



# Anaphylaxis update

## General Practitioners – June 2013

**ascia**

australasian society of clinical immunology and allergy

### Anaphylaxis fact sheets for parents of children at risk of anaphylaxis

[www.allergy.org.au](http://www.allergy.org.au)

This **NEW** resource will assist you in providing your patients with helpful support information and links about:

- anaphylaxis and its management;
- GP care; and
- roles & responsibilities of the parent, childcare service, preschool and school.

It also includes helpful links to support for patients and carers.



### Assisting your patients to be allergy safe when at school and child care

Parents require the assistance of a doctor to supply up to date information about their child's diagnosed medical conditions, including allergies, to their child's school or child care. WA public schools require doctor confirmed health care and management/emergency response plans:

- ✓ [Form 1](#) - student health care summary, and
- ✓ [Form 4](#) - severe allergy/anaphylaxis or
- [Form 5](#) - mild to moderate allergies inclusive of [Section D](#) - personal ASCIA Action Plans.

[det.wa.edu.au/studentsupport/behaviourandwellbeing/detcms/navigation/wellbeing/student-health-care](http://det.wa.edu.au/studentsupport/behaviourandwellbeing/detcms/navigation/wellbeing/student-health-care)

Personal ASCIA Action Plans **NEW 2013 versions**:

- contain a list of the patient's confirmed allergens;
- provide information on when and how to respond to
- mild-moderate and severe allergic reactions;
- are available for both EpiPen® and Anapen® adrenaline autoinjectors;
- can be renewed by GPs when providing continuing prescriptions; and
- can be completed online and printed from the ASCIA website at [www.allergy.org.au](http://www.allergy.org.au) or hard copies can be ordered from [education@allergy.org.au](mailto:education@allergy.org.au).

### Did you know ... ?

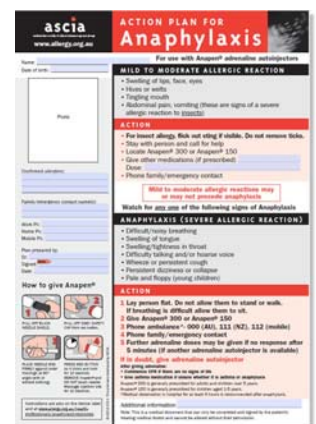
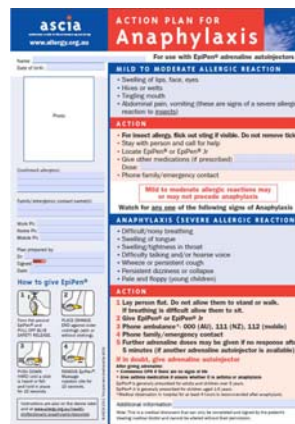
- Free online anaphylaxis training for health professionals is available from the ASCIA website and contains a **NEW** advanced acute care module ideal for GPs and nurses in rural and remote areas.
- Adrenaline is the first line treatment for anaphylaxis.
- Antihistamines have **no role** in the prevention or treatment of respiratory or cardiovascular symptoms of anaphylaxis.

### Australian Resuscitation Council Anaphylaxis Guidelines [www.resus.org.au](http://www.resus.org.au)

The Australian Resuscitation Council (ARC) anaphylaxis guidelines, were **updated** in July 2012, and are now consistent with ASCIA recommendations.

An important update concerns the positioning of the patient in anaphylaxis, as an upright position is a significant risk factor for fatal anaphylaxis. Anaphylaxis can induce hypotension and if the patient is placed in an upright position, empty ventricular syndrome can result. The recommendation is:

***“Lay victim flat, do not stand or walk, if breathing is difficult, allow to sit.”***



Children with diagnosed risk of anaphylaxis require continuing PBS prescription for their adrenaline autoinjector (EpiPen® or Anapen®). When renewing prescriptions, it is important to check that the patient (and carers for children) know when and how to use the device and to keep it readily accessible at all times. Child care services' condition of attendance includes parents providing medication to be held at the service for their child. Generally schools have the same policy.





## Continuing medical education

★ *Approved with ACRRM for 2 Core PDP points*

[www.allergy.org.au](http://www.allergy.org.au)

An online anaphylaxis course for health professionals is freely available from the ASCIA website and includes a **NEW** advanced acute management module, developed for primary care providers including GPs, nurses, paediatricians and emergency department staff, particularly in rural and remote settings.

ASCIA currently has the following e-training courses for health professionals:

- ★ [Anaphylaxis](#)
- ★ [Food allergy](#)
- [Allergic rhinitis](#)
- [Immunotherapy](#)



## Evidence based 'quick reference guides': ASCIA Health Professional Information Papers

### **NEW** Anaphylaxis

To assist primary health care physicians including general practitioners, paediatricians and nurses, in the management of patients with severe allergy (anaphylaxis).

[www.allergy.org.au](http://www.allergy.org.au)

### **NEW** Nutritional Management of Food Allergy

To assist dietitians in the management of patients with IgE and non-IgE mediated food allergy.

