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## [Season 1, Episode 6: Addressing and Overcoming Seasonal Allergies](#)

Welcome to Healthier You by Vanderbilt Health & Wellness, a podcast to help Vanderbilt faculty and staff with their healthiest lives.

JH: Hello, everyone. My name is Julie Hurst. I am nurse practitioner in Occupational Health. My guest joining us today is going to be Dr. Basil Kahwash. He is a physician with Vanderbilt Asthma, Sinus, and Allergy program, also known as ASAP, which I think is kind of a cool abbreviation. He is a board-certified physician in both internal medicine and allergy and immunology.

JH: Welcome, Dr. Kahwash. So glad to have you here for this podcast and especially during this busy allergy season.

BK: Thank you, Julie. It is great to be here. Thank you for having me.

JH: You're welcome. Appreciate you being here. I know this is a busy time of year. Obviously, springtime is. Outdoor allergens are causing symptoms in so many of the folks here in Middle Tennessee. So, what are your typical recommendations to alleviate symptoms of allergies? Are those recommendations different if those allergens are an environmental source versus just an animal source?

BK: Yeah, absolutely. I think recommendations will vary based on the individual. Not even just, you know, what are the specific allergens, but each person will have their own lifestyle, their own comfort with taking different medications, their response to different medications, and their own ability to avoid or not avoid certain allergens. So, when we talk about what our recommendations are, yeah, we have some broad recommendations, but we also practice what you will often hear called "personalized medicine". So, somebody who really is affected by allergies, really that person wants to know what it is that they are truly allergic to specifically, at least at the environmental level, if they are affected by what we normally think of as symptoms of seasonal allergies: runny noses, itchy eyes, congestion, things like nasal drainage, coughing, things like that, that can often be causes of allergic rhinitis and environmental

allergies essentially. So, again, the exact recommendations are going to vary according to each patient's situation, but broadly speaking, when we talk about what are you going to do when a patient has environmental allergies, there are three different broad categories of treatments that you can consider. So, avoiding the allergen or controlling the allergen. Basically, if you cannot avoid it entirely, let's say it is your dog or your cat, maybe try and reduce the amount of time in which you are exposed to it, or use air filters or try not to bury your face in it. Sometimes, it is easier to resist than others. Things of that sort.

JH: I have a quick question to that while we are on the topic. So, I know we have gotten very attached to our masks these days following the COVID pandemic. Is there any benefit to using just a mask around dogs, cats, you know to try to avoid, I guess, inhaling all of the allergens that are associated with them?

BK: You know, in theory, yeah. In practice, it's probably a hard thing to do. I don't, you know, I wouldn't count myself as among somebody who, among those who got attached to their masks. You know, for me, I'm kind of like, I will wear it when I think it is the right thing to do medically, but I wouldn't say it is like my favorite thing in the world to put on the mask. But, yeah, I mean we talk about this sometimes even when it comes to people who like to exercise outdoors during peak pollen seasons. We will recommend that they wear a mask or even, not necessarily a surgical mask, but like a gator over their face to try to minimize how much of the airborne particles they are actually breathing in and causing allergy symptoms. So, certainly, that is one type of intervention that you can consider there.

JH: Right, that makes sense.

BK: Yeah, yeah. But, you know, allergen avoidance, allergen control, but also sometimes you just can't get away from everything that you are allergic to so that is where allergy medicine comes in, .

JH: . As far as medications, do you have any that are kind of favored, tried and true?

BK: Sure. I think antihistamines as a medication class have been around for almost 80 years now. We know that histamine is really one of the main chemicals involved in allergic reactions. Whether those are systemic allergic reactions or things like reactions to inhaled allergies, things that cause itchy eyes and runny nose, and things like that. So, oral antihistamines are the first line of treatment for most people, in addition to possibly nasal sprays. I'm talking about the types of medications that you are going to see advertised on TV, you know.

JH: Sure.

BK: I'm not going to use brand names here, but things like cetirizine, which is a second-generation antihistamine, less drowsy. Fexofenadine is another one that is an antihistamine that works pretty well at preventing allergy symptoms, and lasts 24 hours in your system, but does not have the same drowsing effects as diphenhydramine or Benadryl, which is a first-generation, one of the older drugs in that category of antihistamines that can really make a lot of people sleepy and cause drowsiness, and have some negative side effects that a lot of people want to avoid, especially if they are taking something on a daily basis. And then the nasal sprays, things like nasal steroids. You will also see those advertised on TV and nasal antihistamines also recently became over the counter. Those are nasal sprays that we have been using in practice for many, many years, but are now getting quite a bit of traction.

JH: Anything for the eyes?

