



Hay Fever: Allergy Shot? Worth a Shot!

By Drs. Rabya Mian and William Johnson, Esse Health and Gateway

Asthma & Allergy Relief

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Do you suffer from frequent sneezing, congestion and an itchy or runny nose? If so, you may have allergic rhinitis or “hay fever.” Allergic rhinitis is one of the most common chronic conditions, affecting 10 percent to 30 percent of adults and up to 40 percent of children in the United States. If this includes you, you don’t have to suffer.

Drs. Mian and Johnson with Gateway Asthma & Allergy at Esse Health can make an accurate diagnosis and develop a treatment plan that works for you. If you have allergic rhinitis, you may be wondering if allergy shots are the best treatment for you. While getting regular shots is not anyone’s idea of fun, the possibility of being free from your allergy symptoms may be worth it!

Allergy shots, also known as immunotherapy, may be considered if your symptoms are constant, if you do not want to take medications or feel that they are not enough, or if you want long-term control of your allergies with less need for medications. This treatment involves receiving individually customized allergy injections periodically, as determined by Drs. Mian and Johnson. The end result is decreased sensitivity to allergens.

Allergies are the result of a chain reaction that starts in the immune system. Your immune system controls how your body defends itself. For instance, if you have an allergy to pollen, your immune system identifies pollen as an invader, or *allergen*. Your immune system overreacts by producing antibodies called *Immunoglobulin E (IgE)*. These antibodies travel to cells that release chemicals, causing an allergic reaction leading to red, itchy eyes, a runny and stuffy nose and worsening of cough and allergic asthma.

Allergy shots are individually customized and aimed at increasing your tolerance to allergens that trigger your symptoms every time you are exposed to them. Drs. Mian and Johnson are specialized physicians (allergists) that can test which allergy you have and determine if allergy shots are the best treatment.

Who can be Treated with Shots?

Allergy shots are recommended for patients with allergic asthma, allergic rhinitis/conjunctivitis and stinging insect allergy. They are not recommended for food allergies. Before a decision is made to begin allergy shots, the following issues must be considered:

1. Length of allergy season and the severity of your symptoms.
2. Whether medications and/or changes to your environment can control your allergy symptoms.
3. Your desire to avoid long-term medication use.

Note: Immunotherapy for children is effective and often well-tolerated. It might prevent the onset of new allergen sensitivities or the progression to asthma.

How do Allergy Shots Work?

Allergy shots work like a vaccine. Your body responds to the injected amounts of a particular allergen (given in gradually increasing doses) little by little, developing a resistance and tolerance to it. Allergy shots can lead to decreased, minimal or no allergy symptoms when you are again exposed to the allergen(s) in the shot.

There generally are two phases to immunotherapy: build-up and maintenance.

The build-up phase, generally ranging from three to six months, involves receiving injections with increasing amounts of the allergens. The frequency of injections is once or twice a week, though more rapid build-up schedules are sometimes used.

The maintenance phase begins when the most effective dose is reached. This dose is different for everyone, depending on how allergic you are and your response to the build-up phase. Once the maintenance dose is reached, there are longer periods between injections, typically two to four weeks.

Hay Fever: Allergy Shot? Worth a Shot! Continued

Cluster Immunotherapy

Dr. Mian, located in O'Fallon, Mo., offers an accelerated immunotherapy regimen called "cluster immunotherapy." This involves giving two or more allergy shots at each visit, usually spaced apart by 20 to 30 minutes. This procedure is performed once a week and allows for a person to get to his or her maintenance dose much quicker and experience relief faster. Cluster immunotherapy offers an alternative to traditional schedules for allergy shots, allowing a person to achieve higher doses of allergy vaccines much quicker, but keeping the same safety profile as traditional immunotherapy. Patients have reported benefits within the first four to eight weeks of starting cluster immunotherapy regimen.

Rabya Mian, MD, is an allergy and immunology specialist at Gateway Asthma & Allergy Relief in O'Fallon, Mo. She is a member of the American Academy of Allergy, Asthma & Immunology. Dr. Mian's board certifications include the American Board of Internal Medicine and the American Board of Allergy and Immunology (Pediatric and Adult).

William Johnson, MD, is an allergy and immunology specialist at Gateway Asthma & Allergy Relief in Belleville, Il and St. Louis, Mo. He is a fellow of the American Academy of Allergy, Asthma and Immunology. Dr. Johnson's board certifications include the American Board of Pediatrics and American Board of Allergy and Immunology (Pediatric and Adult).

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Girls on the Run Q&A with Jamie Daerda

By Andrea Shomidie, Esse Health

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In 1996, Molly Barker, a four time Hawaii Ironman Triathlete, established Girls on the Run International. At the age of 15, Molly bought her first pair of running shoes. Like most other girls her age, she was struggling to fit in at school. She found comfort in putting on those shoes and running. Running helped her feel strong, beautiful and powerful.

