

pring is in
the air, but if
you're allergy-prone,
tree and grass
pollens can put a
damper on your fun.

One out of six Americans suffers from allergies or asthma. The afflicted spend more than \$1 billion each year to stop their sneezes and sniffles. In fact, allergies and asthma are the number-one reason people miss work in the United States.

## What Causes Allergies?

An allergic reaction occurs when your body's immune system, which normally sends out antibodies to fight harmful viruses or bacteria, overreacts to such harmless substances as pollen, dust, or certain foods. You make contact with allergens (allergycausing substances) by breathing, eating, or touching them. The reaction between allergens and antibodies triggers the release of potent biochemicals, such as histamine and leukotrienes, which prompt the following familiar allergy symptoms:

- Coughing
- Itchy eyes, nose, and throat
- Hives and other skin rashes
- Diarrhea, cramps, or vomiting

- Sneezing, which may be combined with a runny or stuffy nose
- Asthma (wheezing or shortness of breath caused by spasms of the bronchial tubes).

You can blame most allergies on wind-borne pollens from trees and grasses in spring, ragweed pollen in late summer, and mold spores in summer and fall. House dust, however, does its dirty work year-round.

Other allergens include the following: feather pillows, wool clothing, bee venom, poison ivy, penicillin and other drugs, pets, and certain foods.

#### **Born to Sneeze?**

Allergies can crop up or disappear at any age, but the tendency to get them is inherited. They usually develop from repeated exposure to allergens.

Most allergies to pollens, molds, and dust show up before age 40, according to Jordan N. Fink, M.D., chief of allergy and immunology at the Medical College of Wisconsin. Children are more likely than adults to have food allergies, though they often outgrow them. Drug allergies, on the other hand, are most common in young and middle-aged adults.

# What Are You Allergic To?

If you suspect you have an allergy, note when you experience symptoms. Your family doctor or allergist will combine this information with your complete medical history, including dietary and environmental factors, to get an idea of which allergens might be causing your symptoms.

Skin or blood tests can help identify allergens. If your symptoms occur in early spring, for example, your doctor may test you for allergies to the tree pollens prevalent in your area. For skin tests, diluted extracts of each suspected allergen are applied through either a scratch or an injection beneath the skin of the arms or back. If the test site swells and reddens, a sensitivity to that particular allergen is likely. Interpretation can be tricky, however, because you may test positive for an allergen that is not currently causing your symptoms.

Doctors may use the radioallergosorbent (RAST) blood test to detect high levels of immunoglobulin E (IgE) antibody in relation to a particular allergen, indicating a possible allergy. But because RAST is costly, takes several days to yield results, and cannot reliably detect food and insect allergies, skin testing is usually preferred, according to Martha White, M.D., of the National Institute of Allergy and Infectious Diseases.

## Can You Outwit Your Enemy?

Maybe. If you know what you are allergic to, your best strategy is to dodge the allergen. Easier said than done. You may not want to give up your cat, for instance, but at least banish him from the bedroom, where you usually spend a third of your time. If you're allergic to pollen, stay indoors on dry, gusty days, when the pollen count is highest. During ragweed season the lowest pollen count can be found in southern Florida or California (see map of ragweed distribution).

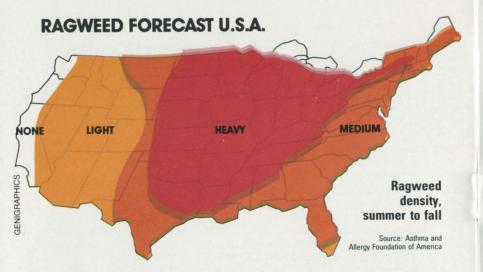
Permanent moves won't solve the problem, however, because most allergic people eventually develop allergies to the new locale's pollens.

Try to avoid air pollutants, such as tobacco smoke and car fumes, as well as irritants like insect sprays and fresh paint or tar; those can aggravate already inflamed nasal, eye, and throat membranes. Ozone (an atmospheric gas) and high humidity can also worsen your symptoms.

If molds make you miserable, have someone else mow the lawn. Molds thrive in damp places, so put a dehumidifier in your basement. Be sure to frequently empty the water and clean the machine, especially before storing. Change the water often in your humidifier, too; it's a prime environment for mold growth.

Because molds can grow on





houseplant soil, "a mold-allergic person should not dwell in a house full of plants," says White. Your dog or cat can cause problems, too, by carrying mold spores into your house.

If dust is your downfall, try to keep your house, especially your bedroom, as dust-free as possible. Here's how:

- Cover your mattress with an allergen-proof cloth or plastic.
- Don't store things under the bed or keep books in your bedroom.
- Avoid dust-catching shag carpets, Venetian blinds, ornate furniture, and knickknacks.
- Dust daily with a damp cloth or oiled mop (wear a pollen mask, available at most drugstores).
- Use air conditioners to reduce the amount of pollen, dust, and mold spores circulating in your home. Change the air filters in heating and cooling systems periodically, too.

