



## Allergic to commitment

***Australian experts say the nation has given allergies too low a priority, and as a result people are suffering and at risk.***

*World Allergy Week, 13-19 April 2015*

“The figures are of great concern,” says leading clinical immunology/allergy specialist Associate Professor Richard Loh, who chairs the National Allergy Strategy committee.

**“Allergic diseases are among our fastest growing chronic conditions.** More than 4 million Australians have one or more allergic diseases and this is increasing. Hospital admissions for anaphylaxis (severe life threatening allergic reactions) have quadrupled over the last 20 years, food anaphylaxis has doubled in the last 10 years and 10% of infants now have an immediate food allergy.”

“Even something that many people feel is trivial – allergic rhinitis (hay fever) - causes significant illness,” claims Maria Said, deputy Chair of the National Allergy Strategy committee and President of Allergy & Anaphylaxis Australia. “An astounding 80% of people who have persistent asthma also have allergic rhinitis, which if treated helps their asthma. Many in the community, even some health professionals don’t appreciate that **treating hay fever can actually prevent asthma developing** if it’s done early enough. We also know that having asthma and severe food allergy increases the risk of fatal anaphylaxis. And most Australians face a wait of many months to see a specialist with expertise in allergy, if they can access care at all ”

“You might think my story is unusual, but it isn’t,” says Kate Neville, a 24 year old communications professional who suffers from chronic allergies. “My hay fever, when it’s bad, is like walking around in a fog. You go from feeling totally fine and within a few minutes you’re experiencing the day 2 symptoms of a cold. I also have potentially life threatening food allergies, which are the biggest grind on my social, emotional and financial wellbeing.”

“And it’s not as if we don’t have some of the answers, We know that early diagnosis, prevention and effective treatment of allergic diseases is vital to halting the rapid increase in allergic diseases in Australia” says Associate Professor Loh who is also immediate past President of the Australasian Society of Clinical Immunology and Allergy (ASCIA).

“Governments need to recognise allergic diseases as a significant chronic disease group in Australia. If this is acknowledged, then we can mobilise resources for prompt diagnosis, prevention, effective treatments and models of care that give people access to timely and affordable care. It’s about leadership and recognition.”

“The cost of allergies to the Australian economy is more than \$7 billion per year, and significant cost savings could be made by Governments supporting the implementation of the first National Allergy Strategy for Australia” argues Maria Said. “

“There's not even consistency when it comes to education or support,” says Kate. “There’s too much reliance on individual doctors or passionate parents. It’s well-meaning but not enough.”

ASCIA, as a member organisation of the World Allergy Organisation (WAO), is involved in the 4th annual World Allergy Week from 13 to 19 April 2015, with the theme of: Airway Allergies – The Human and Economic Burden.

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## Background

### The National Allergy Strategy

More than 4 million Australians are affected by allergic diseases, one of the fastest growing chronic conditions in Australia. Allergic diseases include anaphylaxis, eczema, allergic rhinitis (hay fever), sinusitis, allergic asthma, food allergy, insect allergy and drug allergy. Access to appropriate and timely medical care for patients with allergic diseases is difficult, due to the high prevalence and relatively low numbers of specialists in this area, particularly in rural and remote regions.

To address this problem, the Australasian Society of Clinical Immunology and Allergy (ASCIA) and Allergy & Anaphylaxis Australia (A&AA), as the leading medical and patient organisations for allergy in Australia, are developing the **first National Allergy Strategy for Australia**, in collaboration with more than 50 other key stakeholder organisations. The Strategy will promote a model of shared care for allergic diseases, which should improve much needed access to care in all regions.

Further information is available at: [www.allergy.org.au/national-allergy-strategy](http://www.allergy.org.au/national-allergy-strategy)

### Fast Facts

- **Allergic diseases are among the fastest growing chronic conditions in Australia.**
- Almost 20% of the Australian population has an **allergic disease** and this prevalence is increasing.

