

THE ALLERGY & ASTHMA CLINIC

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NEWSLETTER

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Having an egg allergy is usually not a reason to avoid getting the 2010-2011 flu vaccination.

According to new recommendations by the American Academy of Allergy, Asthma & Immunology, anyone with a history of suspected egg allergy should first be evaluated by an allergist for appropriate testing and diagnosis but can probably receive the flu vaccination.

Matthew J. Greenhawt, M.D., clinical lecturer at the University of Michigan Health System and James T. Li, M.D., Ph.D., chair of the Division of Allergic Diseases in the Department of Internal Medicine at Mayo Clinic, co-authored the guidelines based on recent studies which show that most egg-allergic individuals can receive the flu vaccine safely under the care of their allergist.

In the past, people with egg allergy were told not to get the influenza vaccine because the vaccine contained egg protein and could trigger an allergic reaction. Research in the past year shows that influenza vaccines contain only tiny amounts of egg protein. Clinical studies have shown that the vast majority of persons with egg allergies did not experience a reaction when immunized with the influenza vaccine.

The safety of administering egg-containing immunizations to egg-allergic children and adults received new interest during the recent global pandemic of the H1N1 Influenza A virus in 2009-2010. The H1N1 Influenza A vaccine (H1N1), like the seasonal Trivalent Influenza Vaccine (TIV) is grown on embryonated chicken eggs, which led to concerns that residual contamination of ovalbumin (egg protein) could provoke an allergic reaction in people with egg allergies. The 2010 influenza vaccine has incorporated the H1N1 strains. A single TIV (flu shot) is being offered this season.

Historically, though caution has been recommended in administering influenza vaccine to egg-allergic individuals, previous experience suggests that many

people with diagnosed or suspected egg allergy can receive influenza vaccination successfully, if precautions are followed. Examples of precautions that have been used include vaccine skin testing, a 2-step graded dose (10 percent, followed by 90 percent of the age appropriate dose after a brief observation period), or stepwise desensitization.

Given the urgency to protect children last year from the global influenza pandemic, investigative groups have re-examined the issue of the safety of this vaccine in egg-allergic people, and the field has advanced significantly since the last influenza season.

According to the new recommendations, the authors no longer recommend the routine practice of skin testing to the seasonal Trivalent Influenza Vaccine (TIV), although it may still be recommended as an extra level of caution in cases where the patient has a documented history of a past allergic reaction to the vaccine or a severe egg allergy.

Anyone with a history of suspected egg allergy should first be evaluated by an allergist for appropriate testing and diagnosis. Patients with a confirmed egg allergy can then receive the vaccine safely using one of two protocols: a two-step graded challenge or a single, age-appropriate dose.

"It is not necessary to withhold influenza vaccination from egg-allergic patients," Dr. Greenhawt said. "Our recommendations provide two flexible approaches to vaccination. Each approach is backed with recent evidence that it is safe. Most allergists should be able to identify with one of our recommended approaches, and be able to vaccinate their egg-allergic patients with confidence."

What does this mean for you? If you or a loved one have a history of egg allergy and have been avoiding getting a flu vaccine, the odds are very high this is no longer necessary. Please contact our office so we can set up an appropriate

evaluation and determine if you belong to the vast majority of egg allergic patients who can safely receive the flu vaccination.

Have Asthma? Vitamin D May Help

Supplement your asthma action plan with Vitamin D and you may experience improved asthma control according to an article recently published in *Annals of Allergy, Asthma & Immunology*. "There is a possible cause-and-effect relationship between vitamin D deficiency and uncontrolled asthma," said allergist Manbir Sandhu, MD, lead author. "Evidence suggests that vitamin D has a number of biologic factors that are important in regulating key mechanisms in asthma." The authors conducted a review of almost 60 years of literature on vitamin D and asthma. According to the article, vitamin D deficiency is associated with increased airway hyper-responsiveness, lower lung functions, and inferior asthma control. Vitamin D deficiency is more common with obesity, in African American ethnicity and westernization of countries reflecting a higher-risk population for asthma. The authors recommend that long-term interventional trials be conducted in asthma patients.

"Vitamin D can complement your prescribed asthma treatment plan as it has been shown to have some anti-inflammatory properties, but should never be used as an alternative to prescribed medication," said allergist Thomas Casale, M.D., co author.

"Asthma is a serious and sometimes life threatening disease and needs to be treated that way. Always discuss use of supplements with your allergist. It's important to know that if you have asthma, you should be able to feel good, be active all day and sleep well at night," said Dr. Casale. "If you're not, make an appointment with your allergist for a 'tune-up' visit."