Key Messages



IMPACT OF ALLERGY

- Allergy is common; it has increased in amount, severity and complexity with an estimated 8% of children now living with food allergy
- About 1 in 3 of the population or 21 million have a disease where allergy may be involved. Up to 7 million have allergy severe enough to require specialist allergy care
- There was a 615% increase in hospital admissions for anaphylaxis in the 20 years to 2012
- There are currently only 32 whole time-equivalent allergy specialists working in England
- Prescriptions for allergy symptoms cost nearly £1 billion a year about 11% of the total community drugs budget. Prescribing information for the 12 months to February 2014 shows that the rate of prescribing emergency adrenaline products was 353 per 100,000 head of the population, one item per 283 people
- Allergy results in many different conditions, and affects children and adults. It is often complex and multi-system. In some patients it is chronic; in others it appears as acute severe attacks
- The prevalence of diagnosed allergic rhinitis and eczema in children have both trebled over the last three decades
- Seasonal allergic rhinitis is associated with a detrimental effect on examination performance in UK teenagers with a demonstrable drop in grades
- Living with allergy can significantly affect patients' quality of life including ability to work
- However, allergic disease is manageable if patients have access to specific allergy diagnosis, management and support
- Providing an allergy service is cost effective by reducing ongoing illness and the demands this places on the NHS
- Accurate allergy diagnosis allows many patients to self manage. This is in line with Government strategy to increase self care

CURRENT STATUS OF ALLERGY SERVICES

- Allergy services are poor. There is a wide and unacceptable gap between patient need and service provision. At all levels in the NHS there is insufficient expertise in allergy.
- There are only a small number of allergy specialists. This is because few posts are funded and few doctors are being trained in allergy.
- This is because of a lack of funding and priority for allergy. Commissioning for local services is inadequate, often because they are not aware of the need.
- There is a lack of knowledge amongst GPs to ensure that patients are diagnosed or managed in primary care or referred appropriately.

FUTURE IMPROVEMENTS

- GPs, practice nurses and health visitors should receive increased and improved training in allergy to improve allergy awareness, enabling them to manage the simpler allergies in primary care and refer effectively
- Undergraduate medical curricula should include increased and improved education in allergy
- Care pathways should be significantly improved to ensure patients receive an accurate and timely diagnosis and are not relying on wholly inappropriate and potentially dangerous alternative testing
- Critical to better care is to increase the body of expertise. The NASG believes that to address this, more allergy specialist posts need to be created and funded in the NHS
- Priority is given to the clinical and cost effective commissioning of allergy services so that patients have access to appropriate treatment