[www.allergy.org.au](http://www.allergy.org.au)

## Anaphylaxis emergency management guidelines for health professionals: wall chart

This '**best practice**' wall chart is recommended to be on display in clinical areas where acute management is provided.



Wall chart:  
*Anaphylaxis Emergency Management for Health Professionals*

*Australian Prescriber 2011; 34(124).*  
[www.australianprescriber.com](http://www.australianprescriber.com)

## Differentiating between allergic reactions mild-moderate and severe (anaphylaxis)

Signs and symptoms of **anaphylaxis**

Watch for **any one** of the following:

- Difficult/noisy breathing;
- Swelling of tongue;
- Swelling/tightness in throat;
- Difficulty talking and/or hoarse voice;
- Wheeze or persistent cough;
- Persistent dizziness or collapse;
- Pale and floppy (young children); or
- For insect allergy – abdominal pain, vomiting.

Anaphylaxis **may or may not** be preceded by mild-moderate signs and symptoms such as angioedematous swelling of the lips/face/eyes, urticarial rash, hives or welts and tingling mouth and, in food allergy, abdominal pain or vomiting.

## First line treatment for anaphylaxis: IMI adrenaline into the lateral mid-thigh

Adrenaline works rapidly to reduce airway mucosal oedema, induce bronchodilation, induce vasoconstriction and increase the strength of cardiac contraction.

## Antihistamines have **no role** in treating respiratory or cardiovascular symptoms of anaphylaxis.

- Oral non-sedating antihistamines may be given to treat itch and urticaria.
- Injectable promethazine should not be used in anaphylaxis as it can worsen hypotension and cause muscle necrosis.

Wall Chart: *Anaphylaxis Emergency Management for Health Professionals. Australian Prescriber 2011; 34(124).*

## The Anaphylaxis Model of Care for WA

Will be released in 2013 and draws upon local and international best-practice evidence to make strategic recommendations for the management of anaphylaxis in the future. For information contact the Infections and Immunology Health Network.

[www.healthnetworks.health.wa.gov.au/netnews/infections\\_netnews.cfm](http://www.healthnetworks.health.wa.gov.au/netnews/infections_netnews.cfm)





### Adrenaline autoinjector facts

- Designed to administer a single fixed dose of adrenaline IM into the lateral mid-thigh. Can be administered through a single layer of clothing.
- Temperature sensitive - store at (15-25 °C).  
**Do not refrigerate. Do not leave in heat.**
- Shelf life 12-18 months.
- Two brands are currently available in Australia, EpiPen® and Anapen®. These products have different administration techniques and therefore are **not** approved by the TGA as being equivalent.

### Prescription on PBS

[www.pbs.gov.au/medicine/item/8697R-8698T](http://www.pbs.gov.au/medicine/item/8697R-8698T)

- ✧ Initial PBS authority prescription is provided:
  - by or in consultation with the specialist that assessed the patient to have a significant risk of anaphylaxis; and
  - at discharge from hospital/ED following treatment for anaphylaxis with adrenaline.
- ✧ Continuing PBS authority prescriptions for adrenaline autoinjectors can be provided by a GP.
- ✧ Adrenaline autoinjectors are available on PBS authority prescription, maximum 2 autoinjectors per patient at any one time, no repeats can be issued. Renewal is required prior to the device's expiry.
- ✧ If required, additional devices can be purchased at full price over the counter from a pharmacy.
- ✧ When prescribing adrenaline autoinjectors, it is important to educate the patient and carer (for children) about prevention and management of anaphylaxis and how to use the device.



EpiPen® Anapen®

### Encourage regular practice with a trainer

Encourage patients and carers to regularly practice how to use the prescribed adrenaline autoinjector using a replica trainer device.

Trainers are available from Allergy & Anaphylaxis Australia at [www.allergyfacts.org.au/online-store](http://www.allergyfacts.org.au/online-store)

Education videos on how to administer the device are available at:

- EpiPen [www.epiclub.com.au](http://www.epiclub.com.au)
- Anapen [www.analert.com.au](http://www.analert.com.au)

### ASCIA Prescribing Guidelines\* (differs to the product information leaflet)

Children < 10kg (less than 1 year)	Not usually recommended	* For the full ASCIA prescribing guidelines <a href="http://www.allergy.org.au">www.allergy.org.au</a>
Children 10-20kg (approx aged 1-5 years)	0.15 mg (green label)	
Adults or children over 20kg (approx aged > 5 years)	0.30 mg (yellow label)	

### Availability - Schedule 3 Pharmacist only medicine

Patients personal therapeutic use	Over the counter (full price). PBS authority prescription (subsidised).
Schools & Child Care to supply in first aid kit	Exempt from holding a permit. Over the counter or wholesale.
Organisations to supply in first aid kit	Permit required. Over the counter or wholesale.

