Moving on Up! Oklahoma City Moves Up to Number #4

It has been a miserable allergy season already and the Asthma and Allergy Foundation of America (AAFA) just ranked Oklahoma City as the fourth worst city for spring allergies. Tulsa was listed as 19th up from 21st place. Oklahoma City ranked ninth last year. The foundation released its annual Spring Allergy Capital’s report on March 31. This report ranks the most challenging cities to live in for those with allergies.

Why the big leap forward to fourth place?

“The long winter we have experienced, leading up to a dry, windy spring, has caused the tree pollens to explode,” said Dr. Shahan Stutes, OAAC board-certified allergist.

Louisville was the worst city for allergies this year, moving up from 5th place. Communities are ranked on pollen, the number of over-the-counter and prescription medications per patient, and the number of board-certified allergists.

Dr. Florina Neagu Joins OAAC

Oklahoma Allergy and Asthma Clinic (OAAC) welcomes Dr. Florina Neagu who joined the staff in January. She is board certified in Internal Medicine and board eligible in Allergy & Immunology. Dr. Neagu received her Bachelor of Science degree in Physics and Chemistry. She was conferred with her doctor of medicine from the University of Medicine and Pharmacy of Timisoara, Romania in 2000.

“We had a great opportunity to come to the United States and practice medicine.
Spring is in the air and guess what else is lurking? Billions of tiny pollen particles are floating around that trigger allergy symptoms in millions of people. While we are happy for the warmer temperatures and longer daylight hours, many are suffering from seasonal allergic rhinitis, commonly referred to as hay fever.

“Hay fever can truly affect your quality of life,” said Dr. Laura Chong, OAAC board-certified allergist. “It can even lead to sinus infections and disrupt your sleep. It can affect your ability to do well at school or to be productive at work.”

Hay fever symptoms include:
- Itching in the nose, roof of the mouth, throat, eyes
- Sneezing
- Stuffy nose (congestion)
- Runny nose
- Tearing eyes
- Dark circles under the eyes

“Generally there are three pollen seasons, depending where you live,” said Dr. Chong. “The start and end dates of the seasons vary by climate. However, in Oklahoma, our allergy seasons are quite challenging in the spring and fall.”

Tree pollen generally peaks in the spring. Cedar, Oak and Elm are among big tree allergy triggers. Grass pollen peaks in the summer. Timothy, Johnson and Bermuda grasses are examples of allergens in this category. Weeds peak in the fall. Ragweed is the biggest offender as it can grow in nearly every environment. One ragweed plant is estimated to produce up to 1 billion pollen grains.

How do you avoid allergy triggers?

“It is smart to limit outdoor activities during days with high pollen counts,” said Dr. Chong. “Keep your windows closed when you are at home or in your car to keep pollens out. Take a shower after being outside to get the pollen off your body and out of your hair.”

Hay fever cannot be diagnosed by history alone. An allergist can diagnose your allergies and determine the specific triggers that cause them through simple tests and formulate the best treatment plan for you so you can have a better quality of life.

You can follow the Oklahoma Allergy and Asthma Clinic through Facebook and Twitter to keep track of the daily pollen counts and through their website with a link that will describe the top five pollen types in the air.

Dr. Neagu...

where there is very advanced medical care,” said Dr. Neagu.

Her postdoctoral training included completing an internship and residency in Internal Medicine at Weiss Memorial Hospital Program, an affiliate of the University of Illinois at Chicago Medical Center. She completed a fellowship at Rush University Medical Center at Chicago, Department of Medicine/Microbiology – Section of Asthma, Allergy and Immunology in 2012. Her husband is an endocrinologist.

Her passion for the allergy and asthma field came from working as a medical assistant for an allergy practice. During her residency, she did several studies involving allergies including one on penicillin antibiotic allergy.

“After my fellowship, I did a research project at Cook County Hospital in the pediatric allergy and asthma clinic involving low socioeconomic patients with asthma who had Vitamin D deficiency,” she said. “We found that up to 90 percent had Vitamin D deficiency.”

“Oklahoma is a great place to live. As a metropolitan area, it has the right blend of cultural activities, everything you can find in a larger city but with the feel and safety of a smaller place with very nice people. It’s a great environment for your kids to grow. We enjoy outdoor activities including swimming and spending time with our children,” said Dr. Neagu.

Dr. Neagu is a member with the American Academy of Allergy, Asthma and Immunology, American College of Asthma, Allergy and Immunology and American College of Physicians. Dr. Neagu and her husband reside in Edmond with their two sons, ages 6 and 3.
American Lung Association Commends CVS Caremark’s Move to End Tobacco Product Sales

The American Lung Association applauded CVS Caremark for boldly acting to remove tobacco products at all CVS/pharmacy locations across the U.S. Attorney Generals in 28 additional states are asking five other major retailers to follow suit and remove tobacco products from their shelves. Those retailers include Walmart Stores Inc., Safeway Inc., Walgreen Co., Kroger Co. and Rite Aid.

CVS plans to have all tobacco products removed from the stores and to stop selling those products by October. CVS has said they have no place in a drugstore company that is trying to become more of a health-care provider.

