

## Take two aspirin and make sure you're not allergic

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Many patients with cardiovascular disease are treated with aspirin because it is effective, low-cost and has few side effects. Some patients who have a reaction to aspirin are told they are allergic without being tested by an allergist, and stop an otherwise effective therapy.

According to a study presented at the American College of Allergy, Asthma and Immunology (ACAAI) Annual Scientific Meeting, 34 percent of patients studied were mistakenly labeled as having aspirin hypersensitivity if they had a history of any gastrointestinal <u>symptoms</u>. The study authors reviewed 5,052 medical records and found aspirin hypersensitivity in only 2.5 percent (131) of the patients. Hypersensitivity is an exaggerated immune response by the body to an agent - but is not the same as a diagnosed <u>allergy</u>.

"Our study showed none of the patients that were determined to have aspirin hypersensitivity were referred to an <u>allergist</u> for testing to determine if they had a true allergy," said Gabriela Orgeron, MD, lead author. "In addition, we found that patients with GI symptoms were mislabeled as having aspirin allergy, which likely deprived them of being treated with aspirin in the future."

While one patient in the study had a severe allergic reaction (anaphylaxis) and one patient had respiratory symptoms, skin reactions were the most commonly documented reaction - found in 19 percent of the patients. In 39 percent of the cases there was not proper documentation of the type of reaction that occurred.



"It's very important that, similar to penicillin, anyone thought to have an aspirin allergy be referred to an allergist for testing," said allergist and study author Sudhir Sekhsaria, MD, ACAAI fellow. "In cases such as those shown in the study, patients are frequently told to discontinue aspirin therapy or are switched to another medication when there is no reason to do so. Allergists can help identify true allergies, and if they are present, help patients find the right course of therapy. If there is not a true allergy, they can help explore how to manage symptoms."

**More information:** Abstract Title: Prevalence and Management of Aspirin Hypersensitivity in the Outpatient Cardiology Practice

Provided by American College of Allergy, Asthma, and Immunology

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