

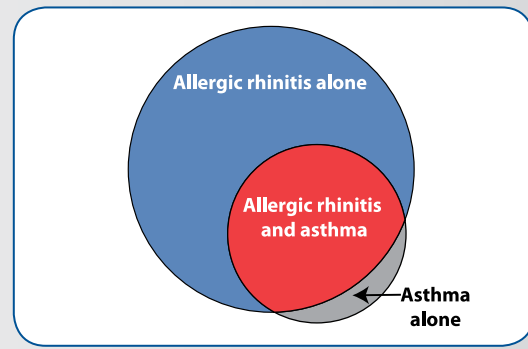


# Asthma

*Patients should be tested to identify allergic triggers—especially patients with rhinitis symptoms!<sup>1,2</sup>*

Symptoms for asthma and rhinitis frequently coexist<sup>3,4</sup>

- Common symptoms include<sup>1-3</sup>
  - Cough      ○ Congestion
  - Wheeze    ○ Rhinorrhea
  - Dyspnea   ○ Postnasal drip
- Up to 90% of asthmatic patients also have allergic rhinitis (AR)<sup>4</sup>
  - Up to 40% of rhinitis patients have asthma<sup>3</sup>

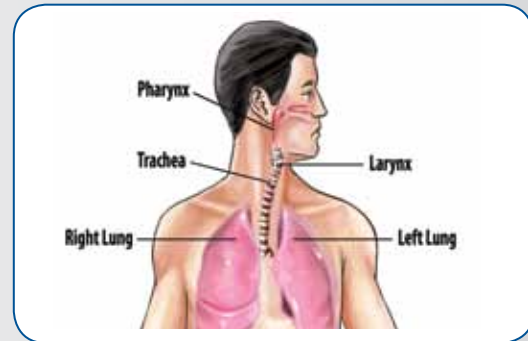


Rhinitis exacerbates the severity of lower respiratory symptoms

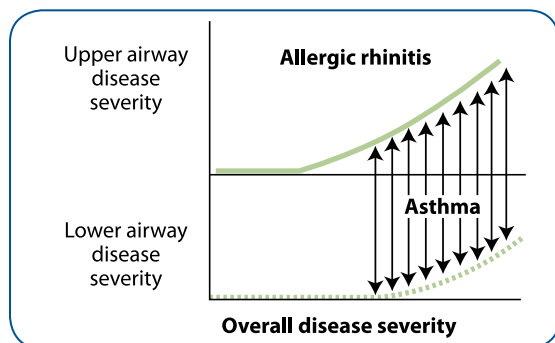
- Asthma and AR are clinical manifestations of exposure to allergic triggers<sup>4</sup>

*“It is important for clinicians to appreciate the connection between upper and lower airway conditions and the part the connection plays in asthma management.”<sup>1</sup>*

—NIH Guidelines



**The more severe the rhinitis, the more severe the asthma<sup>4,5</sup>**



*“[T]reatment of rhinitis can improve the status of co-existing asthma.”<sup>2</sup>*

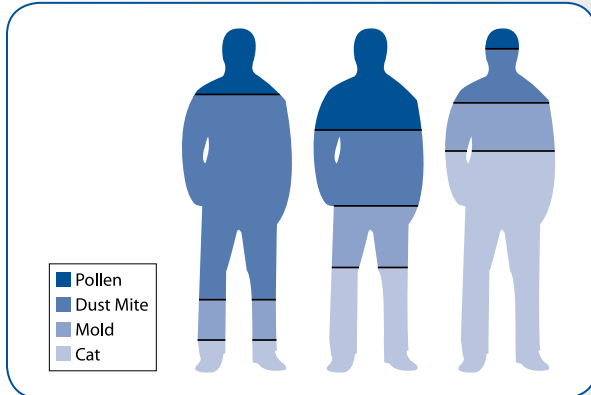
*“[I]t is... imperative that physicians who treat patients with asthma also consider aggressive treatment of co-existing rhinitis.”<sup>2</sup>*

