

## CarleCast 14 - Allergists

**Dr. David Graham:** It's Carlecast Number 14: Allergists: Good For More Than Just Hay Fever.

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**Dr. David Graham:** Hello, and welcome back to this, the fourteenth episode of CarleCast, the medically-related podcast where we give you doctors talking with doctors about issues important to your health. I am Dr. David Graham, your host. And once again, as I said, we are really happy to have you back joining us for this episode.

You know, one of the things I've really tried to do throughout this series of podcasts is to get you access to information that you may not have a lot of access to any other way. These might be topics that don't get talked about a lot. These might be specialists that you don't get to listen to a lot. But what I want to do is make them accessible to you.

And I think we've really got an opportunity to do that with my guest today. Today we're going to be talking with Dr. Richard Lavi, a board certified allergist at the Bloomington, Illinois branch of our Carle Clinic. Dr. Lavi has a lot of experience in the work of allergy. And one of things we get to talk about today are the different things that allergists do.

Now most people, when they think about going to see an allergist, think that, "If I've got hay fever, if I've got sniffles for some reason, good or otherwise, that's why I would need to see an allergist." When actually, there's so much more that an allergist does and gets involved with.

And I thought that this opportunity to talk with Dr. Lavi would help educate all of us in the different things that allergists do. So, without further ado, let's go right to Dr. Richard Lavi.

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**Dr. David Graham:** I'm here today with Dr. Richard Lavi, one of our board certified allergy specialists at Carle Clinic, who resides and works mainly out of the Bloomington clinic. Dr. Lavi, we really appreciate your time helping us out here today.

Now most people, as they think of allergy specialists, they'll think, "Help my hay fever, keep me from sneezing." But I'm sure that there's a lot of things that you're involved with that people probably aren't aware of. So, what would you expect a person not to know that you work on?

**Dr. Richard Lavi:** Thanks, Dave. The thing that people think of allergists typically is that we're all about sneezing, itching, wheezing, scratching and sniffing. That's the typical definition of the allergist. We do scratch tests, we tell you what you're allergic to, we make a treatment plan, and we send you on your mighty way. And that's something we do seasonally, definitely. Now is a great time for an allergist because of ragweed, but outside of that I have to keep a job on a daily basis, and I see a lot of other problems that you might not think of an allergist handling.

I think the most important thing people need to know is that we see a lot of asthma patients because, especially in children, to 50 percent perhaps even as high as 80 percent of children have an allergic component to their asthma. And that's an important trigger, and we all know that triggers are where asthma is at. The allergist can be a definite help in 1) diagnosing those triggers and 2) managing asthma in a slightly different way than other physicians might.

**Dr. David Graham:** Now, when you say that you help find an allergy trigger, some people might have heard of allergy testing as a lot of poking and prodding under the skin. Is it something uncomfortable or difficult for a person to go through?

**Dr. Richard Lavi:** We will skin test anybody who has a pulse and skin. So that's an important point to remember, that anybody can be skin tested as long as they have those two requirements. And allergists do skin testing in different ways. Personally, I'm very conservative, and we use a tiny plastic scratch device that neither draws blood nor is very offensive or harmful. Any child or adult can tolerate that.

What patients remember is the second step of allergy testing, which is not always necessary, which is intradermal testing, sort of the TB test under the skin of the arm.

**Dr. David Graham:** Now a positive scratch test, does that mean an allergy that is important or meaningful to a person?

**Dr. Richard Lavi:** That's a great question, because that's why I have a job. I have to interpret the skin tests in the clinical context. We spend a lot of time talking before we skin test, because there are false positives and there are false negatives. And certainly if we're going to be helping somebody define their allergy season or even (if they) need allergy injections, we have to be certain we're doing the right thing for them, and putting the right things either into their nose or into their vaccine.

**Dr. David Graham:** Now you brought up the idea of allergy injections. And I think a lot of people may have some misconceptions about allergy injections and what they are and what they entail. Why don't you help us out a little bit as to what the goal of allergy injections may be, how they're given. Are they given forever? Do you get a break off of them?

**Dr. Richard Lavi:** Well, it's a medieval treatment that really works. That's the problem. We haven't figured out how the mechanism of allergy injections is exactly working until the past 10 years. It's just been the dark ages. But the thing is it works.

And who is the appropriate candidate for allergy injections? I think that's the first question I always ask. The person who has bad allergies despite everything you've done. They avoid what they can avoid, they won't give up the cat, they get sinus infections, they are using their medications appropriately, or they don't want to use medications appropriately, or they can't afford to use medications appropriately.

So if they've avoided, they've medicate, and they're still suffering mightily, that's the person for allergy injections. And the commitment is huge. The benefit is also huge as well. I estimate that for the person who truly needs allergy injections, they'll have a 75 to 90 percent improvement in their symptoms.