### Further information

- ✧ **Australasian Society of Clinical Immunology and Allergy (ASCIA)** [www.allergy.org.au](http://www.allergy.org.au)  
Health professional guidelines, resources, information for consumers and links.
- ✧ **Allergy & Anaphylaxis Australia** [www.allergyfacts.org.au](http://www.allergyfacts.org.au)  
National patient support organisation. Information about managing allergies.
- ✧ **WA Department of Health** [www.health.wa.gov.au/anaphylaxis](http://www.health.wa.gov.au/anaphylaxis).  
Anaphylaxis information for consumers and management guidelines for schools and child care.





# Anaphylaxis: Specialist Clinical Support in WA

Information for WA Health Professionals, June 2013

## Contact 24 Hours On Call Clinical Immunologist or Immunology Registrar



**08 9340 8222**

Emergency Department  
Fax 08 9340 8362



**ROYAL  
PERTH  
HOSPITAL**

**08 9224 2244**

Emergency Department  
Fax 08 9224 1005



**SIR  
CHARLES  
GAIRDNER  
HOSPITAL**

**08 9346 3333**

Emergency Department  
Fax 08 9346 2620  
Ph 1800 247 205



**FREMANTLE  
HOSPITAL**

**08 9431 3333**

Emergency Department  
Fax 08 9431 3711

### Emergency admissions IN ADVANCE :

- ✦ Contact On Call  
Emergency Registrar
- ✦ Fax relevant medical  
information
- ✦ Send written information  
with patient

### Outpatient referral

Fax 9388 7710

Fax 9224 2771  
Ph 9224 2899  
Referral Form

Fax 08 9346 4878  
Ph 08 9346 3105  
Referral Form

Fax 08 9341 2009

### Outpatient Clinics

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|---|--|---|---|
| <ul style="list-style-type: none"> <li>✦ Paediatric Allergy clinics:<br/><i>Morning Tue &amp; Fri<br/>Afternoon Mon &amp; Tue</i></li> <li>✦ Affiliated paediatric clinics<br/>triaged by PMH:               <ul style="list-style-type: none"> <li>⇒ Fremantle Hospital<br/>Monday am fortnightly</li> <li>⇒ Joondalup Health<br/>Campus 1<sup>st</sup> and 3<sup>rd</sup><br/>Tuesday of the month</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>✦ General Immunology &amp;<br/>Allergy clinics:<br/><i>Morning Wed<br/>Afternoon Tue &amp; Thurs</i></li> </ul> | <ul style="list-style-type: none"> <li>✦ General Immunology &amp;<br/>Allergy clinics:<br/><i>Morning Tue, Wed &amp; Thurs<br/>Clinic area 5 Ph 9346 3105</i></li> <li>✦ Anaesthetics<br/>Allergy Clinic<br/><b>Fax 9346 4375<br/>Ph 9346 3011</b></li> </ul> | <ul style="list-style-type: none"> <li>✦ General Immunology &amp;<br/>Allergy Clinic</li> <li>✦ Anaphylaxis Clinic</li> <li>✦ Paediatric Allergy &amp;<br/>Immunology Clinic</li> </ul> |
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### Coordinated care

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| <ul style="list-style-type: none"> <li>✦ Paediatric Allergy<br/>Specialist advice<br/><b>Clinical Immunology<br/>Ph 9340 8310<br/>Fax 9380 6246</b></li> <li>✦ Allergy Clinical Nurse<br/>Specialist 9340 7086<br/>9340 8222 Page 8310</li> <li>✦ Dietitians specialist in food<br/>allergy</li> <li>✦ Psychology, transitioning</li> </ul> | <ul style="list-style-type: none"> <li>✦ Allergy Clinical Nurse<br/>Specialist</li> </ul> | <ul style="list-style-type: none"> <li>✦ Allergy Clinical Nurse<br/>Specialist</li> <li>✦ Duty Anaesthetist<br/>patient advice 24 hours</li> </ul> |
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### Services

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| <ul style="list-style-type: none"> <li>✦ Immunotherapy<br/>insect venom allergy</li> <li>✦ Immunotherapy<br/>common allergens<br/><i>(e.g. house dust mite, grasses)</i></li> <li>✦ Oral food challenge<br/>allergy testing</li> <li>✦ Drug hypersensitivity</li> </ul> | <ul style="list-style-type: none"> <li>✓</li> <li>✓</li> <li>✓</li> <li>✓</li> </ul> | <ul style="list-style-type: none"> <li>✓</li> <li>✓</li> <li>Will be introduced in future</li> <li>✓</li> </ul> | <ul style="list-style-type: none"> <li>✓</li> <li>✓</li> <li>✓</li> <li>✓</li> </ul> |
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### Links

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|--|--|---|
| <ul style="list-style-type: none"> <li>✦ <a href="#">GP Handbook</a></li> <li>✦ <a href="#">Clinical Immunology</a></li> </ul> | <ul style="list-style-type: none"> <li>✦ <a href="#">Clinical Immunology</a></li> <li>✦ <a href="#">Clinical Services<br/>Directory</a></li> <li>✦ GP Liaison 9346 3595</li> </ul> | <ul style="list-style-type: none"> <li>✦ <a href="#">Immunology and allergy<br/>service: GP Handbook</a></li> </ul> |
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