The Allergy Battle

A Chronic Disease of Childhood

Dr. Bernard Frugé, shown here with young patient Amy Sydboden, specialized in allergy treatment and immunology as a result of his experience with his own daughter.

avoidance of the substance to which the person is allergic (most important), 2) allergy medicine, and 3) allergy shots, according to Frugé. Shots, however, are generally a last resort for most allergists. Environmental adjustments and medication are always tried first.

Prather finds that only 10 to 20 percent of patients, those with the worst allergies, will have to receive shots. He has not found shots effective for dust mite allergies.

Allergies make people tired and, to further complicate matters, the medication itself can cause additional problems. Doctors have moved away from oral medications toward inhaled medicines. They are also alert to any medicines that might stimulate the heart.

According to the National Institute of Health, the undertreatment of asthma, a lung condition often caused by allergy, is far more dangerous than its overtreatment. "There has been an increase in the number of deaths from asthma since 1975—almost up to where it was in the '60s," Frugé says.

The book A Parent's Guide to Asthma, by Nancy Sanders, notes that asthma is the most common reason children have to be hospitalized, up 225 percent since 1969 and up 67 percent for adults. No one knows the reason for the dramatic increase.

Sometimes adolescents are irritable with their asthma and they under-report it. Pollution also contributes to this ailments.

BY OLIVIA PASS
people to smoke in the house or around the children who are allergic/asthmatic.

Parents who have children with dark circles, folds of skin under the eyes, the crease across the bridge of the nose, breathing problems, or chronic stomach cramps might want to take their children to an allergist who can, by means of skin tests, determine the child's allergies. The skin tests expose the children to tiny amounts of things they might be allergic to. If they are allergic, a bump appears and the reddened area determines whether a positive reaction (allergy) has occurred.

In the scratch/prick test, allergens are applied to tiny scratches that are so subtle that they do not even draw blood. The child feels only a slight prick. These tests may be only on the arms or may be on the back as well. The reaction generally occurs within five to 15 minutes.

After determining what the patient is allergic to, the three A's of allergy treatment may then proceed. Parents who have had children with severe allergies have been both amazed and delighted at the changes in both personality and health that take place after proper diagnosis and treatment.

Information regarding a child's allergies should be shared with the school-age child's teacher(s), principal and counselor so they can help in the school environment.

Knowledge about allergies is truly the first step in helping those children who suffer so because of them. Prather advises parents not to become discouraged, but to be aware of the symptoms and problems and to seek proper treatment for their children.