- Allergic diseases include eczema, allergic rhinitis (hay fever), sinusitis, allergic asthma, food allergy, insect allergy, drug allergy and potentially life threatening anaphylaxis. Multiple allergic diseases commonly occur in the same individual and therefore management can be complex.
- Hospital admissions for **anaphylaxis** (severe life threatening allergic reaction) have increased 4 fold in the last 20 years.
- **Food-induced anaphylaxis** has doubled in the last 10 years and 10% of infants now have an immediate food allergy.
- There is a lack of public awareness about the impact and **appropriate management** of allergic diseases.
- We have excellent treatments that are under utilised - some of which can potentially prevent the development of asthma. For example, patients with allergic rhinitis (hay fever) given immunotherapy (immune 'training' to reduce allergic sensitivity) have a 50% reduction in their risk of developing asthma
- **Access to care** is difficult, even in metropolitan areas, due to the high number of patients and low number of appropriately trained health care professionals, resulting in long waiting times to see a specialist.
- **Allergic rhinitis (hay fever)** is an allergic chronic inflammation of the nose. The most common symptoms of allergic rhinitis are sneezing, runny nose, nasal congestion, nasal and ocular itching and watering of the eyes. Other associated symptoms include headache, facial and ear pain. Other illnesses that go along with allergic rhinitis include: sinusitis, conjunctivitis, otitis media with effusion, upper respiratory infections, and sleep disorders. Allergic rhinitis is also a risk factor for asthma. The prevalence of asthma in patients with rhinitis ranges from 10 to 40%; conversely up to 80% of patients with persistent asthma have allergic rhinitis. Treating allergic rhinitis has been shown to improve asthma.
- **What are the triggers and aggravating factors of allergic rhinitis?**  
Besides indoor allergens (house dust mites, pet dander, moulds) and outdoor allergens (pollens from trees, grass and weeds) a variety of other factors like environmental pollutants (indoor tobacco smoke and chemicals) and outdoor air pollution resulting from vehicular emissions, diesel exhaust particles and industrial pollutants can aggravate allergic rhinitis and asthma.

Allergic rhinitis reduces work productivity, learning performance and interferes with social interactions. It also has psychological effects, and creates a burden not only for the affected subject, but also for the family and for the society at large. Management is based on patient education, environmental control measures (allergen minimisation or avoidance), appropriate medications and allergen specific immunotherapy.

## Worldwide

Allergic rhinitis affects 400 million people and asthma affects 300 million people globally and the prevalence rates of both are increasing.

## World Allergy Week

The World Allergy Organization is hosting the 4<sup>th</sup> annual World Allergy Week from 13 to 19 April 2015 on the theme of: Airway Allergies – The Human and Economic Burden.



australasian society of clinical immunology and allergy

The Australasian Society of Clinical Immunology and Allergy (ASCIA) was established in 1990 as a not for profit, peak professional medical organisation for allergy and clinical immunology in Australia and New Zealand. ASCIA members include specialist allergy and immunology physicians, other medical practitioners, scientists and allied health professionals who work in the areas of allergy and immunology.

The mission of ASCIA is to advance the science and practice of allergy and clinical immunology, by promoting the highest standard of medical practice, education and research, to improve the health and quality of life of people with allergic diseases, immunodeficiencies and other immune diseases.

For further information go to: [www.allergy.org.au](http://www.allergy.org.au)



Allergy & Anaphylaxis Australia (A&AA) was established in 1993 as a charitable, not for profit organisation, to improve awareness of allergy and anaphylaxis in the Australian community, by sharing current information, education, advocacy, research, guidance and support.

A&AA is primarily a volunteer based organisation that is supported by membership fees, sale of resources and donations. Their outreach extends to individuals, families, school, workplaces, health professionals, government, food industry and all Australians.

A&AA is part of an international alliance of similar organisations and works closely with peak medical bodies, including ASCIA. Their medical advisory board comprises ASCIA members who are specialist immunology and allergy physicians from across Australia.

For further information go to: [www.allergyfacts.org.au](http://www.allergyfacts.org.au)