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UT Southwestern allergist offers coping strategies for relief from summer allergens

DALLAS – June 13, 2006 – The good news for allergy sufferers is that springtime mountain cedars and tree pollens have generally subsided.

The bad news: It's summertime.

"For summer, it will be grass pollen along with high ozone levels combining for a one-two punch," said Dr. David Khan, associate professor of internal medicine at UT Southwestern Medical Center. "In July, cedar elm will appear."

While heat doesn't influence the amount of pollen in the air, it does aid in the formation of ground-level ozone, which, in turn, can exacerbate allergy symptoms.

To cope, Dr. Khan, who also directs the asthma clinic at Parkland Memorial Hospital, offers these tips:

- Limit outdoor exposure during peak times from mid-morning to midday.
- Air-conditioning filters out some allergens. Keeping windows closed lessens the amount of allergens that travel into the home.
- If you're out for long periods during the day, take a shower before bedtime to wash off some of the allergens and prevent them from being transferred to pillows. "Your hair can be like a pollen magnet," warns Dr. Khan.
- Wear a mask while mowing the lawn or doing yard work.
- Take allergy medications before you go outside, so they have time to work into your system.

Choosing the right medications to help control symptoms is important, Dr. Khan said.

Antihistamines are the most common medications used for allergies. They can help relieve itching, sneezing and runny noses, but don't generally help with stuffiness. Oral decongestants like pseudoephedrine generally work for stuffy noses.

Topical decongestants – nose sprays – aren't a good long-term solution because you can become addicted to them, causing nasal passages to swell even more and possibly resulting in other (MORE)

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nasal problems as well.

If symptoms aren't subdued or allergies are interfering with your lifestyle or work, it's probably a good time to find an allergy specialist and see if other treatments may help.

"It's reasonable to try some of the over-the-counter drugs first, and if you're not satisfied with those results, then you need to see a doctor," Dr. Khan said.

At UT Southwestern, patients can be evaluated by UT Southwestern allergists in clinics at the James W. Aston Ambulatory Care Center, Parkland and Children's Medical Center Dallas, where doctors treat airborne and environmental allergies or asthma, food and drug allergies, and conditions like hives and allergic reactions.

Prescription antihistamines can offer more potency and be less sedating than over-the-counter measures, Dr. Khan said.

Corticosteroid anti-inflammatory nasal sprays can be used regularly, often once a day, and are generally safe and effective. These are not the same as anabolic steroids that athletes sometimes abuse and for which some school systems now test.

Antihistamines, decongestants and corticosteroids, however, do no more than depress symptoms. "Although you'll be reducing the effect of the allergic reaction, you'll still be just as allergic at the end of the day," Dr. Khan said.

Shots are the most effective medical treatment, he said, actually making allergy sufferers less allergic.

There's also a novel clinical approach, called rush immunotherapy, which simply means taking more shots over a shorter period of time. Doctors think this may help expedite results.

For more information or to schedule an appointment in the UT Southwestern allergy and immunology clinic for a patient 6 and older, please call 214-648-3678.

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