### Do Drugs Help?

If you can't avoid allergens, you may find relief with over-the-counter (OTC) or prescription drugs. Always follow your doctor's instructions and the product label's directions carefully. Pregnant women and nursing mothers should *never* take medications without a doctor's approval.

Antihistamines. OTC or prescription pills and syrups are available to relieve the sneezing and itching in your nose, throat, and eyes and reduce nasal swelling and drainage. They can also reduce the swelling and itching of allergic reactions to insect bites and poison ivy. Antihistamines work by blocking the action of histamine, which brings on allergy symptoms. Important: Most antihistamines can cause drowsiness, so don't drive or drink alcoholic beverages while taking them. A new antihistamine containing terfenadine doesn't cause drowsiness, but it's expensive and works best against mild allergies.

Nasal decongestants. OTC sprays or pills help unplug a stuffy nose. These drugs constrict the blood vessels in nasal tissue, lessening swelling and mucus. Warning: Frequent or prolonged use of decongestant nasal sprays can cause a rebound effect, making your congestion worse.

Cromolyn sodium. This prescrip-

tion drug, administered by inhaler, nasal spray, or eye drops, can treat allergic symptoms and asthma, but it is expensive and must be used for several days or even several weeks before it relieves symptoms.

Theophylline and beta-adrenergic agents. These prescription drugs offer prompt relief for shortness of breath, wheezing, and other chronic asthma-related symptoms when given orally or by injection.

Corticosteroids. Taking oral or inhaled prescription corticosteroids before exposure to an allergen can prevent asthma and other allergy symptoms. Corticosteroids should be used briefly because of side effects like high blood sugar, says David Glassner, M.D., of the American Academy of Allergy and Immunology. The inhaled form is safer because it's not as well absorbed by the body.

# Should You Get Allergy Shots?

If you can't escape the allergens that you react to and medications don't relieve your symptoms, allergy shots, or immunotherapy, may help. They curtail allergy symptoms by building up your immunity to trouble-causing allergens. Your physician injects ex-

tracts of the allergens under your skin once or twice a week, gradually working up to larger, less frequent doses. Allergy shots are nearly 100 percent effective in relieving allergies to the venom of bees and other stinging insects, but they're less successful in managing asthma and allergies to pets or dust. Shots for pollen allergies give relief to three out of four pollen sufferers.

Allergy symptoms sometimes improve within a year of taking allergy shots, but usually aren't greatly relieved until after two or three years of treatment. And symptoms may reappear once allergy shots are discontinued. In most cases, your doctor can tell by reviewing your history whether allergy shots will help you.

#### Is There a Cure?

No, but better treatments for allergies are just around the corner. A new ragweed extract for immunotherapy, for example, may soon be released, providing immunity quicker with far fewer injections or side effects. Also being developed are drugs that will act against leukotrienes and other biochemicals, just as antihistamines block the action of histamine. If your allergies aren't something to sneeze at, take heart; relief is on the way.

By Margie Patlak. Cover photography by Lynn Goldsmith

Executive Vice-President/Publisher: Edward H. Winter Vice-President/Executive Editor: Wayne Christensen

EDITORIAL: Editor: Linda Piepenbrink; Senior Editor: Phyllis Malanka; Editorial Assistant: Healther Joslyn; Editorial Coordinator: Cindy Morda; Administrative Assistant: Debbie Sharp; Secretary: Deborah Grelle

ART: Design Director: Jim Darilek; Art Director: Susan Rouse Lyday; Associate Art Director: Carol Williams; Design Assistant: Richard Bates; Paste-Up Specialist: Jane McElroy; Photo Researcher: Kathy Getsey

MARKETING: Director: Scott Helbing; Coordinator: Beth Brock Wright; Administrative Assistant: Brenda Verna

FIELD OPERATIONS: Service Director: Clay Shwab; National Field Services Managers: Bill Gildner, Emilie Sower, Service Manager: Ann Pendley; Administrative Assistant: Allison Armes

PRODUCTION: Managing Editor: Karen Richardson; Copy Chief: Evelyn Herald; Copy Editor: Cynthia Cotter; Research Chief. John Yates; Researcher: Lynne Bower; Production Coordinator: Sheila Thigpen; Graphics Equipment Operator: Katle Musgrave

This booklet is part of the Health '87 Information Center. © 1987 Whittle Communications L.P. 505 Market St., Knoxville, Tenn. 37902. Reproduction without written permission is prohibited

Whittle