Barker went on to earn her master's in social work from the University of North Carolina at Chapel Hill. After college, she worked as a track coach and a college counselor at a small private college addressing the needs of women with eating disorders, alcohol and substance abuse problems and depression. All of her training and experiences inspired her to create an organization to help pre-teen girls through running.

At Esse Health, our Human Resource Director Jamie Daerda is involved with this organization and we would like to share her story. Please read the Q&A below to find out more about Girls on the Run.

Q: What is Girls on the Run (GOTR)?

Jamie: Girls on the Run is a national non-profit prevention program that encourages pre-teen girls to develop self-respect and healthy lifestyles through running. There are over 150 affiliate locations, including one here in St. Louis.

Q: What is your involvement with GOTR?

Jamie: I am one of the coaches at an elementary school in Ladue, Missouri. We try and show the girls how fun and rewarding running can be for them. The goal is to prepare the girls for a 5K run on Sunday, May 16th at Forest Park.

Q: Why did you choose to get involved with GOTR?

Jamie: When I was looking for an organization to get involved with, I wanted to do something I felt strongly about. I think it is really important to teach young girls about having self-respect and choosing a healthy lifestyle. The lessons these girls are learning will impact them for the rest of their lives. Looking back, I wish I had the support I needed to stay healthy and active.

Q: Can you tell me a little bit more about the 5K run?

Jamie: For the girls, the completion of the 5K is their ultimate goal. It is what they will be training for all season. I will be a "running buddy" for 1 or 2 girls during the race to help motivate them to the finish line. The run is a family-friendly event and is open to runners and walkers of all ages. With more than 4,000 registrants, it is one of the largest 5K races in St. Louis.

Q: About how many girls do you coach and what are their age ranges?

Jamie: There are 12 girls on my team and they range from 3rd to 5th grade.

Q: How many times a week do the girls train?

Jamie: We meet every Monday and Wednesday in the afternoon from 3:30 – 5 p.m.

Q: How are you preparing the girls for the 5K run?

Jamie: The national organization supplies each affiliate location with a curriculum to cover during the 12 week training period. We will start each session by talking to the girls about a certain topic or lesson. For example, one of the lessons might be about nutrition. So we will talk to the girls about the importance of healthy eating and choosing the right foods. When we go outside and start running we also try and incorporate the lesson for the day into fun running games.

Q: What should someone do if they want to be a volunteer for GOTR?

Jamie: I would strongly encourage anyone wanting to give back to the community to get involved with GOTR. If someone is interested in becoming a volunteer, visit the St. Louis GOTR website at www.girlsontherunstlouis.org. There is an application and background check process that needs to be completed before any volunteers are accepted.

If you enjoy running and are interested in raising money for this great organization, SoleMates is the charity running leg of GOTR. Money raised through SoleMates will benefit the GOTR-STL scholarship fund and help support new programs throughout greater the St. Louis area.

Q: What should parents do if they want to get their kids involved in GOTR?

Jamie: Contact your local school district to see if they have a program already set up. If they do not, contact GOTR St. Louis to see how to get that process started.

For more information about Girls on the Run, please visit:

www.girlsontherunstlouis.org

www.girlsontherun.org

www.essehealth.com



Myths Surrounding Childhood Vaccines

By Dr. Catherine Remus, Pediatrician, Esse Health

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Immunizations date back to the late 1700's and the smallpox vaccine. Since that time, the number of vaccines that have been developed to prevent disease has jumped to over one dozen. During this time, death rates and injuries from these diseases have dropped dramatically. Vaccines consist of either weakened or killed viruses or bacteria (which will not make a child ill) known as antigens. These antigens stimulate the child's natural immune system into producing antibodies to fight such an infection if the need arises. Vaccine manufacturers and the Food and Drug Administration (FDA) work very hard to ensure that the vaccines are safe and effective. The protection from potential disease far outweighs the very small risk of serious problems and side effects from the vaccines.

There are a number of myths that surround childhood vaccines. A few of these myths include:

#1 – "Vaccines against illnesses that are no longer seen in the United States do not need to be given." We live in a global community and even though many vaccine preventable illnesses are rarely, if ever, seen in the US, world travelers and immigrants can easily transmit these diseases back into the general population. If vaccine rates diminish within the United States, these diseases will return.

#2 – "Mercury is still in the vaccines." The preservative thimerosal that contained a form of mercury has been removed from almost all children's vaccines since 2001. The only vaccines that still contain thimerosal are some seasonal flu vaccines and some H1N1 vaccines.

