

Diabetes, Allergies

A Complicated Mix

Effectively treating patients who have diabetes and allergies “requires a great deal of attention to whole-system issues—such as the effects of different medications used in combination—and ongoing, thorough communication by the health care practitioners involved with the case,” says Allergist Dr. Dave Judge, who has offices in Cary, North Raleigh, and Wake Forest.

“There are even occasional incidents,” he adds, “when a diabetic patient gets an allergic reaction at the site where insulin injections are given. The site may be painful, with itching and a burning sensation, and perhaps with swelling for several hours following an injection. The simplest and most effective way to deal with this is to change the injection site.”

Dr. Judge says “the most common cause of complications resulting from diabetes in my practice comes from the fact that diabetes depresses the immune system. For example, people with a sub-par immune system are more prone to fungal infections or yeast infections. They are, for instance, more susceptible to thrush—an infection that causes creamy, white, painful patches to form inside the mouth. If this same patient has asthma, their diabetes may very well complicate the use of the inhaler medication we use to effectively treat that problem. There are many such examples where we have to modify treatment, and adjust medications, to accommodate the presence of diabetes along with allergic conditions.”

SPRINGTIME CHALLENGES MANY

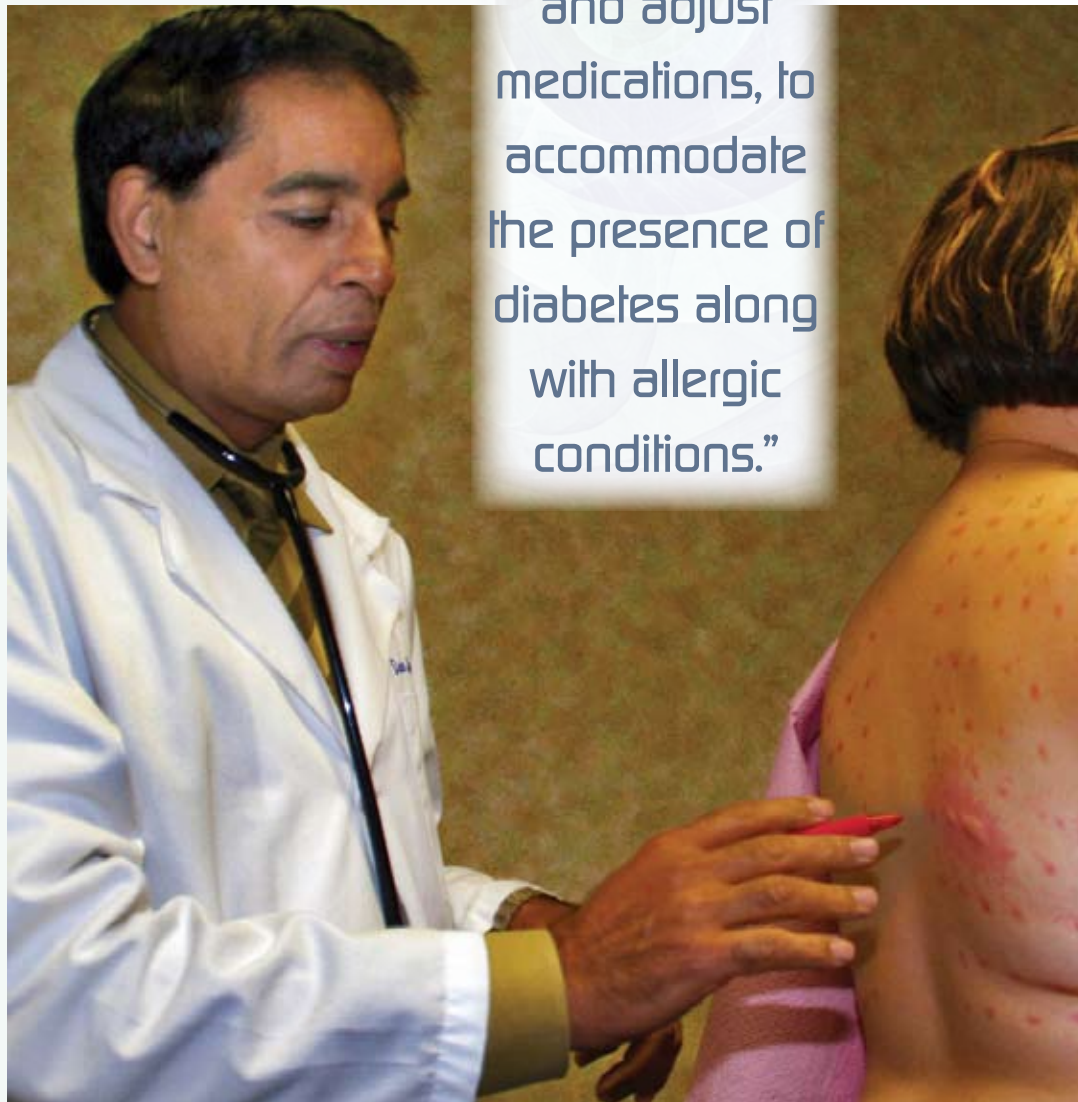
And now, notes Dr. Judge, “it is springtime, and for the past month we have been seeing a host of patients—some with diabetes, others free of that problem—with the early signs of allergic reactions: sneezing, coughing, wheezing, irritated eyes, and more. We counsel them, offer them testing as necessary and medication, and teach them avoidance techniques.

