



Recurrent Acute Otitis Media*

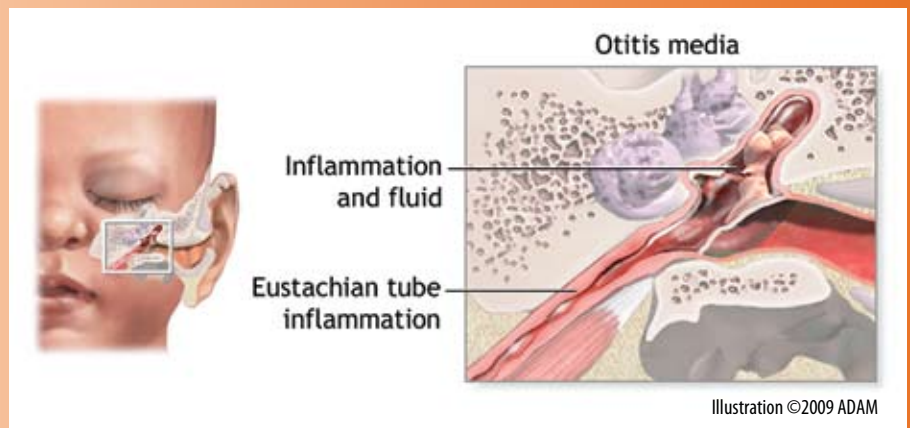
Decrease recurring episodes—you can do more!

1/3 to 1/2 of patients with otitis media with effusion (OME) have underlying allergic disease^{1,2}

Otitis media linked to allergic disease³

Is there an underlying allergic cause?

- Symptoms of atopic and non-atopic otitis media are the same—but the underlying cause is different³
- New research confirms IgE as an important marker for OME¹



Allergic disease and eustachian tube dysfunction increase inflammation, and serous fluid production provides a breeding ground for infection.

Understanding allergic inflammation in the middle ear

- The middle ear and eustachian tube both contain inflammatory mediators⁴
- IgE sensitization is a greater risk factor for OME than daycare attendance¹
- In referral populations, 72% to 93% of children with OME have atopy confirmable by allergy testing⁵
- Children needing ENT procedures may benefit from allergy testing⁶

“[A]ddressing the allergic inflammation in the airway may lead to an improved middle ear response to medical treatment, and ultimately a possible reduction in the number of surgical interventions required.”⁴

— LHP Nguyen, et al

You need to know more to do more!

*≥3 episodes of acute otitis media in the last 6 months or ≥4 episodes in the previous year.^{3,7}

Is underlying allergy contributing to your patient's otitis media?

Test to know!

Implement allergy testing with ImmunoCAP®

- Employ objective evidence to identify allergic triggers
- Implement targeted exposure reduction methods
- Optimize symptom control to reduce recurrence

Tackle underlying disease with targeted allergen exposure reduction

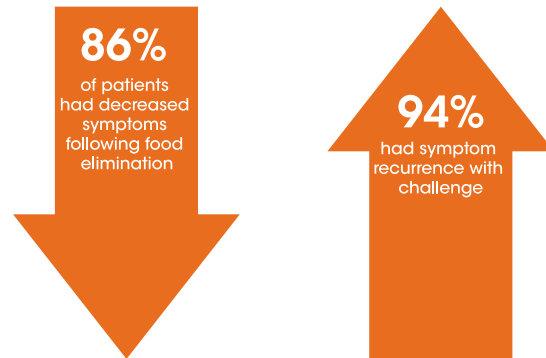


- Reduce symptoms^{3,8}
- Reduce need for antibiotics^{3,8}
- Reduce recurrence⁸
- Reduce need for surgical procedures⁶

Test to know with ImmunoCAP

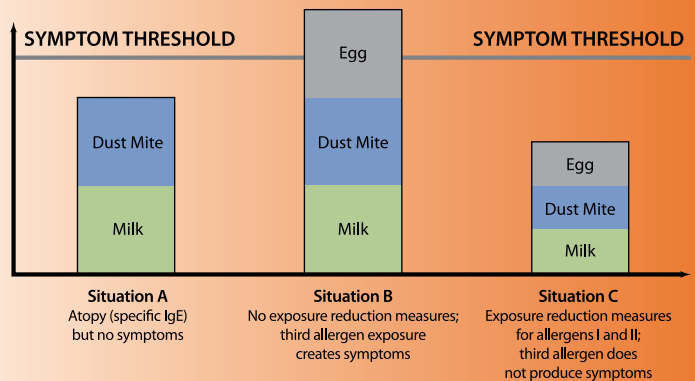
- Pre-selected profiles offered by laboratories test for common inhalant triggers and food sensitivities
- Engineered to detect >95% of patients with allergy¹⁰⁻¹³
- May be used for children as young as 3 months of age
- Testing is easy—requires only a single blood sample

Targeted exposure reduction works in OME⁸



Patients with OME who were allergic and underwent an exclusion diet of the specific offending foods for 16 weeks, followed by food provocation.⁸

A cumulative threshold disease⁹



ImmunoCAP profiles detail specific IgE sensitizations to help you target exposure reduction measures that can reduce the cumulative allergic load to help alleviate or prevent symptoms.¹⁴

References

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You can't know until you test!
www.isitallergy.com

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