollens and spores are not the only allergens that can trigger allergic rhinitis. It has been found that indoor air can contain up to 70 times the amount of pollution outside. As most of us spend 90 percent of our time indoors, 60 percent of that in our own homes, it seems reasonable to consider indoor air pollution as a possible factor in allergies and asthma.

## Occupational hay fever

Occupational allergic rhinitis is often caused by a combination of triggers in the workplace. It is often difficult to treat because there are so many possible triggering agents.

If your symptoms primarily occur on workdays and some of your colleagues have similar symptoms, you may have occupational allergic rhinitis.

Speak to your employer. If you work with dust or fumes it may be possible to reduce exposure or rotate jobs.

Research in America and Japan has shown that eating high omega-6 vegetable oil increases the chance of suffering allergic rhinitis symptoms. Avoid these fats by eating fewer soybean, corn, cottonseed, safflower and sunflower oils. When shopping for margarine, salad dressing, mayonnaise and oils for baking and cooking, purchase products made from olive or canola oil.

## Skin Allergies

This allergy affects your largest organ – your skin. The allergic condition of the skin is known as atopic dermatitis, atopic eczema or allergic eczema. ‘Derma’ is Greek for skin; ‘itis’ is Greek for inflammation. Eczema means ‘to erupt’ in Greek.

### Identifying skin allergies

If you are not sure that you have a skin allergy it is best to check with your doctor. If you cannot get to your doctor soon enough take a color photograph of the condition (easy enough with a digital camera or mobile phone), and note how long the condition persists and how often it recurs. Your doctor will also want to know if you have been exposed to any possible allergens, other possible triggers, and whether you have recently had any viral or bacterial infections. If a food allergy is a possibility record all foods and liquids consumed 24 hours before each episode.

Atopic dermatitis causes inflammation, which dries out the skin. Scratching dry skin causes more irritation and inflammation. This makes the skin itchier and so the cycle continues. Eventually cracks can develop on the weakened skin. This can allow irritants, bacteria and viruses in, which can trigger further allergic reactions or lead to infection.

It is often the case that someone suffering from atopic dermatitis will have the condition on their back, but it is rarely worse there. This is simply because they cannot easily scratch and damage the skin in that area.

If you suspect you suffer from contact dermatitis your doctor may perform a patch test. This involves placing small aluminum patches containing small,

diluted amounts of suspected allergens on your skin. The patches, often in the shape of discs, are placed along your upper back. They may need to be in place for up to 48 hours and you will be instructed to avoid getting them wet. If there is no immediate reaction you will have to revisit your doctor so he can evaluate the results. The patch test itself is not conclusive and your doctor will also give you a physical examination and question you about your medical history.

## **Managing skin allergies**

The easiest step to take is to keep your fingernails short to reduce the damage caused by scratching.

Managing atopic dermatitis means firstly moisturizing and softening the skin to ensure it does not dry out. Secondly, identifying then eliminating the allergens and irritants that start the itching/scratching cycle. Your doctor may recommend you use topical corticosteroid preparations to control the inflammation.

Soak in a lukewarm bath for 20 to 30 minutes. Do not have hot baths or showers, as the heat will increase skin dryness and itching. You can add oatmeal or baking soda to the bath for a soothing effect, though it does not help moisturize the skin.

Use a mild soap or a non-soap cleanser with neutral pH (pH7). If you wish to add bath oils do so after you have been in the water so that it can seal in the moisture. Do not use bubble baths as they can form a barrier that stops the bathwater moisturizing your skin.

After the bath dry yourself by patting your skin with a soft towel. This helps retain moisture. Avoid brisk rubbing as this can damage the skin.

Immediately after drying your skin apply a lotion or emollient cream to help your skin retain the moisture.

Do not use lotions with a high alcohol or water content as they evaporate quickly and leave the skin dry. Also avoid products that contain fragrances, astringents, preservatives and solubilizers. These can also dry and irritate the skin.

Avoid abrasive clothing. Try to keep to open-weave, loosely fitted clothing made of cotton or cotton-blend. Wash new clothes before wearing them. Ideally use a liquid detergent when washing clothes and make sure they are thoroughly rinsed to remove the detergent.

Wash clothes and sheets using phosphate-free detergents. Check the label. Baby detergents should not contain these irritating compounds.

Try to avoid temperature extremes. Use air conditioning in summer to keep humidity down and the temperature comfortable. If necessary use a humidifier in winter to stop your skin drying out.

