Dear Colleagues

In March I think we can say we are well into the year. Already I have no doubt you are frantically busy. Thank you to all of you, who have visited our new look website. I do believe it now has a real professional feel and looks good. Remember we have a number of new items for your perusal. There is a whole range of downloadable patient information brochures that Di Hawarden has collated. These have been very popular in the past and I trust you and your patients will utilise our new set. Aspen have kindly purchased the Journal of Allergy and Clinical Immunology for ALLSA and this electronic version is available on the website. You will need your password to access it. I have tried to include a brief abstract each month of an article that has caught my interest. I have been placing a monthly case study on our website. These cases come from colleagues who have had interesting experiences with allergic patients. They make great reading and a test of your knowledge. The June Congress programme is now available and you may register on-line. We are about to launch an Anaphylaxis Register to support and educate patients with Anaphylaxis. Mike Levin has been working hard to get it into shape.

Matt Haus and Eugene Weinberg, our Journal Editors are currently reviewing the look and feel of our Journal (Current Allergy and Clinical Immunology). This Journal is now attracting a large number of International submissions and with the new look we have a world class publication. Remember that this Journal is Department of Higher Education accredited so writing for us will earn your University subsidy points. I have a great edition in store for you in June (The Congress Edition). My team at the University of Pretoria have written some great articles to explore the links between allergy, the lung and the immune system. That is after all the theme of our Congress. I will introduce my team to you in those pages but I am most proud of Refiloe Masekela, Salome Abbott, Wim Wijnant and Adele Pentz. They inspire me.

I want to pay tribute to our Congress organisers, especially Andre van Niekerk and Sam Risenga. Working with Londocor they have created a most magnificent programme. It has so much to offer and I look forward to seeing you at Sun City. Remember that, as someone interested in Allergology you are now part of our family.

Enjoy reading this issue of the newsletter. And remember to let me know what more we can do to make your Allergy life easier.

Regards

Robin Green
INTRODUCING: PROFESSOR MIKE LEVIN

Mike Levin is an Executive Member of the Allergy Society of South Africa. He holds the following degrees: MBChB (UCT), FCPaed (SA), Dip Allergology (SA), MMed (Paeds), PhD (UCT), EAACI Allergy Exam (UEMS), Certificate Allergology (SA), FAAAAI and is an Associate Professor and Head of the Division of Asthma and Allergy, Department of Paediatrics, UCT and Red Cross Children’s Hospital, Cape Town.

Prof Levin runs a large clinical service at the Red Cross Children’s Hospital in Cape Town, South Africa, and is responsible for the General Paediatric and Paediatric Allergy education of 5th year medical students, 6th year students, junior doctors and fellows in training. He is the Head of Paediatric Allergy training for the University of Cape Town’s accredited subspecialisation program in Allergology.

Prof Levin is on the Executive Committees of the Allergy Society of South Africa, responsible for allergy education and training and of the National Asthma Education Program. He is a member of the South African Thoracic Society, South African Atopic Dermatitis Working Group and South African Allergic Rhinitis Working Group. He is a member of the World Allergy Organisation, American Academy of Asthma Allergy and Immunology International Fellow (Middle East & Africa Region Committee Member), European Academy of Asthma, Allergology and Clinical Immunology and American College of Allergy, Asthma and Immunology International Affiliate Member. He is on the board of the Kidz-positive family fund, an HIV service non-profit organisation.

Prof Levin is a regular Examiner for the Diploma of Allergology of the Colleges of Medicine of South Africa, and has served as Examiner for the Diploma in Child Health.

Prof Levin is a regular presenter at National and International Allergy congresses. He has organised several local congresses and the first EAACI / PAPRICA session in Southern Africa (Botswana and South Africa) in April 2013.

Prof Levin has published 35 peer review scientific articles and chapters in medical books and edited a textbook of Paediatrics. He is on the editorial board of two local medical journals, the SA Paediatric Review and Current Allergy & Clinical Immunology Editorial Advisory Board. He regularly reviews articles for the South African Medical Journal and for Current Allergy and Clinical Immunology.
FOCUS ON: DR ANDREW HALKAS

Andrew is a Paediatric Pulmonologist, working in Krugersdorp. He has a keen interest in Allergology and has served on the Executive Committee of the Allergy Society for many years. Andrew has led ALLSA’s governance programme and been instrumental in the ALLSA Governance Charter and other initiatives to improve the way we manage our Society. He has created the Discovery/ALLSA Masterclass that so many of you have attended and enjoyed.