Fifty years after the release of the first Surgeon General’s report that linked smoking with cancer and other diseases, tobacco use remains the leading cause of preventable death and illness in the U.S., including lung cancer. Today there are 43.8 million smokers in the country. Tobacco related diseases such as lung cancer, chronic obstructive pulmonary disease (COPD), other cancers, heart disease and stroke kill almost half a million Americans each year.

“Everyone has a stake in reducing tobacco’s terrible toll. By working to reduce access to tobacco products, every person and every company can play a role in helping end this toxic threat,” said Harold Wimmer, president and CEO, American Lung Association.

A Gallup Poll released new smoking rates for each state in March 2014, based on responses to “Do you smoke cigarettes?” by more than 178,000 Americans across 50 states. The national smoking rate is 19.7 and in Oklahoma, the rate is 25.2, making it higher than the national average.

Cigarette smoking and severe asthma - a harmful mix

Twenty to thirty five percent of adults worldwide with asthma are cigarette smokers, rates which are surprisingly similar to the general population. People with mild to moderate asthma who smoke cigarettes have worse symptoms, are more likely to be admitted to the hospital with an asthma attack, and often have a different type of airway inflammation than non-smokers with asthma. Source: American Academy of Allergy Asthma & Immunology.

Study Finds Eating Nuts while Pregnant Doesn’t Raise Allergy Risk

A recent study found that women who eat nuts or peanut butter during pregnancy are not raising the risk that their children will have nut allergies. Research found that pregnant moms who often ate nuts, had children less likely to have problems consuming nuts.

Peanut allergies have been on the rise and affect up to 2 percent of the U.S. population and other Western counties. Previously women were advised to avoid nuts during pregnancy in order to avoid triggering allergies in their children. However, this was later rescinded. Information from studies over the years has presented conflicting reports – to eat nuts or not to eat nuts.

This new study involved more than 8,000 children born to female nurses in a long running study that periodically asked about diet and health habits. The study confirmed that in one group, 140 children were allergic to peanuts or tree nuts such as walnuts, almonds and pecans. Of those children, 58 had mothers who were nut allergic and 82 did not.

The second group studies found that children whose mothers ate nuts at least five times a month were 69 percent less likely to have nut allergies than those whose moms rarely ate nuts.
Study Links Vitamin D Deficiency and Asthma Severity

Studies have linked Vitamin D deficiency to numerous medical conditions including heart disease, diabetes and certain cancers. Interestingly, researchers have also found that Vitamin D deficiency is associated with increased airway reactivity, lower lung function and poor asthma control. These findings were published in the Annals of Allergy, Asthma & Immunology.

Risk factors for vitamin D deficiency include obesity, being African American and living in Westernized countries. These are all populations that are at higher risk for developing asthma.

There are many potential ways that Vitamin D could help with asthma. These include anti-inflammatory effects as well as improved response to inhaled steroids. Vitamin D is made by the body when we are exposed to sunlight. Certain foods such as fish, eggs and diary also contain Vitamin D.

It is not known what that optimal level of Vitamin D is for patients with asthma. “Current studies are investigating the role of Vitamin D supplementation in asthmatics” said Dr. Greg Metz, a board-certified allergist at the Oklahoma Allergy and Asthma Clinic.

Dr. Metz also reminds us to “check with your doctor before starting any vitamin supplements including Vitamin D to make sure it’s the right therapy for you.”

Know Your Count

When you live with asthma, you should Know Your Count

Nearly 25 million Americans have been diagnosed with asthma. While symptoms and severity vary from person to person, asthma can be deadly in some circumstances. Asthma exacerbations, or “attacks,” account for nearly two million emergency room visits every year in this country. Many people with asthma rely on a rescue, or quick-relief, inhaler to improve their breathing when they feel the signs of an oncoming asthma attack.

90%

In a 2003 questionnaire given to 268 patients, 90% of respondents reported that an inhaler with a dose counter would give them added reassurance about medication supply.

A dose counter may help you know how much medicine is left

How could you know if there was medication in your rescue inhaler without a dose counter? Well, you could try to count the doses yourself, and some people do. But most people don’t use their rescue inhalers every day and may lose count of how many doses remain. Currently, more inhalers have developed dose counters to help patients.

8%

A written survey at the Scripps Clinic and Research Center of 63 new and existing patients who used a metered-dose inhaler (MDI) showed that only 8% reported counting the number of actuations used and replaced their inhalers when, or before, the manufacturer’s specified maximum number of actuations was reached.

Shaking it doesn’t work

Many people mistakenly believe that if they can “hear something” in their inhaler when they shake it that it still contains medicine. Likewise, just because an inhaler is still spraying does not mean it still contains medicine. When an inhaler is out of medicine, it will often spray a “propellant” that is used to help get the medicine to your lungs, even if the inhaler is out of medicine.

40%

As many as 40% of patients believe they are taking their asthma medication when they are actually using an empty or nearly empty inhaler.

A dose counter is the best way to keep track

Life often gets in the way, so don’t leave your dose count to chance. If you want to know how much medicine remains in your rescue inhaler, you should rely on a dose counter. Ask your doctor to prescribe a rescue inhaler that helps you Know Your Count.

54%

Of 63 asthma patients who completed a written survey at the Scripps Clinic in La Jolla, California, 54% reported that they did not know the number of labeled actuations available in their devices.