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# Allergies

Fresh on the heels of the Dallas Morning News making my point for this article, I can breathe a sigh of relief. You see, I had been struggling with several very interesting topics as potential articles but this front page news item "sealed the deal". Now, some if not most of what I'm about you'll have seen on these pages already, but with a looming allergy season that portends to be nasty, I felt this deserving of discussion.

I guess the best way to describe the forthcoming allergic events would be to call it a "perfect storm" of sorts. The News summarized it well: a combination of a dry, warm winter with strong winds out of seemingly everywhere is leading to likely misery for a lot of us in North Texas. But if any good can come of this is the fact that there's ample time to do something about it- that "it" means treatment, of course, but, even better, prevention.

There is absolutely no need for anyone with seasonal allergies to endure the suffering. With the availability of so many preventive treatment options out there, it's frankly surprising to me when my colleagues and I see the inevitable tide of patients, sniffling and sneezing unnecessarily. I will again stipulate for the record that doctors' offices are not fun and no one looks forward to visiting them. That said, when compared to the relentless, daily assault a lot of us go through, it's a small price to pay for relief.

When it comes down to it, "allergies" are just a series of events triggered by an overeager immune system whose end product results in your misery. What your doctor can do to help you is to thwart the response your body has to pollen/dander, etc. by the administration of medicines designed to affect the immune cascade - BEFORE you "feel" your allergies. This can be done by anti-histamines (Allergra and others), inhaled steroids (Flonase, for example), or leukotriene inhibitors (Singulair). One or all can be used/combined to blunt the allergic reaction. Allergy shots, i.e. immunotherapy, are usually reserved for severe cases or those patients that have tried all of the above and failed to achieve good therapeutic response. What works best really depends on you and your doctor working together and finding the best combination. In other words, what works for YOU may not work for you. Regardless of methodology, treatment isn't really optional - there's pretty good evidence out there that relegates allergies to a not-so-benign status. Studies have demonstrated that severe allergies can lead to the development of asthma- that's right, asthma. That includes folks who've never been had symptoms of asthma before! This is based on the similarities that allergies and asthma share in terms of how they develop and how, when "mature", they affect your respiratory tract. Asthma, however, is a whole different ballgame - it can kill. Morbid, yes, but very true.

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The moral- don't wait. Take the fight to the allergies. And, no, not everyone needs to be "tested". Empiric treatment is the norm. If you eventually need injections as part of your treatment, then testing is mandatory to find the best course of treatment. Whatever said treatment is, it all starts with "the team"- you and your doctor. You know how miserable you can feel. Do you honestly want that, especially knowing how easy it is to avoid? Well, then, why aren't you picking up the phone for an appointment? Rhetorical question, folks.

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