

## Taking an Allergy History



Miss Blue is a 24-year-old student who visits her doctor because she has been suffering from

... a cough and a runny nose.

Dr Do-a-lot discovers that her symptoms have been present intermittently for at least a year, and she thinks...

Perhaps this is not just a common cold...



The doctor takes a history...

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We have been given the honour of making a regular contribution to this journal in the form of the 'ABC of allergy' feature. We have elected to start at the very beginning (a very good place to start) with a history. We hope that you will enjoy this series of illustrated topics in allergy that colourfully cover some of the basics of allergy practice.

Arion D, Wang DY, Church M. *Simply Allergic Rhinitis*. Southampton: AAIR Charity, 2005.

Guidelines for the management of chronic asthma in adolescents and asthmatics. *SA Family Practice* 2007; 49(5): 19-31.

Potter PC, ed. *The ALLSA Handbook of Practical Allergy*, 2nd ed. Cape Town: ALLSA, 2001.

South African Allergic Rhinitis Working Group. Allergic Rhinitis in South Africa: Diagnosis and Management Consensus Document. *S Afr Med J* 1996; 86: 1315-1328.

# IMPORTANT CONSIDERATIONS in TAKING an ALLERGY HISTORY



**The presenting complaint**

## SYMPTOMS

Cough, wheeze, shortness of breath, nasal itch, rhinorrhoea, sneezing, congestion...

## DIFFERENTIAL DIAGNOSIS

Consider other causes for the symptoms



Regular follow up is important  
Good attitude and teamwork are essential for success in management

Medic alert



Level of education  
Socio-economic status  
Access to health care



Geographic location

Allergens are different in different areas.  
A history of relocation may be relevant



All asthmatics need a written emergency plan



Medications currently used.  
Check compliance and technique



Family history  
Genetic factors are important



Other medical conditions and other medications

Allergic march  
Ask about childhood eczema



Diet

Effort tolerance



Sleep patterns



Other manifestations of atopy



Sports and exercise



Pets



Occupation and hobbies

Does your patient work or play with potentially sensitising substances?



Triggers like smoking, pollens, animal dander, house-dust mite, moulds, temperature changes, emotion and respiratory infections



Living environment



A diagnosis is often made, particularly in allergy practice, on a good history. A comprehensive history also allows for judicious allergy testing, and saves both time and expense.