

Even if severe allergic reaction is in doubt, epinephrine should be used

August 6 2015

There are times when emergency physicians can't be 100 percent sure a person is suffering from a severe allergic reaction, known as anaphylaxis, and may hesitate to use epinephrine. A new article says when in doubt - administer the epinephrine.

An article in the *Annals of Allergy, Asthma and Immunology*, the scientific publication of the American College of Allergy, Asthma and Immunology (ACAAI), highlights recommendations from a panel discussion among allergists and <u>emergency physicians</u>. The panel of experts examined barriers to <u>emergency</u> care for <u>anaphylaxis</u>, and discussed ways to encourage appropriate prompt treatment, including the use of <u>epinephrine</u> for all severe allergic reactions.

"Our emergency medicine colleagues told us that if patients don't fit established guidelines for anaphylaxis, there may be a reluctance in the emergency room to treat with epinephrine," said allergist Stanley Fineman, MD, ACAAI past president, and chair of the panel. "Because epinephrine is the first line of defense in treating anaphylaxis, the panel agreed it should be used - even if a patient's reaction may not meet all the established criteria. The consequences for not using epinephrine when it's needed are much more severe than using it when it might not be necessary."

The panel also agreed that epinephrine should be given to patients at risk of an anaphylactic reaction based on a) a previous severe reaction or b) those who have had a known or suspected exposure to their allergic



trigger with or without the development of symptoms.

"We want emergency medical personnel, as well as people who have had, or are at risk for having severe allergic reactions to know there is no substitute for epinephrine as the most important tool for combatting anaphylaxis," said allergist Paul Dowling, MD, ACAAI member and panelist. "Antihistamines and corticosteroids should not be given instead of epinephrine because they don't work fast enough."

The other crucial message highlighted by the panel is that anyone seen for anaphylaxis in the emergency room needs to be referred to an allergist to schedule a follow up visit. Allergists provide the most comprehensive follow-up care and guidance for severe allergic reactions.

Provided by American College of Allergy, Asthma, and Immunology

Citation: Even if severe allergic reaction is in doubt, epinephrine should be used (2015, August 6) retrieved 26 April 2024 from

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