It has been found that exposure to sunlight can help people with atopic dermatitis. Use a sunscreen, but be careful to choose one that will not trigger your symptoms. Avoid getting overheated, excessive perspiration and sunburn.

Avoid situations where you will experience extreme physical contact, heavy perspiration, or heavy clothing. This may mean avoiding some sports. Swimming is permissible if you rinse the chlorine from your skin as soon as you leave the pool, and use a moisturizer after drying yourself.

If you suffer a small outbreak of contact dermatitis you should apply a cold compress to the affected area. Use a clean, soft cotton material and leave it over the inflamed area for half an hour. You may need to repeat this up to six times a day.

## **Medications**

If the above steps do not help your doctor may prescribe topical corticosteroid medication. There are seven classes available each of differing strength and available as creams, lotions or ointments to be applied directly to the skin. Different areas of your skin may require treatments of different strengths. Thicker areas of skin, like the palms and the soles of the feet, will need more potent creams. However prolonged use can lead to thinning of the skin, so your doctor will want to use the weakest effective treatment.

Histamine released in the body can lead to an interaction with the nerve endings just below the skin. This can produce a sensation that the brain interprets as itching. Your doctor may prescribe an antihistamine to stop this sequence of events. Be aware that some brands have a sedating affect. Those that do not are usually labeled 'non-drowsy' or 'non-sedating'. If you are not sure check with the pharmacist. Do not think you can counter the sedating effects by drinking coffee or some other stimulant. Caffeine based drinks are short-term stimulants only.

If your condition leads to a bacterial skin infection your doctor may prescribe a course of antibiotics. These may involve an oral medicine or an application to the skin.

If your atopic dermatitis is especially severe and difficult to treat your doctor may recommend one or more of the following:

- hospitalization to isolate you from the allergens or that trigger the symptoms.
- using wet dressings to help your skin absorb topical corticosteroids while preventing you scratching the skin. If used excessively this can lead to dry and cracked skin unless you use a moisturizer before applying the dressing.
- phototherapy, which uses ultraviolet light. This treatment can be combined with a drug called methoxysporalen and is known as photochemotherapy.
- drugs that reduce the amount of histamine released (PDE inhibitors). Some dermatologists recommend Tacrolimus ointment. However there is evidence that it can increase your chance of catching colds and flu, and increases the risk of infections through the skin. There is even evidence that it may increase your risk of getting certain types of cancer.

## Triggers

Allergic reactions to drugs can affect the skin, producing rashes or hives. There are over 3000 known triggers for allergic contact dermatitis. Symptoms can appear days after an allergen is in contact with your skin.

Characteristic symptoms of allergic contact dermatitis include a red rash, swollen pimples, blisters and itchy skin. They usually develop where your skin was in contact with an allergen or irritant. Often the allergen is spread across your body as you transfer the allergen by rubbing parts of your face, arms or legs.

The condition can appear in the following areas:

- across the forehead (from a hatband or sweatband)
- neck and face (triggered by perfume or makeup)
- the torso (from allergens in clothing, dry-cleaning chemicals or detergents)
- underarms (from deodorants)
- at the wrist (from a leather or nickel-containing watchband)
- fingers (from rings, soap trapped beneath rings, or nail polish or remover)
- feet (from leached chemicals used for tanning leather).

## **Plant triggers**

The most common natural cause of allergic contact dermatitis is plants from the Toxicodendron family of plants. This includes poison ivy, poison oak, and poison sumac.

A characteristic three-leaf cluster is the best way of recognizing these types of plant.

If you do brush against one of these plants wash the area within 30 minutes of contact. You can use soap and water, but sometimes only water is needed to remove the offending plant resin. Also remove and clean your clothing to prevent spreading the resin. Apply a cold, wet compress to any inflamed areas. If the rash is widespread see a doctor as soon as possible.

## **Manufactured triggers**

Another common cause is contact with latex. This comes from the sap of the Brazilian rubber tree. The natural proteins and those added in the manufacturing process can trigger allergic contact dermatitis. Most people are aware that this can lead to reactions if you wear latex gloves. However latex is also present in baby pacifiers, balloons, pencil erasers and elastic bands in undergarments. There can also be problems when latex particles become airborne and are inhaled. If you have a latex allergy try to avoid the material and use vinyl or plastic where possible.

