

PREVENTION TIPS

- Wear a pollen mask when mowing grass or house cleaning (most drugstores sell them)
- Change the air filters monthly in heating and air conditioning systems, and/or install an air purifier.
- Keep windows and doors closed during heavy pollinating seasons.
- Rid the home of indoor plants and othersources of mildew.
- Don't allow dander producing animals (i.e.: cats, dogs, etc.) in the home.
- Change feather pillows, woolen blankets and woolen clothing to cotton or synthetic materials.
- Enclose mattress, box springs and pillows in plastic barrier cloth.
- Use antihistamines and decongestants as necessary and as tolerated.
- Sleep with the head of the bed tilted upwards. A brick or two placed under bedposts at the head of the bed helps relieve nasal congestion.
- Observe general good health practices: excercise daily, stop smoking avoid other air pollutants, eat a balanced diet, and supplement diet with vitamins, especially C.
- Consider a humidifier in the winter as dry, indoor heat aggravates many allergic people, but beware of possible mold growth in the humidifier.
- Discuss hay fever and allergy symptoms with your physician when you experience an allergic reaction.

*American Academy of Otolaryngology-
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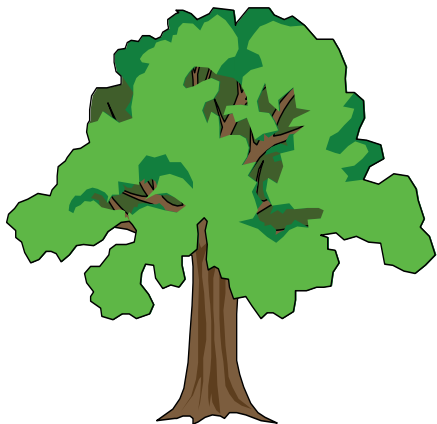
ALLERGIES & HAY FEVER

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Define Hay Fever & Allergy

Hay fever describes the symptoms of runny nose, itchy eyes and throat, uncontrollable sneezing and sometimes itching of the skin. It is **not** caused by hay, and **does not** produce fever. The correct name for the condition is seasonal allergic rhinitis.

Many seasonal “colds” are actually allergic rhinitis, and will not respond to antibiotics. Seasonal allergic rhinitis happens when pollens and/or particles of plant or animal dander, mold spores, etc., come in contact with the lining of the nose, eyes, or throat. The body’s immune system recognizes their presence and starts a reaction to prevent their invasion. In most people this is not a problem. However, in some the immune system is overactive and identifies normally harmless particles as dangerous, producing an excessive reaction that actually causes inflammation. This is known as **allergy** and the substances causing it are **allergens**. People are allergic to only certain substances, and the reaction does not usually appear until after several exposures to that substance.



THE CAUSES

Hay fever is caused by pollens, the most significant in the United States is ragweed. It begins pollinating in late August and continues until the first frost.

a. Early springtime hay fever is most often caused by pollens of trees such as elm, maple, birch, poplar, beech, ash, oak, walnut, sycamore, cypress, hickory, pecan, cottonwood, and alder.

b. Late spring pollens come from the grasses, i.e. timothy, orchard, red top, sweet vernal, Bermuda, Johnson and some bluegrasses.

c. Colorful or fragrant flowering plants rarely cause allergy because their pollens are too heavy to be airborne.

Certain allergens are always present. These include house dust, household pet danders, foods, wool, various chemicals used around the house, and more. Symptoms from these are frequently worse in the winter when the house is closed up.

Mold spores cause at least as many allergen problems as pollens. Molds are present all year long, and grow outdoors and indoors. Dead leaves and farm areas are common sources for outdoor molds. Indoor plants, old books, bathrooms, and damp areas are common sources of indoor mold growth. Molds are also common in foods, such as cheese and fermented beverages.

CAN ALLERGIES BE SERIOUS?

Allergic patients show reduced resistance to respiratory infections, and more severe symptoms when infections occur. Allergies are rarely life threatening, but often cause lost work days, decreased work efficiency, poor school performance, and a negative effect on the enjoyment of life. Considering the millions spent on anti-allergy medications, and the cost of lost work time, allergies cannot be considered a minor problem.

WHY SEE A DOCTOR?

The ENT specialist (otolaryngologist) will do a complete examination of your ears, nose, throat, head and neck. Careful evaluation of the sinuses will enable him to determine if infection or structural abnormalities (deviated septum, polyps) are contributing to your symptoms.

TREATMENT

A number of medications are useful in the treatment of allergy including antihistamines, decongestants, cromolyn, and cortisone-type preparations. The medical management of allergy also includes counseling in proper environmental control. Based on a detailed history and thorough examination, your doctor may advise testing to determine the specific substances to which you are allergic. The methods employed by your otolaryngologist will indicate the materials to which you are allergic, and the degree of your sensitivity to them.

Desensitization for inhalant allergens is the administration of injections, which build up protective antibodies to specific allergens (pollens, molds, animal dander’s, dust). Testing can be done to identify the specific causes of your allergy using either skin or blood tests. Once your doctor knows what you are allergic to and the degree of your sensitivity you begin treatment with allergy shots. The allergy injection is started at the highest safe dosage on weekly intervals. As you reach a maintenance level it can be stretched to two, three, even four week intervals. Allergy injections may produce visible improvement within a few weeks of starting therapy. The shots must be continued on a regular basis for three-to-five years, to give more permanent relief.

Your physician will oversee your progress throughout the course of treatment and care for any other nasal and sinus disorder that may contribute to your symptoms.