—AAAAI/ACAAI Joint Task Force on Practice Parameters

# When you identify a patient's triggers, you can minimize exposure to allergens and reduce symptoms<sup>1</sup>

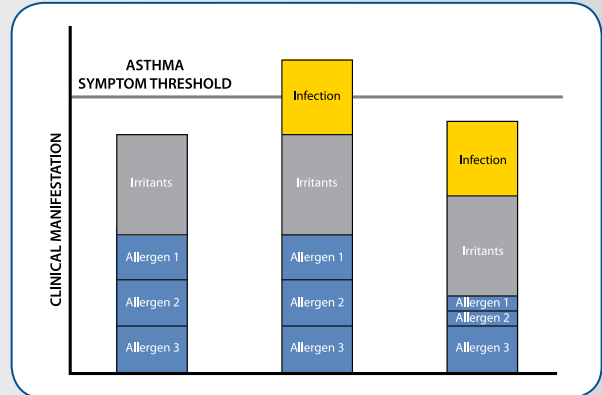
Exposure to allergic triggers is a *modifiable risk factor* for respiratory symptoms

Same allergens... different needs!



Each patient's unique specific IgE profile directs personalized management to reduce symptoms.<sup>6</sup>

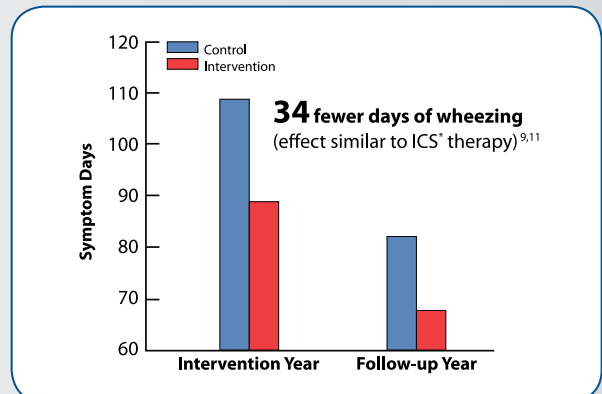
Proactively identify allergens and take action



Causative factors that exacerbate symptoms include allergens, irritants, and infections.<sup>7,8</sup>

## Establishing a safe sleep zone reduces symptoms<sup>9</sup>

- A practical and proven way to reduce environmental allergen load
- Patients spend up to 90% of their time indoors... 2/3 of that time in their homes<sup>10</sup>
- Allergen control measures in home settings, particularly the bedroom, have been proven effective in reducing symptoms<sup>9</sup>



\*ICS = inhaled corticosteroids.

## Do more with ImmunoCAP<sup>®</sup>

- Improve outcomes
- Enhance medical decision making<sup>12</sup>

**References**

1. NIH. *Guidelines for the Diagnosis and Management of Asthma*, 2007. NIH publication 08-4051. 2. Wallace DV, et al. *J Allergy Clin Immunol*. 2008;122(2 suppl):S1-S84. 3. Bousquet J, et al. *Allergy*. 2008;63(suppl 86): 8-160. 4. Peters SP. *J Asthma*. 2007;44:149-161. 5. Togias A. *J Allergy Clin Immunol*. 2003;111:1171-1183. 6. Wickman M. *Allergy*. 2005;60(suppl 79):14-18. 7. Pharmacia & Upjohn Diagnostics. *Diagnostic Clinical Information: The Value of Allergen Identification*. Kalamazoo, MI: Pharmacia & Upjohn Company; 1998. Publication 98006.01. 8. Murray CS, et al. *Proc Am Thorac Soc*. 2004;1:99-104. 9. Morgan WJ, et al. *N Engl J Med*. 2004;351:1068-1080. 10. Wu F, Takaro TK. *Environ Health Perspect*. 2007;115:971-975. 11. Szefer S, et al. *N Engl J Med*. 2000;343:1054-1063. 12. American Medical Association. *CPT 2010 Professional Edition*. Chicago, IL: American Medical Association; 2010.

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