Andrew has been a tireless advocate for doctors in South Africa. He has led the Paediatric Management Group and has ensured that Paediatricians in South Africa are regularly updated on new management tools. The PMG has had a number of national Congresses that have ensured that Paediatricians get CME.

Despite a busy practice he has maintained his academic interest and has lectured and published widely. Andrew has completed a Graduate Degree in Respiratory Science through the University of Western Australia. I know Andrew is keen to complete his PhD. No pressure my friend!

Despite not being re-elected to the current ALLSA Executive Committee, Andrew continues to perform his role as ALLSA Advocate and is investigating Allergy Masterclasses for 2013. Thank you Andrew for your support of ALLSA and Allergy in South Africa.
DIRECTIONS FOR USE

- REMOVE AUTO-INJECTOR FROM CARRIER TUBE BEFORE USE.
- NEVER PUT THUMB, FINGERS OR HAND OVER ORANGE TIP.
- NEVER PRESS OR PUSH ORANGE TIP WITH THUMB, FINGERS OR HAND.
- THE NEEDLE COMES OUT OF ORANGE TIP.
- DO NOT REMOVE BLUE SAFETY RELEASE UNTIL READY TO USE.
- DO NOT USE IF SOLUTION IS DISCOLORED.
- DO NOT PLACE PATIENT INSERT OR ANY OTHER FOREIGN OBJECTS IN CARRIER WITH AUTO-INJECTOR, AS THIS MAY PREVENT YOU FROM REMOVING THE AUTO-INJECTOR FOR USE.

TO REMOVE AUTO-INJECTOR FROM THE CARRIER TUBE:

1. Flip open the yellow cap of the EpiPen® or the green cap of the EpiPen® Jr Auto-Injector carrier tube.
2. Remove the EpiPen® or EpiPen® Jr Auto-Injector by tipping and sliding it out of the carrier tube.

TO USE AUTO-INJECTOR:

1. Grasp unit with the orange tip pointing downward.
2. Form fist around the unit (orange tip down).
3. With your other hand, pull off the blue safety release.
4. Hold orange tip near outer thigh.

DO NOT INJECT INTO BUTTOCK.

5. Swing and firmly push against outer thigh until it clicks so that unit is perpendicular (at 90° angle) to the thigh.
(Auto-injector is designed to work through clothing.)
6. Hold firmly against thigh for approximately 10 seconds to deliver drug. (The injection is now complete. The window on auto-injector will be obscured.)
7. Remove unit from thigh (the orange needle cover will extend to cover needle) and massage injection area for 10 seconds.
Symptoms of Anaphylaxis.
Symptoms of anaphylaxis usually occur very quickly within 15 minutes to 1 hour of exposure to an allergen, sometimes even quicker! The rapid development and worsening of anaphylaxis makes it a very dangerous condition. Features of anaphylaxis may be isolated to a single part of the body or involve several organ systems at one time. It is important to realise that the features of anaphylaxis can range from mild skin changes and swelling of the face to life-threatening involvement of the airway, lungs or heart.

Skin rashes
- Flushing
- Redness
- Itching
- Hives ("urticaria" or "bommels")
- Swelling especially of the face

Abdominal symptoms
- Cramps
- Nausea
- Vomiting
- Diarrhoea

Upper airways breathing involvement
- Swelling of tongue, the back of the throat, the area of the voice box or larynx
- Hoarse voice
- Persistent dry cough
- Throat tightness
- Difficulty breathing

Lung airways involvement
- Chest tightness
- Difficult breathing
- Wheezing noise

Heart and circulation involvement
- Drop in blood pressure
- Irregular heartbeat
- General collapse

AND AS A REMINDER - Treatment for anaphylaxis.
The only effective treatment for the serious effects of anaphylaxis is adrenaline. Adrenaline must be injected into a muscle as soon as anaphylaxis occurs. If someone has an emergency injection with them, either help them inject it into the large muscle of their thigh, or give it to them yourself.