BK: There are antihistamine eyedrops. I think when it comes to the eyes, it can be challenging. I mean oral antihistamines can help with that.

JH: Right.

BK: Nasal sprays can actually relieve a little bit of congestion and the allergic symptoms of the eyes because...

JH: No kidding.

BK: Yeah, there is an anatomic passage between the eyes and the nose, and if your nose is really blocked up, then that is going to create some, potentially some pressure.. So, I think topically you always have to be careful because we only have two eyes, and they are pretty sensitive. We've got to treat them well. So, don't go too rogue and too cavalier in trying to treat your eye, your itchy eye allergy symptoms. But, there are some over-the-counter topical eyedrops that would be considered that have antihistamine properties, or even things like Artificial Tears, but you just have to make sure that you are staying within the safety limits of those eyedrops, and if you have questions about that, see either your eye doctor or see an allergy and immunology doctor like myself.

JH: Indeed. All right. What would you say, as far as alternative treatments? I know for folks that are battling allergy symptoms I've heard some things about one teaspoon of local honey per day can help when you are relocating to a new area. Is this anything that you've seen that has been helpful to folks, or do you have anyother helpful agents that may not be necessarily of the medicine variety that you also recommend to people?

BK: I think there is so much that a person can do to improve their own health, including their own immune health. I'll address the local honey thing first because that is an interesting story that I started to hear a lot in the last few years. And, I'm not entirely sure, you know, where the idea of it came into being, or how that picked up so much steam. People like eating honey, and I get it. I don't discourage somebody from eating honey if it makes them feel better, if it relieves a little bit of their symptoms and maybe coats their throat, soothes their through if they have been coughing a lot. I don't really think that there is much evidence to show that eating a spoonful of local honey, when you move to a new location, or at the start of any allergy season is going to improve your allergy symptoms at the fundamental immune level. Because, when you have allergies to something, what it is, is basically your immune system is recognizing that thing as a potentially harmful substance. And that is why the symptoms that are generated are, not even from the pollen or whatever it is. It is from your own body's immune system. And so, the spoonful of local honey every day, yeah maybe there is going to be a little bit of pollen from various plants that are circulating, you know, from where the honey is collected. Really, probably not enough...

JH: To make a difference

BK: To train your body to yeah, to tolerate that pollen in the future. Let alone the fact that, you know, the types of things that we tend to be allergic to are not bee-pollinated, they tend to be wind-pollinated.

JH: What does that mean?

BK: Yeah, so, you know, look I feel like maybe I want to verify

JH: Are we venturing into off the beaten path here?

BK: Slightly. But, we are also venturing into you know, maybe botany or things that are you know,

JH: Right

BK: Adjacent to medicine, but not quite part of what we normally talk about in medical schools. But, regardless, so you know, there are certain plants that are flowering plants, where the reproduction process of that plant happens because of insect pollination jumping from flower to flower to flower.

JH: Yes.

BK: There are other plants that are wind-pollinated. So, the plant essentially releases its pollen out into the ambient air., the wind carries it away, and then those pollens get deposited onto other trees of the same species, and that's how the reproductive generation cycle begins.

Honey is generated of course by bees, which are going to be coming into contact with the pollen from the flowering plants, which are again, plants that we tend not to be allergic to. The plants that we tend to be allergic to are those that are wind pollinated. I am talking about things like oak trees, ragweed. Those are all wind pollinated plants. They don't survive by producing beautiful flowers that are then picked up by bees.

JH: I see. Well, that is very interesting information. You know, things that you think about when you are outside and you know that it is allergy season, but things that I just haven't actually looked up enough to be able to understand at that level.

BK: Yeah. Again, I don't discourage anybody who wants to try the honey. I just think that it is not substitute for a comprehensive evaluation of a person's allergies and maybe considering some other things. It shouldn't be something that you are leaning too far on and say, "I'm going to stop all my allergy medicine and just eat honey, and I think that's going to work for me."

JH: Good point. Good point. So, if you like honey, and you like the taste of it, continue to put it on your toast, or bread, or what have you.

BK: Put it in your tea

JH: And put it in your tea, but it's not going to do much for your allergies. All right. Well, so, okay so say you tried, you know, the therapies and things are not really improving the way that you hope, what would you consider that threshold when allergy testing might be recommended and kind of what is involved in allergy testing?

