Breakthrough Study on Peanut Allergy
Can Peanut Allergy be Prevented?

A breakthrough study named LEAP (Learning Early About Peanut Allergy) was recently published in the New England Journal of Medicine. The goal of the study was to investigate whether early consumption of peanuts could prevent the development of peanut allergy. This study is particularly timely and important as the prevalence of peanut allergy has increased considerably over the last 20 years and peanut allergy is the most common cause of food-related anaphylaxis.

In this study, investigators enrolled subjects between the ages of 4 and 11 months who had never experienced an allergic reaction to peanuts but were at risk for peanut allergy (those with severe eczema and/or egg allergy). After allergy testing, the infants were randomly assigned to either avoid peanuts (avoidance group) or to eat peanuts (consumption group).

The children were followed until they were 5 years old and then underwent peanut challenges to determine if they were allergic. Interestingly, 17.2 percent of children in the avoidance group were peanut allergic at 5 years, compared to only 3.2 percent in the consumption group.

The LEAP study subsequently concluded that early introduction of peanuts appeared to decrease the likelihood of developing peanut allergy in at-risk children.

Although these results are groundbreaking, there are several important points to remember. First, the study did not investigate treatment for food allergy, but rather how to prevent food allergy from developing in the first place.

Second, the children in the study were deemed high risk for peanut allergy; it is unknown whether these results would apply to infants without severe eczema or egg allergy. Next, further studies are needed to determine if early introduction of other allergenic foods such as eggs, milk or wheat will also yield similar results.

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Spring Allergy Capitals Announced
OKC 3rd
Tulsa 12th

Asthma and Allergy Foundation of America (AAFA) released its annual Spring Allergy Capitals™ report ranking the 100 most challenging places to live with spring allergies in the U.S. on April 2. This year’s report named Jackson, MS as the #1 Spring Allergy Capital, based on higher than average pollen and higher than average medication usage. The other top ten cities include #2 Louisville, Ky; #3 Oklahoma City, Okla.; #4 Memphis, Tenn.; #5 Knoxville, Tenn.; #6 McAllen, Texas; #7 Wichita, Kan.; #8 Dayton, Ohio; #9 Providence, RI; #10 Richmond, Va. Tulsa was in 12th place up from 19th place last spring.

Out with the cold, in with the “achoo!” People across the United States are looking forward to the warmer weather, new and invigorating plant life, and the long-delayed exit of winter. But, more than 45 million Americans with
**OAAC Staff Spotlight**

John Harris

**Job Title?** Patient Accounts Specialist, New Patient Scheduler and AAAAI Certified Pollen & Mold Counter

**How long have you worked at the OAAC?** 21 years

**Same job or different positions?** I started in the Record Room. Then I spent 12 years in Addressing and then moved to centralized scheduling. Now I work in the Business Office and the Clinical Lab.

**What is a typical day like for you?** Most of my time is spent scheduling new patients for our nine providers and assisting patients with their accounts, except for when I am doing the pollen count.

**Where are you from?** I am from Oklahoma City and graduated from Oklahoma State University.

**Family?** I’m single but have two fur children, a dog and cat at home. My surrogate kids are my grown niece and nephew.

**Hobbies?** Photography

**What do you like about working at the OAAC?** It’s like one big family. Many of my coworkers I’ve known for years, and good friendships have developed.

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**OAAC Commits to Oklahoma Standard**

OAAC as a business has committed to the Oklahoma Standard. This year is the 20th anniversary of the Murrah Building bombing in Oklahoma City. You can personally get involved by committing to the Oklahoma Standard as well.

In the month of April 2015, we ask that you commit one act of service, honor, and kindness.

- **Service** means giving your time to someone in need. This could mean volunteering at a soup kitchen, or tutoring a student.
- **Honor** the victims and survivors of the 1995 bombing, by visiting the Memorial Museum, cheering at the Memorial Marathon or leaving a token of appreciation on a chair in the Memorial.
- **Kindness** involves everything from holding a door for a stranger to cleaning up your neighbor’s leaves.

For more information, visit okstandard.org.

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**Peanut Allergy Study...**

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Due to the results of the LEAP trial, new guidelines regarding when and how to introduce peanuts into the diet in non-allergic children are anticipated. The children in this study underwent testing before eating peanuts to make sure they were not allergic.

It is therefore crucial that parents talk to their child’s doctor before peanuts are introduced so appropriate testing can be performed if indicated. For children already allergic to peanuts, the treatment remains complete and vigilant avoidance of all peanuts and peanut-containing products.


Research Links Infants Microbiome to Development of Immune System, Allergic Diseases and Asthma

Why do some develop allergies and some do not? Sometimes the environment and genetics play a factor. A number of studies were released during the American Academy of Allergy, Asthma & Immunology Annual Meeting in which several OAAC allergists were in attendance. Researchers were able to confirm that the microbiome – also known as gut bacteria – is related to establishing the immune system especially in infants. Breastfeeding may influence the number of types of bacteria and diversity in early life gut microbiome.

