conferenceseries.com

24th World Nurse Practitioners & HEALTHCARE CONGRESS

June 25-27, 2018 Dubai, UAE



Ravi Gutta Mediclinic City Hospital, UAE

Common allergic reactions

Incidence of allergies have gone up all over the world. Drug allergies, anaphylaxis, food allergy and urticaria are the most common forms of allergic reactions and pose a clinical challenge for nurse practitioners and as well both outpatient and inpatient nurses as they encounter on day to day basis in clinical setting. As allergies are very sub specialized disease diathesis, I want to present core clinical concepts for nurse practitioners to approach the common allergic conditions with standard of care, and evidence based clinical approach for evaluation and management of them. In the current era of polypharmacy, drug allergic reactions are very common and present a great challenge for nurse practitioners. 10% of hospitalized patients may develop beta lactam drug allergy. I will present core clinical concepts based on drug allergy practice parameters update by American academy of allergy, asthma and immunology as a model to have thorough understanding on how to approach drug allergy, how to evaluate for risk assessment for future reactions, clinical approach to patients with drug allergy. Anaphyalxis is considered as killer allergy. Nurse practitioners will encounter anaphylaxis patients in both inpatient and outpatient settings. I will present updated Anaphyalxis practice parameter by AAAAI recommended evidence based clinical guidelines for evaluation and management of anaphylaxis. In incidence of food allergy has gone up by 400% in last decade, raising alarm bells. There is huge void in understanding and clinical approach to food allergy clinical evaluation and management among nurse practitioners. I will present NIAID food allergy guidelines recommended evidence based clinical approach to food allergy. 1% General population encounter chronic urticarial in their life time. For past 20 years there has been on management update for this condition beyond immunosuppressive therapy. In 2014 US FDA approved Omalizumab (Xolair) biological therapy for management of urticarial. I will present rationale, pathophysiology and evidence for such recommendation for nurse practitioners to have better understanding and can start managing these patients in OP setting.

Biography

Medical School-MBBS: Andhra medical college Residency: Internal Medicine Residency, Cleveland Clinic, Ohio, USA Fellowship: Allergy and Immunology, Cleveland Clinic, Ohio, USA Former Head of Allergy Clinics, University of California at Irvine, CA, USA Former program Director, Allergy and Immunology program, UCI, CA, USA Past President, Orange County Society of Allergy and Clinical Immunology, USA. Current committee member of interest sections on anaphylaxis, food allergy and drug allergy committee, altered immune response committee and allergy physician education committee in American academy of allergy, asthma and immunology (AAAAI)

ravi.gutta@mediclinic.ae

Notes: