	Angela
	Summer Sniffles Karen Binkley, MD, FRCPC Angela, a 32-year-old financial planner, has presented with rhinoconjunctivitis each August for the past two years. Angela, a 32-year-old financial planner, has presented with rhinoconjunctivitis each August for the past two years.
	√ Angela, a 32-year-old financial planner, has presented with
	rhinoconjunctivitic each August for the past two years. Recult late-sulful provide
	This year, she has some chest tightness that worsens with exertion and a slight cough. during stamines productive past two years. during stamines productive past two years. Antihistamines productive past two years.
	slight cough.
	√ She has no history of asthma or drug allergies and tests to date have been
۸,	negative.
<u>/Vc</u>	√ She has had adequate histamine control but antihistamines provide only
	partial relief.
	Unauthoris Contraction of the Co
	Her brother has hay fever prohibited. Authorised users can download, Medication: Medication: Medication:
	Medical history:
	Medical history: \[\sqrt{There is a history of depression} \] Medication: Medication:
	Medication:
	√ She is currently taking cetirizine, 20 mg, daily
	Physical exam:
	√ Angela's physical examination showed:
_	Conjunctival injection Turbinates pale and swollen
	Chest clear Otherwise unremarkable
	√ Pulmonary function tests with methacholine challenge show mild-to-
	moderate airway hyperreactivity, consistent with asthma

Diagnosis: Alternaria allergy with What do the allergy tests show? rhinoconjunctivitis Adequate histamine control and a significant reaction to and asthma alternaria. Her tests was negative to dust mite, trees, grass. ragweed, aspergillus, cladosporium, dog, cat and cockroach <u> Management:</u> Limit alternaria exposure by shutting doors and windows from mid-July through first frost / For rhinoconjunctivitis: · Seasonal intranasal corticosteroid Seasonal topical antihistamine or mast cell stabilizing eye drops · Seasonal non-sedating antihistamine / For asthma: · Inhaled corticosteroid twice a day, used seasonally Short-acting β-agonist, as necessary Consider adding long-acting beta agonist Comments: Alternaria is a summer mould. Airborne particles are present from mid-July through to the first frost and are capable of causing rhinoconjunctivitis, but small particle size (i.e., < 10 microns) allows for the penetration to distal airways. An allergy to alternaria is associated with increased risk of severe asthma attacks during the summer months. De Upcoming cases... Dr. Binkley is an Assistant Professor of Medicine, Division of Clinical Immunology and Allergy, University of Toronto and a Staff √ August: Herbal Hazard? Member, St. Michael's Hospital and Sunnybrook √ **September:** Bagel Boggle Health Sciences Centre, Toronto, Ontario.