

An estimated 20–25% of Canadians suffer from allergies.1



Allergy is a chronic disease. It is estimated that 20 to 25% of Canadians suffer from allergies. Many adults and children with one type of allergy will develop other allergies, or even asthma, later in life. ²

Types of Allergies

Five types of allergies exist: airborne, skin-related, food, insect stings/bites, and drug allergy.

Airborne allergy

The respiratory system is usually affected if a person is allergic to tree pollen, grass pollen, animals (such as pets and farm animals), birds, moulds, and house dust mites. Allergic symptoms include sneezing, itching, watery eyes and nose, and wheezing. Hay fever (rhinitis) and/or asthma are the most common results of respiratory allergies.

Skin-related allergy

Allergy to substances such as fragrances, metals and proteins found in latex is known as allergic eczema (contact dermatitis). The symptoms usually include itching, burning, reddening and blisters at the affected area. Eczema most often occurs in early childhood, but also appears in older children and adults.

Food allergy

The most common food-related allergies are cow's milk, egg proteins, soy, peanuts, fish and shellfish. Eczema, diarrhea, and nausea are common symptoms of food related allergies, however severe symptoms include exhaustion, dizziness, swelling of the throat, unconsciousness or cardiac arrest.

Insect stings/bites

Hornets, wasps, yellow jackets, and honey bees are the cause for most insect allergy. The risk of a systemic (body) reaction in patients who experience a local reaction is 5-10%. The most serious allergic reaction to an insect sting is allergic shock (anaphylaxis).

Drug allergy

Prescription and over-the-counter medications can cause drug allergies. Hives, rash or fever are the most common signs of a drug allergy.

Please ask your Allergy Specialist how to further prevent allergies.

References

- Keith, PK et al. The burden of allergic rhinitis (AR) in Canada: perspectives of physicians and patients. Allergy, Asthma & Clin Immunol. 2012; 8:7.
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