Nickel is another trigger for this condition. In addition to the obvious nickel-containing metallic objects like coins and jewelry, nickel is also present in everyday objects like scissors, bathroom and kitchen cabinet handles, and zippers. Mascara, eye shadow and eye pencils also contain nickel. Experts estimate that the number of people suffering from a nickel allergy has risen about 40% in the last decade. Much of this is believed to be due to the popularity of body piercing. Some foods also have natural nickel content and people who suffer severe symptoms may need to restrict their diet under medical supervision. At present there is no way to desensitize a person with a nickel allergy. Avoidance is the best strategy.

Photoallergic contact dermatitis is triggered by an interaction between ultraviolet light and products like sunscreens. Check with a pharmacist that the sunscreen you use does not contain PABA or some other substance that could produce a skin reaction.

## **Insect triggers**

Stings from insects like wasps, honeybees, yellow jackets, hornets and fire ants can trigger reactions in people allergic to the stings. The reaction can range

from swelling and itching to anaphylaxis. There are about 40 fatal incidents of anaphylaxis prompted by insect stings in the U.S. every year. If you are at risk of suffering anaphylactic shock you should carry an epinephrine kit with at least two injections available. The best advice is to avoid the insects you are allergic to. This means no bright clothes or flowery scents that might get you mistaken for a flower. Avoid wearing loose fitting clothing that might trap a flying insect. Also avoid open footwear. If you cannot avoid an encounter keep calm and do not antagonize them. It is rare that an insect uses its sting unprovoked.

## **Hives**

An area of stinging welts on the skin, similar to a reaction to nettles, is probably hives. If these are scratched they can develop into lesions. Certain foods, drugs, or insect stings can trigger hives.

The aforementioned advice regarding baths and soaps, extreme temperatures and clothing applies. Avoid contact with cold or frozen items.

Do not take narcotic pain relievers, aspirin or NSAIDs (non-steroidal anti-inflammatory drugs).

# Food Allergies

## The major food allergens

Proteins are usually the major food allergens, most commonly found in the following foods:

- peanuts, soybeans, legumes and food containing these products.
- cow's milk and products containing milk proteins like casein and whey.
- freshwater and saltwater fish.
- shellfish like shrimp, lobster, crab, oysters and clams.
- tree nuts like almonds, cashews, hazelnuts, walnuts and Brazil nuts.
- eggs-particularly the egg white.
- wheat and the many products that contain wheat.

Wheat contains four primary proteins, one of which is gluten. The allergy to gluten is also known as gluten intolerance or Coeliac Disease. When gluten is eaten the lining of the small intestine is damaged. This prevents the absorption of important nutrients. Currently the only treatment is to eliminate gluten from the diet and ensure that the patient receives the correct amounts of nutrients and vitamins from other sources.

Milk, egg, peanuts, fish, soybean and wheat have been found to worsen atopic dermatitis in children. In many cases avoiding these foods has greatly reduced or even completely eliminated symptoms.

In addition to the above foods shellfish, tree nuts and certain fruits can trigger hives. Additives like sodium benzoate, sulfites, and tartrazine can also trigger hives.

Skin contact with raw meat, fish, vegetables and fruit can trigger acute hives. Severe hives triggered by foods is more likely to be found in children than in adults.

Plants can be grouped into families. The families that can cause some allergic reactions are as follows:

- goosefoot family: Spinach, beets, pigweed and Swiss chard.
- gourd family: cantaloupe, cucumber, gherkin, pumpkins, squash, watermelon and other melons.
- lily family: onions, leeks, asparagus, sarsaparilla, shallot, chives and garlic.
- mustard family: broccoli, Brussels sprouts, cabbage, cauliflower, garden cress, horseradish, mustard, rutabaga, turnip, and watercress.
- nightshade family: tomatoes, potatoes, eggplant, red pepper and bell pepper.
- plum family: Apricots, almonds, cherries, nectarines, peaches, prunes and plums.

### **Identifying the trigger**

The best way to confirm the foods that trigger reactions is to follow an elimination diet. This involves eliminating suspected foods from your diet and then slowly reintroducing them while monitoring your condition. This is only to be performed under medical supervision, as you still need to maintain as balanced a diet as possible.

Anaphylaxis can be triggered by exercise within three to four hours of consuming particular foods. The foods most likely to lead to this condition are milk, wheat, fruit, celery, fish or shellfish. If you suffer from this condition it is vital that those around you are aware of it, especially those you exercise with. If

a child suffers from the condition it is even more important that those around him know the situation. In rare cases people can suffer exercise-induced anaphylaxis regardless of the type of food ingested.