Now they have to stay on the injections, recommendations are from national guidelines five years to really get that clinical benefit and retain that clinical benefit. Once people discontinue allergy injections, approximately 50 percent of them will return to their baseline misery. Approximately the other half, or 50 percent, will continue to have the benefit of allergy injections without receiving them.

**Dr. David Graham:** You mentioned other treatments that are out there and available. A lot of people remember the old-fashioned antihistamines and the dry mouth and the sleepy all the time, but certainly there's been some real great advances in other treatments for allergies, haven't there?

**Dr. Richard Lavi:** Sure. I mean, bottom line is avoidance, avoidance, avoidance. But that's not practical, where we want to live outdoors even though we spend 90 percent of our time indoors. So, you can't avoid pollen. And that's where intranasal corticosteroids have been a godsend. These are the most effective medications on the market for allergy treatment, especially if you're suffering predominantly from congestion. Again, the intranasal corticosteroid is king.

Antihistamines and leukotriene modifiers have their place, but they certainly are much, much lower on the list of preferred medication for me.

**Dr. David Graham:** So really, a nasal spray can make all the difference for a person.

**Dr. Richard Lavi:** That's right. They just need to be offered it.

**Dr. David Graham:** Now steroids can bring up some bad ideas in people's minds. These people who take the steroid nasal sprays, are they going to get the big, fat face? Are they going to develop diabetes? Are they going to run into other problems that you may usually think of with steroids?

**Dr. Richard Lavi:** Long-term safety studies have been done with all of these drugs before they hit the market, and there are ongoing studies, obviously, when they're on the market. And what I typically tell the patients is that, yes, epistaxis is the most common side effect. If you are a migrainer, you may have a migraine triggered by the nasal steroid. The real thing to worry about is increased intraocular pressure for the patients with glaucoma. If they're co-managed with an ophthalmologist, they can probably still use intranasal corticosteroids if they're getting benefit from them.

There is the rare report of Candida overgrowth in the nose from this medication. And they should be used with caution in the immuno-suppressed, that goes without saying, I think. But otherwise, I don't worry about these medications on a routine basis.

**Dr. David Graham:** So certainly for the routine allergy sufferer, you've got a great group of medicines you can use. If those aren't working, we've got the advanced treatments with the scratch testing and the skin testing.

Now there's going to be a group of patients who have these symptoms who say, "I know these are allergies and my doctor is not doing good enough for me. I want to see an allergy specialist." Are there symptoms or signs that a person may not immediately recognize as possibly being related to an allergy problem?

**Dr. Richard Lavi:** You don't know that you're snoring, usually. You're so stuffy that your spouse will complain, or you might notice your child is snoring and mouth-breathing. That's a bad sign for nasal congestion. Children frequently are irritable during the day, and may have poor concentration as a result of poor sleep, and poor school performance. These can all be the signs of severe allergy suffering.

The phenomenon of "presenteeism" exists in the workplace. You're doping yourself up with so much diphenhydramine or other over-the-counter medication that you're a zombie at work. Or you just don't make it that day because you're self-treating allergy symptoms, and that has ramifications on your quality of life.

**Dr. David Graham:** So I think you bring up something really interesting here, the whole notion of saying, "My kid is tired, my kid snores, we can't find any other good reason." Maybe you should be asking your primary doctor to see an allergy specialist about that.

**Dr. Richard Lavi:** Check the adenoids and think about allergies.

**Dr. David Graham:** Great. Well, Dr. Lavi, I really appreciate the time. It sound like you've got a great group of tools to work with, not only to find what's causing the problem, but to help treat it without causing too many problems for patients.

**Dr. Richard Lavi:** Thank you.

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**Dr. David Graham:** Well, as I said, a lot of excellent information from Dr. Lavi on all the different things that allergists get involved with in their career. As I said in the introduction, it's not just hay fever.

So, anyway, one of the things I also like to do besides giving you exposure to topics or physicians you may not hear about is to find those things that don't make the headlines of medical news, those things that might not quite be ready for prime medical time. Or to put it another way: what else is going on in the world of medicine.

And as I've searched around the web and other sources, I find a lot of interesting things, some of which obviously aren't exactly entirely 100 percent accurate, but raise some interesting questions and some possible interesting things to look at in the future.

And one of the interesting things I've found, was the article was titled, "Mood Foods," and that is to say different things in nutrients to keep your brain balanced, and different states your mind might be in, and the food to help solve or fix or keep those states from being a problem for you.

So let's run down some of the things they talk about. Now, certainly, they are good enough as they go along here to talk about things to improve cardiovascular disease and things like that. We all know what you shouldn't be eating to watch your cholesterol. And so I don't need to get into those.

But some of these are a little more interesting. The first one on the list was what to do if your mood is anxious, in other words, what do you do to stay sharp during a really difficult job interview? And one of the things they talk about is half a grilled chicken wrap at lunch, hold the mayonnaise. So what's the rationale behind this?

Well, if you eat four to five ounces of protein, it helps your brain to create dopamine and norepinephrine. Those are a couple of the neurochemicals produced in the brain that help keep you alert. So that grilled chicken without the mayonnaise at lunch can in fact, hopefully, help keep you awake, a little more alert, a little less anxious during that tough time.

