



ALLERGY & ASTHMA CENTER

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Clark R Kaufman MD
Pediatric Allergist



1. My child has allergies when school starts in August. Might this effect his learning?

Seasonal allergies cause nasal symptoms such as congestion, runny nose and sneezing. Itchy eyes and cough may also occur. This results in poor sleeping, daytime fatigue and difficulty in concentration/attention. A medical study showed that children with allergies treated with nonsedating antihistamine medication performed better on testing than children without allergy treatment. Children taking sedating antihistamines, ie benadryl, did more poorly than those taking no medication.

2. My child develops asthma along with his allergies. Are they related?

90% of the time allergies are the cause of asthma in children 5 years of age and older. Allergy may be the cause of asthma in younger children as well. An allergist may help identify those causes and initiate treatment that can improve or even cure the allergies and asthma.

3. My child only develops asthma with exercise or with a cold. What causes this to happen?

Allergy is the underlying reason 90% of the time. Controlling or eliminating the allergy can lessen or eliminate the exercise induced asthma and make children more resistant to picking up a respiratory infection or at least in preventing the infection from exacerbating asthma. An allergist can help identify the causes and initiate a treatment plan.

4. My child develops at least 1 or 2 sinus infections per year. Is this normal?

Repeated sinus infections following colds or allergies is common but not normal. An allergist can help identify the underlying causes. Though allergy is the most common cause, reduced immunity, abnormal nasal airway anatomy, cigarette smoke and even stomach acid reflux, alone or in combination, may play a role as well. When causes are dealt with, sinus infections are no longer likely to occur. Sinus infections, like asthma, eczema, ear infections and itchy eyes, are common complications of allergy.

5. My child's allergy and asthma are controlled with 2 or more daily medications. Is there any way we can reduce or eliminate this treatment?

Yes, by reducing or eliminating exposure to those allergens causing the problem. When that is not possible, especially with outdoor pollens and mold spores, allergy injections can reduce need for medication 90% of the time, and eliminate medication up to 30% of the time. Seasonal itchy eyes, sinus infections and asthma respond very well to allergy injections. These injections contain the offending allergens and no medication. An allergist can establish an allergy action plan to deal with allergies. Also, children receiving allergy injections are less prone to develop other respiratory allergies, less likely to develop asthma in the first place, and less likely to have allergies into adulthood than allergic children who do not get allergy shots.