

## Proper Care of Allergic Asthma before Hospitalization

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Allergic asthma is one of the most common chronic diseases of childhood and multifactorial disease that influenced by genetic and environmental factors with intermittent symptoms of cough, dyspnea, wheezing and chest pain. The increase in allergic diseases was reconciled with the hygiene hypothesis. When hygiene is in high quality and there are low infections, allergic problems are increasing. Strong relationship between allergic diseases and HLA antigens has been demonstrated. That is characterized by bronchial hyper-responsiveness and variable degrees of airways obstruction. Asthma is a cause of substantial mortality and morbidity and has a considerable economic impact. Physicians, who care of people with allergic asthma, have some urgent and intensive care unit (ICU) hospitalization of these [1,2].

Immunological and inflammatory process is the underlying cause of asthma attacks that are predominately related to tissue reactions. The immunological and inflammatory stages are the target steps for the controller. Allergic asthma is also associated with high direct and indirect health costs, especially related with diagnosis and treatment. Usual asthma drugs for example Inhaled corticosteroids can also have

systemic side effects, including arterial hypertension, diabetes, and obesity. Therefore, avoidance of specific allergens and other precipitating factors is helpful in the management of asthma and prevention of ICU hospitalization [1-3].

Mortality among patients hospitalized for asthma exacerbations accounts for notable number of all deaths from asthma. Management of asthma exacerbations before hospitalization and during transportation to the emergency department could be reducing the overall risk of death and in eliminating race disparities in asthma deaths.

### References

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