## Eating out

Do not rely on food servers to know the exact ingredients of the menu. In the case of severe allergies it is not enough to know that your food is allergen-free. You also need to check that the kitchen uses separate surfaces and utensils for preparing allergen-free meals.

If your child is allergic to a food that is often used as an ingredient (e.g. peanuts, wheat) it is best to pack their lunch and ensure they know not to accept any foods offered by others, including candy bars, even in the kindest of gestures. Also tell them they must never share utensils with someone eating foods that may contain the allergen. If your child has an allergy to peanuts and peanut oils ensure their school science class will not be using the nut in any experiments.

If anaphylaxis is a possibility your child should wear a MedicAlert bracelet, and have epinephrine available along with people who know how to administer it.

If there is a history of anaphylactic episodes it is safest to assume that any reaction will lead to anaphylaxis and administer epinephrine at the earliest sign. It is advisable for anyone likely to suffer anaphylaxis to carry a list of symptoms, a treatment plan and their physician's details. Ensure that those you spend time with are aware of the availability of this information.

# Allergic Asthma

## Symptoms

This is the most common form of asthma. It has the same symptoms as the non-allergic type, including wheezing, coughing, shortness of breath and tightness of chest.

## Allergic asthma triggers

The most common allergens for triggering allergic asthma are dust mites, animal dander, pollens and fungal spores.

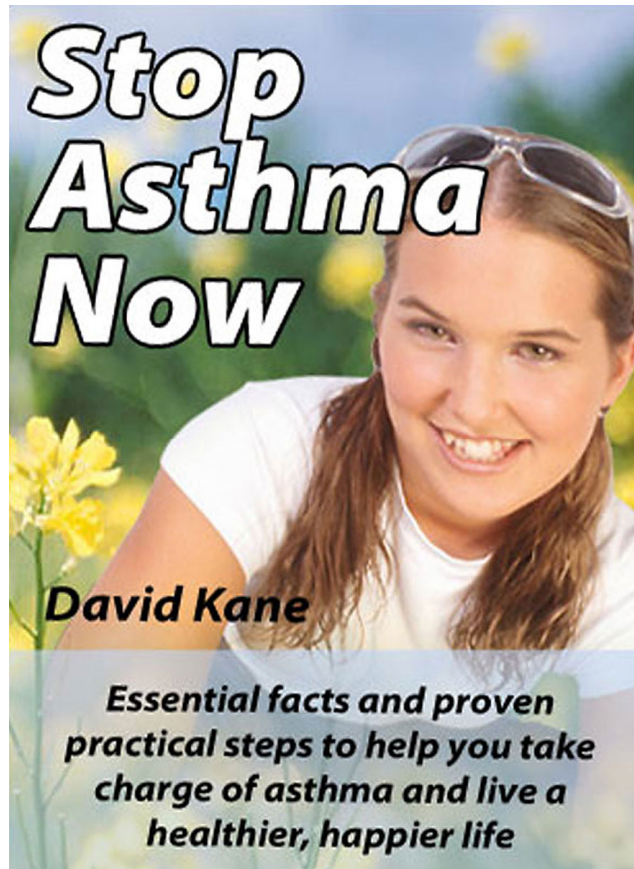
WHO research in 2001 showed that if you suffer from allergic asthma you probably also suffer from allergic rhinitis.

## Stop Asthma Now

To find out how to stop both allergic and non-allergic asthma controlling your life download 'Stop Asthma Now – The Essential Asthma Relief Book'. In Stop Asthma Now, David Kane shows you how to eliminate your dependency on asthma drugs and stop asthma controlling your life. He explains how to identify and avoid asthma triggers, including how to run an elimination diet; and the complementary therapies that work best for asthmatics. There is also a vast range of other information from asthma-friendly sports, to vacations through to how to avoid occupational asthma.

[www.asthma-relieftips.com](http://www.asthma-relieftips.com)

## **Also by David Kane**



# **Stop Asthma Now!**

## **The Essential Asthma Relief Book**

In this comprehensive book David Kane shows you how to stop asthma controlling your life. He explains how to identify and avoid asthma triggers, including how to run an elimination diet; how to eliminate your dependency on asthma drugs, and the complementary therapies that work best for asthmatics. There is also a vast range of other information from asthma-friendly sports, to vacations through to how to avoid occupational asthma.

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