Well, what if your mood is stress? Certainly all of us have times of stress in our lives. Certain times of the year may lead to more stress than other times. Are there any particular foods that we can eat to help us make that stress not much of a problem? Say you're in a situation where you've got a deadline. You've got to meet that deadline and you don't want to become overwhelmed.

Their recommendation in this article is a handful of sesame seeds. And no, the sesame seeds on a bun for a Quarter Pounder with cheese is not what they're talking about here. They're just talking about pure sesame seeds. Why pure sesame seeds? Well, one of the things that stress hormones can do is to deplete your body of magnesium. Lack of magnesium reduces your stress-coping abilities, it increases your risk of developing high blood pressure. One way to help fix magnesium is sesame seeds.

What if you're restless? What if you're having trouble sleeping, you know that you've got a difficult day the next day, what do you do to help with that restless feeling? How about non-fat popcorn about a half hour before you go to bed? Everybody who's worried about watching weight is going to say, "Gee, do I want to eat all those carbs before I go to sleep and don't exercise them off?"

You don't want to eat a huge bowl. But, if you have a little bit of non-fat popcorn before you go to bed, the carbs induce your body to create serotonin. Serotonin is a

neurotransmitter that does a great job in helping you feel relaxed. If you have the fat in the popcorn, fat slows the process of building serotonin levels down, which slows the process of helping you become relaxed, not so restless, and helping you get to sleep.

What if you're depressed? What if there's all kinds of stuff going on at work, at home, it's just getting to you. You're down, you're depressed, what are you going to do about things? Their recommendation is grilled salmon or sushi for dinner, two things I can go along with, obviously, for the cardiovascular things.

But interestingly enough, they quote a study from Finland. And they say people who eat more fish are 31 percent less likely to suffer from depression. If you skip the sweet, simple carbs, that is to say you don't have the breaded fish that's deep-fat fried, then you avoid the sugar crash that actually makes depression worse.

Now I'm going to quibble with them on this, because here's the study that says that you're less likely to get depressed, and they want to use that to say if you eat salmon or sushi tonight, you're going to be less depressed tonight. It may not quite work that way, but if you do it regularly, maybe you'll reduce the risk of you developing depression as you go along.

What if you're insecure? You're going along, you're thinking about your big day or your problems going along and you're feeling less and less confident as the night goes on. One of the things you can do is just a small snack-sized chocolate bar. Chocolate has a lot of different chemicals that help with mood. And this is actually something that's been well-documented amongst many, many different studies.

There's a chemical called anandamide, which has the same receptors as certain herbal preparations that might not be as healthy for you and maybe not as legal, but have the same targets. And phenylethylamine, which will give you that nice, cozy euphoric feeling.

What if you're just absolutely flummoxed by everything that's going on? Your brain's not working as well as it should, you're forgetting deadlines, you're just getting more and more flustered as time goes along. Maybe what you ought to think about doing is having pineapple chunks for a snack, or in your oatmeal, have a couple of berries.

Now the reason for this is because of antioxidants. The most colorful fruits and vegetables have lots and lots of antioxidants, and those do a great job of picking off free radicals that wear away at your memory. Your brain is a very, very oxidative organ, and oxidants can potentially do a lot of damage there. Antioxidants may help that over time.

Again, here's another situation where they're trying to say it's going to help your memory as soon as you take them. It may not work that way; it may in fact work just to help the problems from developing as you go along in time. So those fruits and vegetables are good for lots of different things.

They do go into a few other things that, as I said, some of them are just very obvious in terms of cardiovascular disease, etcetera. But at least for some common sense things and some average everyday situations, maybe there's an answer or two that can help you get past them.

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**Dr. David Graham:** And that brings us to the end of another CarleCast. As always, we really appreciate your listening to this. And if you are just finding this through various means and this is the first episode you've listened to, we are available through most of the normal avenues for downloading podcasts.

In addition, you can go to our website: [www.carlecast.com](http://www.carlecast.com). You'll find all the previous episodes and future episodes upcoming of the CarleCast, as well as transcriptions of all of our episodes. So if you want to keep a written document of the things that we've been talking about, it'll be easily available for you to download there.

In addition, there are links there to email us with suggestions on future topics, hints of what I might be doing better -- I'll always take constructive criticism -- and different things you might want us to talk about as time goes along.

We do have some very, very interesting topics coming up here in the near future. We have specialists in mammography, breast cancer being the ever-topic of interest that it always is. In addition, we have hand-surgery specialists to talk about some very, very common things that can happen with hands and some new, interesting ways that things are going about being treated.

So certainly, I hope you'll keep listening to the episodes as we keep putting them out there for you. Until the next episode comes along then, I am Dr. David Graham, your host of the CarleCast. Go to our website, [www.carlecast.com](http://www.carlecast.com). And until next time, stay healthy.

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