Racially diverse infants from metropolitan Detroit participated in the study. Researchers analyzed stool samples, blood samples and parent surveys and reports on 298 babies.

By studying whether breastfeeding had a direct effect on the development of allergies and asthma, researchers found that the baby is exposed to the mother’s microorganisms through the mom’s gastrointestinal tract. Those microorganisms find their way to baby’s diaper and researchers studied the stool blood samples in infants one and six months after they were born. They tracked how T-regulatory cells developed. T-regulatory cells are essential for human immune cells that help prevent the development of allergy and asthma.

Researchers found breastfeeding appears to modify the gut microbiome by enriching cells that help prevent development of allergy and asthma.

Researchers found breastfeeding appears to modify the gut microbiome by enriching bacteria in the gut that are positively associated with T-regulatory cells. In the past, breastfeeding has been shown to promote groups of bacteria such as Bifidobacteria which are traditionally considered beneficial to human health. This study expands these findings to identify organisms that are both associated with inducing T-regulatory cells that are option to preventing allergic responses.

New Allergy Treatments Available

New Treatments for grass and ragweed allergies were approved in the form of dissolvable pollen tablets. These treatments may be appropriate for select patients. Talk to your allergist on whether this would be an appropriate treatment for you.
seasonal nasal allergies are expecting—and dreading—runny and congested noses, inflamed sinuses, relentless sneezing and other symptoms associated with springtime allergies. The warm weather will drive people outdoors to face the season’s biggest problem, tree pollen, so children and adults with seasonal allergies need to plan now.

Oklahoma’s warm weather patterns have caused pollen to go into the alert stage over the last few weeks. Follow these simple steps to limit exposure to pollens and molds causing symptoms:

• Keep windows closed and if possible use air conditioning which cleans, cools and dries the air.
• Try to stay indoors when the pollen and mold counts are high. If your symptoms are severe, wear a mask if prolonged periods of exposure are unavoidable. When you return indoors, remove your clothing and take a shower to remove pollen.
• Avoid mowing in the morning when pollen counts are higher. Avoid hanging sheets or clothes outside to dry.
• Keep your windows closed when traveling by car.

Occupational Asthma: Could Work be a Trigger?

If you experience wheezing, coughing, chest tightness or shortness of breath at work, you may have occupational asthma.

Chemical fumes, dust or other airborne irritants can worsen asthma. If you have asthma and suspect that your workplace is causing or making your symptoms worse, talk to your allergist.

Could asthma be caused by your work?

• Did your asthma start when you changed jobs?
• Does your asthma improve when you are away from your job?
• Do chemicals and other conditions at your workplace make it difficult to breathe?

Occupational Safety and Health Administration (OSHA) reports an estimated 11 million workers in the United States are exposed to at least one of the more than 250 substances known or believed to cause or exacerbate occupational asthma. Occupational factors are associated with up to 15 percent of disabling asthma cases. Asthma triggers might include: chemicals used in manufacturing; paints; cleaning products; dust from wood, grain and flour; latex gloves; certain molds; animals and insects.

Factors that increase the risk for developing occupational asthma include existing allergies or asthma, a family history of allergies or asthma and cigarette smoking.

According to the National Institutes of Health, these types of workers are at an increased risk of developing occupational asthma:

- Bakers
- Detergent manufacturers
- Farmers
- Grain elevator workers
- Laboratory workers (especially those working with lab animals)
- Metal workers
- Millers
- Plastics workers
- Woodworkers

Determining if your asthma is work-related, this will require a thorough physical examination. Expect your allergist to:

• Take a medical history that reviews whether any members of your family have allergies, asthma or other allergic diseases such as eczema.
• Ask you to describe your current and past jobs and whether or how they seem to relate to your asthma. You should be able to explain your job and job conditions, which as exposure to fumes, gases, smoke, irritants, chemicals and potential allergens. You should also discuss environmental conditions, such as heat, cold or dryness, and any manufacturing or processing conditions to which you are exposed.
• Ask you about your attacks – how often they happen and what seems to trigger them.
• Perform lung function tests, such as spirometry, a quick and painless test that measures airflow. You make be asked to stop by the doctor’s office to be tested before and after your shift at work.

Managing Occupational Asthma

The prevention and treatment of occupational asthma requires environmental interventions, including education on behavioral changes to avoid asthma triggers, along with drug therapies and careful medical follow up. Whether you can avoid the things that trigger or worsen your asthma at work will depend on where you work and what you do there. If you suspect that your asthma is caused by conditions at work or if it worsens at work, talk to your allergist, who may recommend steps you can take to distance yourself from triggers or reduce their impact. Source: ACAAI.org