BK: When you get to a point where you've tried the over the counters, and still not cutting it, you are still having pretty bad symptoms, or if your symptoms are happening year round, or so much of the year that you feel like you are basically dependent on these medicines, or you are concerned even about the side effects of the medication, you want to take charge of your health and try and understand your body better and figure out: "what am I allergic to and what can I really do besides just go into the drug store every couple of months and buying a bunch of pills, and then depending on them all the time, or buying a nasal spray and depending on that?" There are some side effects that come with that also. Then, it is

time to go get allergy tested and seek the care of an expert. We have allergy testing that we offer to the common things that people are allergic to here in Middle Tennessee in the environment, and we have been able to identify, you know, on a very, basically, every day people come into our office and we are able to tell them: "Specifically we tested you to this many things and out of all of them, you tested positive to this, this, this, and this" and really no two patients allergy profile is exactly alike.

JH: Right. What symptoms would you say if they occur you certainly need to seek further treatment and get allergy testing? Are there any of those the hallmark symptoms that you usually discuss with patients?

BK: To some extent maybe, you know, things that wheezing or prolonged coughing, if you think that those are caused by allergies, definitely go and get tested because then there may be some other things that are other chronic conditions that are being uncovered by the fact that you have environmental allergies. I would say it is really just the quality of life, the effect that it is having on the quality of life. If it is setting you up for things like sinus infections, which I know that is another subject that we are going to cover later on, but if you are in that category of people where you really feel like you are having a lot of trouble breathing through your nose, and you have had repeated sinus infections, and you think that allergies might be playing a role in that, then yeah, definitely you want to get tested.

JH: OK. Well, speaking of, could any uncontrolled allergy symptoms leave patients more vulnerable to upper respiratory infections, colds, flus, that sort of thing, due to those changes in the nasal mucosa, (also known as just the skin or the lining of the nasal passages, just in case someone isn't familiar with that terminology)?

BK: Yeah, absolutely. I mean, your nasal passage is how most air enters into your body. Most of us rely on predominately nasal breathing. I mean, we obviously breathe through our mouth some of the time, but most of the air that goes into our body is breathed in through the nose.

JH: Sure.

BK: So, if you have allergies, you are breathing in particles, tiny little particles that your body is allergic to so it is recognizing them as potentially threats and it is forming an immune response against them as we talked about before, and what's going to happen with time and that immune response is that your nasal mucosal tissue is going to get swollen, big, inflamed, and full,

JH: And leaky,

BK: And leaky and full of all that mucous and debris, and things like that. And all of that inflammation not only makes it harder for you to breathe, but it makes it more likely that you are going to trap viruses and bacteria within that tissue, which is going to create a potential site for infection to develop.

JH: So, kind of opens the door, is what it sounds like?

BK: Yeah, I mean, it creates a situation that is ripe for the taking for these harmful bacteria and harmful viruses sometimes.

JH: Right. I have this conversation often, that is why I am so interested in this question.

BK: Yeah.

JH: We see, in the Occupational Health Clinic, we see a lot of you know colds, flus, upper respiratory infections, and I am always encouraging folks to make sure that they take the medicine, the antihistamines to kind of help dry up secretions, but also just to help prevent the symptoms of allergies so that it can protect them through the rest of the season so we don't see repeat offenders, I guess. So, I appreciate that, that answer a lot. That is really helpful.

BK: Yeah, maybe some people don't appreciate that. They think that really just treating your allergies is always just a matter of making yourself more comfortable, which by itself that is a justification to treat your allergies.

JH: Sure.

BK: But, there is more to it than that of course, also.

JH: Yeah, it is good for overall health.

BK: Right.

JH: So, here's kind of going off into a different direction, slightly different. Still under the allergy umbrella, so when it comes to rashes, I know that we see a lot of rashes that sometimes can be due to allergies, sometimes can be due to other things. What would you say as far as the characteristics that might help someone identify that a rash is due to allergy versus something else, and would there be a benefit to see a dermatologist versus an allergist?

BK: That's a very good question and a very complex question, and that would take potentially, you know, that's a question that even with days, if you had days, we wouldn't be able to really answer that.

JH: Another podcast.

BK: Yeah, yeah, another podcast series by itself.

JH: Certainly.

BK: Yeah, I mean there is a lot that goes into evaluating a rash and I want to give a lot of credit to my dermatology colleagues. I work closely with several of them here, and you know, they train for years after medical school to learn how to identify and to evaluate a rash, and there are many different types of things that can cause a rash that is not an allergic reaction, but of course allergies can cause several different types of rashes also. I would say in general, and this should be taken with a grain of salt because, you know, there is no hard and fast rule.

JH: Right, we are doing broad strokes right now.