#3 – "Getting so many vaccines can overwhelm the immune system and cause serious illness or adverse reactions." In truth, children's immune systems are more than capable of combating far more antigens than they encounter via immunizations. Children are bombarded every day with viruses and bacteria that their immune systems easily handle without harming their health. Currently, there is no consensus as to an upper limit on how

many vaccines the body can handle at one time.

The Center for Disease Control (CDC) reports that most vaccine adverse events are minor and temporary, such as a sore arm or mild fever or a lump under the skin where the shot was given. The CDC has also stated that "so few deaths can plausibly be attributed to vaccines that it is hard to assess the risk statistically." The Health and Human Services' Vaccine Adverse Events Reporting site between 1990 and 1992 looked at all deaths reported and found that only one might even possibly be associated with a vaccine. Through the CDC, the Vaccine Safety Datalink Project continually monitors patterns to determine if adverse events are a side effect or are unrelated to the vaccine.

#4 – "The flu shot causes the flu." The flu shot does not contain a live virus so it is impossible to get the flu from this shot. It is not uncommon to feel a bit achy after the vaccine as the body mounts its immune response and for 2 weeks after getting the flu shot, one is still susceptible to coming down with the flu.

A good resource for more information on some of the controversies surrounding immunizations is Dr. Ari Brown's book, *Baby 411: Clear Answers & Smart Advice for Your Baby's First Year* (Windsor Peak Press).

As to when your child should be immunized, you should talk to your pediatrician. Esse Health pediatricians follow the CDC, the Advisory Committee on Immunization Practices (ACIP) and the American Academy of Pediatrics guidelines for immunizations. There are only a few special circumstances that would prevent vaccinating a child. There are some vaccines that should not be given to children fighting certain types of cancers or diseases, or who might be taking drugs that lower the body's ability to resist infection. If you have a concern or question about giving these vaccinations and when to give them, ask your pediatrician. That is what we are here for!

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Did You Know? Esse Health Offers Radiology Services at Excel Imaging

By Dr. J. Douglas Schoen, Radiologist, Excel Imaging

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The imaging arm of Esse Health, Excel Imaging, was formed in 2001. Under the direction of Drs. Greg Cizek and Dan Abodeely, the practice, which initially consisted of a small makeshift office and mobile CT truck on Tesson Ferry Road south of St. Anthony's Hospital, has grown to its current home at 9930 Watson Road (at the boundary of Crestwood and Sunset Hills) where 6 full time and 2 part time radiologists staff the imaging needs of Esse Health physicians.

Radiologists are physicians who have trained in the acquisition and interpretation of diagnostic imaging. Examples include x-ray, CT, MRI, Ultrasound and mammography. Each of our doctors completed 4 years of medical education at an accredited allopathic medical school in the United States. Following a one year internship, each completed a 4 year residency in diagnostic radiology. Three of our physicians have further expertise in Neuroradiology (brain and spine disorders) and Musculoskeletal Imaging (muscle, bone and joint disorders), having completed additional training known as "fellowship" in these disciplines. Between them, each of the board certified radiologists of Esse Health share over 100 years of imaging experience.

In addition to Drs. Cizek and Abodeely, the group was further complemented by Dr. Ed O'Brien in 2002. Late 2003 saw the addition of Dr. Matt Ruyle with Drs. Tom Schroyer and Doug Schoen joining in July of 2004. The group "wooed" another gifted radiologist, Dr. David Wu, in 2007. Dr. Jason Kayser completed the current team in 2008.

Speaking of team, our story would be incomplete without mention of the fantastic team that supports our physician radiologists on a daily basis. In addition to front office staff who personally greet patients, schedule appointments and arrange pre-certification for requested exams, Excel Imaging is blessed with a talented group of radiology technologists, the professionally trained individuals who actually acquire the images for interpretation

by the physician radiologists. This group shares more than 130 years of experience combined with specialty certification in all imaging modalities, including mammography, CT, MRI, ultrasound and special procedures.

Regarding special procedures, our radiology group offers more than diagnostic imaging services. One of our special niches is image guided pain management. Offered at both office locations and at DesPeres Hospital are a wide array of pain management procedures, including epidural steroid injections, nerve root blocks, joint injections (commonly shoulder, knee and hip), and vertebroplasty/kyphoplasty for vertebral compression fractures. Recently, we have teamed with a group of podiatrists to begin offering image guided pain management of the ankle and foot including tenography and steroid injections of the ankle and foot.

Our Watson Office, managed by Sue Naes, is open 8 a.m. to 6 p.m. Monday through Thursday and 8 a.m. to 5 p.m. on Friday. Our physician radiologists are available on call 24 hours a day 7 days a week.

While we wish all the members of the Esse Health family good health, should the need arise for a diagnostic imaging procedure or image guided pain management procedure, please consider your Esse Health radiologists at Excel Imaging. Come "see" how our professional, personal attention can impact you and your health outcomes.

www.excelimagingstlouis.com