“Of course many types of pollen are difficult to avoid,” he says, “so we encourage our allergy patients to stay inside during peak pollen times. Tree pollens and mold spores are deposited during the early morning hours, and grass pollen later on during the day. Staying in an air-conditioned environment is a wise choice.

“For people who know they are coming into a difficult allergy season, we encourage them to start their allergy medication—which may be antihistamines or nose sprays—a week before the season begins, continuing with its use during the entire season.”

Most often, says Dr. Judge, treatable allergy conditions

Allergy testing is most often quick, relatively inexpensive, and revealing, as Dr. Judge observes with this patient. The large red welt indicates an allergic reaction to a specific type of pollen.



“(We often) have to modify treatment, and adjust medications, to accommodate the presence of diabetes along with allergic conditions.”

include allergic rhinitis—“known to most people as hay fever, even though it has nothing to do with hay. It takes two different forms: seasonal and perennial. Symptoms of seasonal allergic rhinitis are most common in the spring—as well as in the summer and fall. The most common triggers are pollens from trees, grasses or weeds, or airborne mold spores.

“Other people experience symptoms year-round—perennial allergic rhinitis—generally caused by sensitivity to house dust, house dust mites, animal danders, and mold spores, as well as food allergies.”

It is a very good idea, and a simple process, to find the cause of an allergic reaction, says Dr. Judge. “The skin testing that we do is the easiest, quickest, most sensitive, and generally least expensive way of making the diagnosis,” he notes. “It’s possible to test for a great array of possible causes of an allergic condition, and to know the results of that testing within minutes (*see photo*).” Less frequently, Dr. Judge will use a special blood test for allergens.

There are three key elements in Dr. Judge’s treatment plan for people who seek to manage an allergy problem effectively.

“First, of great importance, there is avoidance,” says Dr. Judge. “A single ragweed plant may release a million pollen grains in one day, and the pollen from the ragweed, grasses, and trees is so small and buoyant that it may float on the wind many miles from its source. Mold spores and other sources of allergy problems are also in the environment with amazing abundance. Still, it is possible to lessen exposure—especially when you know precisely what the source of the problem is for your individual condition—and the problem may be right in your own yard.”

Among avoidance ideas Dr. Judge shares with his

patients are staying indoors as much as possible during the height of the pollen season, and the use of high energy particulate air filters or other devices to help clean pollen and mold from indoor air. Air-conditioning, in the home and in the car, is also useful. He also suggests that his allergy patients wear a face mask when mowing the lawn or doing other yard work, among many other strategies and interventions.

“Medications are usually the first option for treating allergic conditions,” says Dr. Judge, “when avoidance measures don’t control the problem. Antihistamines and decongestants are the most commonly used medications for allergic rhinitis. Newer medications inhibit the release of chemicals that cause allergic reactions, and help alleviate nasal congestion, runny nose, sneezing, and itching. They are available in many forms, including tablets, nasal sprays, eye drops, and liquids. Side effects from these medications, such as drowsiness, are markedly less of a problem than they were a few years ago, especially with non-sedating antihistamines.”

However, he adds, “one has to be very careful not to get addicted to over-the-counter nasal sprays and monitor blood pressure when using oral decongestants.”

Another approach to treating allergic reactions is immunotherapy, “a safe and effective alternative for patients who do not respond well to other options,” says Dr. Judge. Allergy injections are usually given at variable intervals over a period of two to five years.

“There are many ways of treating allergies,” Dr. Judge finds, “and each person’s treatment must be individualized based on the frequency, severity, and duration of symptoms and on the degree of allergic sensitivity. We encourage our patients to ask questions. When it comes to managing allergies, knowledge really is power.” **h&h**

For more information about diagnostic and treatment options for allergies, asthma, and sinus conditions, contact:

ALLERGY, ASTHMA & SINUS CENTER, PA

Gurdev (Dave) Judge, MD

Stacey Schiller Little, PA-C

CARY OFFICE

401 Keisler Drive, Suite 201

Cary, NC 27518

Telephone: (919) 859-5966

NORTH RALEIGH OFFICE

10931 Raven Ridge Road, Suite 111

Raleigh, NC 27614

Telephone: (919) 870-6440

WAKE FOREST OFFICE

1906 S. Main Street

Wake Forest, NC 27587

Telephone: (919) 562-7195