BK: Broad strokes, yeah. If your rash is itchy, then there is a higher likelihood that it's allergic in nature. If a rash tends to move around or doesn't stay in one spot for more than a few days, that's another sign that it could be allergic, could be something that you were exposed to and then, you know you are no longer around that thing anymore and maybe it showed up somewhere else on your body because you

were exposed through some other pathway, we don't know. So, I think that you know, those are the types of questions that we ask about when we are evaluating to see whether somebody had a rash, whether it was related to an allergy or not. There are a lot of other things that can be done, a lot of other tests that can be done. Sometimes you don't get there just by asking questions, or even looking at the rash. Sometimes you really need to do labs. You may need to even take a sample of the skin, a skin biopsy to try and get an idea of what kind of rash it is. And to answer your other question about you know when is the right time to see a dermatologist versus an allergist, I think it is a good idea to see a specialist about your rash if you think, regardless of which specialist you choose, you may need to see somebody

JH: So, I think that gets most of the main questions that I had about allergy and these were developed for you, but I just want to give you this opportunity just to open up the floor and let you talk about whatever topic you think folks might be interested in?

BK: Yeah, a couple of things. Earlier you asked about what can people do on a natural basis if they don't necessarily want to you know take a lot of medication, things like that. You had mentioned the honey, and we addressed that honey example. I think people should take away from this though that you don't always need to rely on pharmaceutical type of medicine. I mean there is a lot of things from a lifestyle standpoint that can be done to improve your health and to improve your immune system. They all tend to take time, but of course, things like good nutrition, making sure you are getting your vitamins, your minerals, your macronutrients. Exercise is always helpful. Sleep is vital for the immune system in ways that we are still in a lot of ways uncovering.

I mean all those things, those are components of lifestyle. Medicine is not like a magic bullet or anything like that where it is just going to open up the door right away to, it's not going to like flip a switch and reverse your allergies right away, but overtime I think we have definitely seen that people will have better overall immune function when they commit to a certain type of healthy lifestyle.

JH: And feel better, too.

BK: Oh absolutely. Yeah,

JH: I mean

BK: Yeah, for many reasons.

JH: There are more things than just your allergies.

BK: Of course, yeah. But those are I mean obviously the immune system and the allergy part of the immune system is one of the many positive benefits that we can point to. And then, I think we discussed also avoidance of allergies. Now, I want to just tell people about some tools that they can consider when they are talking about allergy avoidance. So, you may, if you have pollen allergies and you want to track pollen levels in your area, you can go to [www.pollen.com](http://www.pollen.com). It's a free website and there are pollen trackers all across the country. You can search by zip code and try and see, generally speaking, it probably won't be right in your zip code, but you know, close enough that you have a broad sense of what the pollen levels are on a given day. And, we didn't talk about asthma too much today, but asthma is another condition that can be affected by environmental allergies, and that is kind of what I was

getting at about things that can be signs of a more serious condition that are provoked by environmental allergies.

JH: Right

BK: The wheezing, right, wheezing and coughing, persistent coughing in the setting of allergies could be a sign that you have asthma and you definitely would want to get that checked out.

JH: All right. That's some fantastic information. I actually navigated to the [www.pollen.com](http://www.pollen.com) and there is a lot of valuable information on there. I can't believe I haven't been on there before now. You know, I recently relocated to Nashville. I was just trying to get my, I guess, my allergy knowledge up to speed here, but it looks like Nashville is in the high range starting today for the pollen counts with the top allergen offenders being the juniper, maple, and elm, I guess those are all trees.

BK: They are trees, yep.

JH: Right now. So, it was kind of fascinating just you know getting there and getting some more information about what is here locally that might be causing me to have allergies. Other things that are on the website that are discussed are just more details about all kinds of different allergens, not just the ones that are the top offenders right now, but also links to articles that kind of explain a lot of topics in more depth. There is a forecast tab on there that gives information if you are planning activities, and you know, trying to figure out when to premedicate. So, I just, I was kind of impressed with it.

BK: Yeah.

JH: Like I said, I think it is something that could be a useful tool to our audience today.

BK: I agree. It's an underused resource. I think a lot of people would benefit from it.

JH: Indeed. Well, I appreciate so much, you know, this has been great information and I appreciate so much you coming out and just taking the time to answer these questions and share this information with us. You know, there is a lot of much needed medical and practical advice for all of the allergy sufferers out there that are listening. I know they appreciate it too. This gives them some tools just to better maintain their own health and certainly if they have questions that are beyond what we have been able to assist them with, or their symptoms just don't seem to respond, then they can see ASAP.

BK: Yeah, we didn't even talk about allergy shots, but that is something else

JH: We didn't.

BK: That is something else that could be considered too and you know, that is a whole conversation in itself, but

JH: Well, maybe I'll have to bring you back for a second podcast.

BK: Anytime.

JH: And we will get into more detail.



So, our mission here at Occupational Health is to improve the health of our employees of course. I thank everyone for listening and I hope you enjoyed our season appropriate topic today.

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