

World Vaccine Meet 2019: Evaluation the etiology of anaphylaxis according to age: A survey of anaphylaxis in Iran-Yalda Hassanpour- Mashhad University of Medical Sciences, Mashhad, Iran

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Since avoidance of triggering agents is the most important step in the management and prevention of allergic reactions, identifying the causes of

incidence of anaphylaxis is, however, very rare and the occurrence of anaphylaxis and anaphylactoid reactions during anesthesia is very ambitious to estimate but has been calculated to range from 1:3,500 to 1:13,000 cases. Another report from Australia estimated the incidence to be between 1 in 10,000 and 1 in 20,000, whereas the most recent report, from Norway, estimated the incidence to be 1 in 6,000. It is not clear whether dentists are familiar with the symptoms, signs and management of anaphylaxis. Therefore, the goal of our study was to regulate knowledge of Iranian dentists about symptom, sign and management of anaphylaxis.

Patient clinical aspects and observations are summarized. Among patients who accomplished anaphylaxis, 63 (58.9%) were male and the median age was 4.0 years (interquartile range: 1.0–8.0 years). Because the ages of patients were not normally delivered, we expressed ages in interquartile ranges. Routine signs and symptoms in patients included skin rash in 92 (86.0%), dyspnea in 73 (68.2%), and facial edema in 68 (63.6%). Moreover, 70 (66.7%) patients had a history of allergies, and 42 (39.3%) patients had a past of food allergies. With regard to supplementary allergy history, 34 (31.8%) had atopic dermatitis, 27 (25.2%) had allergic rhinitis, 19 (17.8%) had asthma, and anaphylaxis was observed in 6 (5.6%) patients. Thirty-six patients (33.6%) had a documented family history of allergy. Allergy produced factors included food in 58 (54.2%), unknown cause in 29 (27.1%), and drugs and immunotherapy in 8 (7.5%) patients. For patients with food-triggered anaphylaxis, Most repeated triggers included nuts in 15 patients (25.9%), milk in 15 patients (25.9%), and eggs in 12 patients (20.7%) Based on the anaphylaxis severity allocation,