

Anaphylaxis

Description:

The word *Anaphylaxis*, is derived from the Greek words *a* - (against) and *- phylaxis* (immunity, protection). It is a massive allergic response that may occur when the body comes into contact with a substance (called an 'allergen') to which it is excessively sensitive. Common causes include pollens (grass, trees), non-pollen extracts (dust mite, cat dander), insect venom (wasp, bee, hornet, fire ant) and foods (eggs, fish, peanuts, strawberries).

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Symptoms

Multiple organ systems may be affected in this severe and potentially life-threatening reaction, including the respiratory, cardiovascular, gastrointestinal and the cutaneous (skin) system. As a result of this, a variety of symptoms may be experienced. These include:

- Respiratory symptoms - difficulty breathing, wheeze and shortness of breath due to swelling of the tongue and narrowing of the airways as well as watery eyes and a runny nose.
- Cardiovascular symptoms - racing heart, light headedness, dizziness and chest pain Cutaneous symptoms – facial flushing, swelling of the skin and underlying tissue especially around the mouth and eyes, excessive itch and sweaty palms.
- Gastrointestinal symptoms - abdominal cramping, nausea, vomiting and diarrhoea.
- Other symptoms - feeling of impending doom and headache.

Symptoms usually begin within 5-30 minutes from the time of exposure but may occur hours later. In general, the more rapidly anaphylaxis develops after exposure to the offending agent, the more likely the reaction is to be severe.

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Treatment

An anaphylactic reaction is a life-threatening allergic reaction, call 000.

Treatment requires an injection of adrenaline. A patient with a history of anaphylaxis may carry a device called an 'EpiPen' with them. EpiPen(R) and EpiPen Jr(R) are pre-loaded syringes that inject a single dose of adrenaline. This may need to be administered whilst the ambulance is on its way.

The anaphylaxis management plan may be viewed at this link:

http://www.allergy.org.au/images/stories/anaphylaxis/epipen_action_plan_general_09.pdf

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Prevention

In order to prevent future anaphylactic reactions, avoidance of the particular agent is recommended. This may mean choosing a different park to run through, limiting the amount of time spent in the garden or avoiding close contact with the family pet, for example. Investigations may be performed by an immunologist or allergist, to identify the allergens responsible for causing anaphylaxis. In some cases, it may be possible to undergo treatment (called 'desensitisation') which can reduce the risk of future anaphylactic reactions caused by that allergen.

Close friends, family, work colleagues and school teachers should be made aware of any allergies you have. This may allow them to identify and respond to early signs of anaphylaxis, as well as assist you in the avoidance of these agents. An information bracelet may also be worn to alert strangers, should an anaphylactic reaction be experienced in a public location.

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For Further Information

Australasian Society of Clinical Immunology and Allergies Resources: <http://www.allergy.org.au/content/view/10/3/>

Anaphylaxis Australia: <http://www.allergyfacts.org.au/schools.html>

Queensland Government:

http://education.qld.gov.au/schools/healthy/docs/anaphylaxis_guidelines_for_queensland_state_schools.pdf

E-medicine: <http://emedicine.medscape.com/article/756150-overview>

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Help and Assistance

Anaphylaxis is a medical emergency please call 000 immediately.

If you have any other symptoms suggesting an allergic reaction or concerns about allergies please contact one of our Registered Nurses at 13 HEALTH by phoning 13 43 25 84.

HealthInsite Information:

[Anaphylaxis](#)