

**Embargoed Release Dates**  
November 11-12, 2007  
(See Presentation Dates Below)

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**Research Findings in Allergic Rhinitis  
Presented at ACAAI Annual Meeting**

DALLAS – Researchers are presenting some 340 abstracts on investigational findings in the diagnosis and treatment of allergic diseases at the ACAAI Annual Meeting in Dallas, Nov. 8-14. Following are highlights of some key studies on allergic rhinitis.

**“Nasal Allergies Adversely Affect Sleep and Productivity in Children.”** (Abstract #1: Nov. 11 at 1:00 p.m.) – Jennifer M. Derebery, M.D., Los Angeles, et al – Investigators conducted a national telephone survey (Pediatric Allergies in America) of the parents of 500 children (4 to 17 years) with current nasal allergies. Their findings include: approximately one third of parents of children with nasal allergies reported that their children had difficulty getting to sleep (32 percent), staying asleep (26 percent), or experiencing a good night sleep (29 percent) compared with rates of 12 percent, 8 percent and 12 percent reported by parents of children without nasal allergies, respectively. Forty percent of parents reported that nasal allergies interfered with their child’s performance at school or daycare.

**“Children with Nasal Allergies Experience Bothersome Symptoms That Affect Daily Activities.”** (Abstract #10: Nov. 11 at 2:15 p.m.) – Michael S. Blaiss, M.D., Memphis, et al – In the national telephone survey (Pediatric Allergies in America) of the parents of 500 children (4 to 17 years) with current nasal allergies, one third of parents reported that their children cannot tolerate their nasal allergies. According to the survey results, 55 percent of allergists, 38 percent of pediatricians, 27 percent of family practice physicians, and 26 percent of ear, nose and throat specialists agreed that a pediatric patient experiencing a nasal allergy attack cannot tolerate symptoms without relief. Parents reported a 29 percent decrease in productivity of their children with nasal allergies on days when symptoms were at their worst.

**“Rhinitis Outcomes Questionnaire in Allergic Rhinitis and Immunotherapy Patients: A Five-Year Retrospective Analysis and Web-based Implementation.”** (Abstract #12: Nov. 11 at 1:45 p.m.) – Dan A. Dalan, M.D., Fargo, N.D. – This report is the first long term follow up of 1657 new allergic rhinitis (AR) and 116 immunotherapy (IT) patients using the rhinitis outcomes questionnaire and its use as a Web-based tool. Authors conclude that practice guidelines use in the treatment of AR and IT patients showed significant improvement and sustained health outcomes over five years. They use this validated electronic rhinitis outcomes questionnaire to record short and long-term improved outcomes, important in clinical patient care, research and pay for performance documentation.

**“Mold Allergy and Live Christmas Trees.”** (Abstract #P59: Nov. 10-11, Noon – 1:00 p.m., *Clinical Connect Program*) – William J. Rockwell, M.D., Bridgeport, Conn., et al – The allergic symptoms associated with decorating the home during the Christmas season are often attributed to the dust mites on ornaments and lights, the scent of the live Christmas tree and the mold that grows on the tree note the authors. Investigators measured mold counts 12 times over a two-week period between Dec. 24 and Jan. 6, after the live Christmas tree was brought inside and decorated. Spore counts rose from a baseline average of 800 spores/m<sup>3</sup> to a maximum of 5,000

spores/mc by day 14 when the tree was taken down. This study demonstrates that mold-sensitive patients may experience allergic symptoms due to an increasing mold spore exposure from having a live Christmas tree in the home.

**“Economic Impact of Allergic Rhinitis to Managed Care: A Retrospective Claims Analysis.”** (Abstract #P234: Nov. 10-11, Noon – 1:00 p.m.) – Anand Dalall, Ph.D., MBA, Research Triangle Park, N.C., et al – In a study of 301,000 insured managed care enrollees with rhinitis, the burden of rhinitis to the health plan in terms of rhinitis-related total medical cost were \$319 and total prescription costs were \$338 for total cost of \$657 per patient. Antihistamine (40 percent) was the most common class of medication utilized, followed by nasal steroids (21 percent). 37 percent of patients utilized more than one class of prescription rhinitis medication to control various symptoms. Authors conclude that medications that can treat more than one symptom effectively may reduce managed care costs.

#### **About the American College of Allergy, Asthma and Immunology**

The ACAAI is a professional medical organization headquartered in Arlington Heights, Ill., that promotes excellence in the practice of the subspecialty of allergy and immunology. The College, comprising more than 5,000 allergists-immunologists and related health care professionals, fosters a culture of collaboration and congeniality in which its members work together and with others toward the common goals of patient care, education, advocacy and research.

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