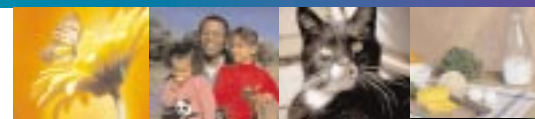




# COLORADO ALLERGY & ASTHMA CENTERS, P.C.

*Breathe Better - Live Better!*



The bi-annual newsletter of Colorado Allergy and Asthma Centers, P.C. Leaders in allergy and asthma care for over 30 years. 9 office locations in Colorado.

*Spring 2006*

## MISSION STATEMENT

"We are dedicated to the delivery of personalized, quality care by putting the patient first. We accomplish this by managing health, treating disease, and fostering education through research and community involvement."

## Our Newest Physician

Robert A. McDermott, M.D.



Dr. McDermott joined Colorado Allergy and Asthma Centers in 2005. He received his undergraduate degree from Colorado State University in Fort Collins, Colorado and his medical degree at the University of

Colorado in Denver where he also completed his residency in Internal Medicine. Following his residency, he completed his fellowship in Allergy and Immunology at the University of Colorado Health Sciences Center and National Jewish Medical and Research Center.

Dr. McDermott is currently in Brighton on Wednesdays, in North on Tuesdays & Fridays, and in Lakewood on Thursdays.



## Allergic Rhinitis

by Mark A. Ebadi, M.D.

Pollen season is fast upon us. Almost 30% of people in the Western

world suffer from environmental allergies. Many people are unaware of how severely allergies can adversely affect their health and daily living. In adults nasal congestion can cause sleep apnea, daily headaches,

depression, daytime fatigue, poorly controlled asthma, and even difficulty concentrating. In children, nasal congestion and chronic mouth breathing can also contribute to the development of craniofacial abnormalities, problems with dentition, and even slowed or impaired learning. Many people never make the connection between these health problems and their allergies. This is one of the reasons why allergies are currently the leading medical cause of lost work and school in the country. With the proper medication, treatment, and information, allergies can quickly become a non-issue in your life. For starters, it is very important that you know the temporal relationship of your particular hypersensitivities. For example, many people are only allergic to tree pollen. If this were the case, you would only need to take allergy

medication during the spring months. Of note, grasses pollinate in the summer and weeds pollinate in the fall. Many people, because they are unaware of their particular allergies, mistakenly take their allergy medications year round. More often than not, this is unnecessary. If you are allergic to the pets living in your home, you may then need to remain

on allergy medications for the entire year. Another treatment option is allergen desensitization (allergy shots) for people who have

perennial allergies, a prolonged allergy season, or are intolerant to medications.

*Continued on page four*

**Many people . . . mistakenly take their allergy medications year round.**

## TIPS FOR AN ALLERGY FREE GARDEN

### Allergy Friendly Flowers and Shrubs:

Alyssum, Hosta, Snapdragon, Hyacinth, Pansy, Azalea, Dahlia, Daisy, Impatiens, Petunia, Iris, Phlox, Lilac, Zinnia, Clematis, Geranium, Lily, Roses, Columbine, Hibiscus and Salvia

**Trees to Avoid:** Cottonwood, Olive, Ash, Aspen, Elm, Poplar, Birch, Juniper, Sycamore, Box Elder, Mulberry, Walnut, Cedar, Oak and Willow



## UPDATE ON CALCINEURIN INHIBITORS

### PROTOPIC (pimecrolimus) and ELIDEL (tacrolimus)

Atopic dermatitis is a chronic inflammatory skin disease that causes significant suffering in both children and adults. It is often the first step in the "atopic march" and may contribute to the severity and persistence of asthma. On February 15, 2005, the pediatric advisory committee of the FDA recommended that there be a "black box" warning for the calcineurin inhibitors because of a potential risk of cancer. The American College of Allergy, Asthma and Immunology and the American Academy of Allergy Asthma and Immunology formed a joint task force to review the data leading to this black box warning. The following is a summary of what they found and their final conclusions and recommendations.

#### Findings by AAAAI/ACAAI Joint Task Force

- Following topical application of calcineurin inhibitors, serum concentrations are low to undetectable. Of note, absorption decreases when dermatitis improves.
- Although there are animal data showing dose-dependent carcinogenicity, it should be noted that lymphoma formation was only reported in mice with the application of calcineurin inhibitors dissolved in ethanol at 47X the maximum recommended human dose.
- Based on "person years of exposure" there is no evidence of increased incidence of lymphoma with a short-term or intermittent long-term use of calcineurin inhibitors, despite the use of these drugs in nearly 7 million people.
- Five independent expert panels, in the areas of dermatology, epidemiology, and pediatric oncology, **concluded that there was no link between calcineurin inhibitor use and increased risk of lymphoma.**
- There is no evidence of systemic immunosuppression from topical calcineurin inhibitors as measured by response to childhood immunizations (B cell) and delayed hypersensitivity (T cell).

#### Conclusions and Recommendations by CAAC Physicians

- After thoroughly reviewing the data gathered by the joint task force, we feel that the benefits of the calcineurin inhibitors, when used correctly, outweigh any potential risk posed by their use. These medications are extremely effective at modulating chronic skin inflammation, while sparing patients the adverse effects of topical steroids, such as thinning of the skin. These side effects are particularly unacceptable when treating facial eczema. We feel that both primary care physicians and specialty physicians are safe in prescribing these medications for their patients, with the assumption they are adhering to a few basic tenets as follows:
  1. Calcineurin inhibitors should be used for the short-term and/or intermittent long-term treatment of atopic dermatitis in patients who are >2 years old and who are unresponsive or intolerant to other conventional therapies.
  2. Children and adults with compromised immune systems should not use calcineurin inhibitors.
  3. It is very important to reinforce the need for adjunctive treatment of atopic dermatitis including liberal moisturization, treatment of potential superinfections, and evaluation and elimination of food and/or inhalant allergies.

...the benefits of the calcineurin inhibitors, when used correctly, outweigh any potential risk

By Mark A. Ebadi, M.D.



## Founder's Award Scholarship

**Applications are due  
June 2006**

The physicians of Colorado Allergy and Asthma Centers, P.C. have elected to offer four \$1,000 scholarships per year to patients. These scholarships are intended to honor four of our Founding Fathers, Sanford Avner, MD, Jerome Buckley, MD, John Selner, MD, and David Pearlman, MD. These scholarships will be given yearly to patients of Colorado Allergy and Asthma Centers, P.C. The eligibility requirements include graduating high school seniors and college undergraduates or graduate students who are in good academic standing and have been accepted by, or are currently enrolled in, an accredited U.S. college. They must have been a patient of CAAC, P.C. for one year minimum, and a U.S. Citizen. Applications are available at each office or on our website.

## Specialty Tests

Colorado Allergy and Asthma Centers perform specialty tests that are not normally performed in our office as a regular routine workup. Our own physicians order the testing or the patients are referred to our practice for these unique tests by their primary care physician. The following is a partial list of tests we are able to complete for our patients.

- Medication Allergy Testing / Desensitization
- Rhinolaryngoscopy
- Aspirin Challenge / Desensitization
- Vaccine Testing / Desensitization
- Food / Preservative Challenges
- Methacholine Challenge

## Not Your Ordinary Classroom

Touch, hear, and interact with learning stations on asthma, smoking, indoor asthma triggers, outdoor air quality, and lung health on our Breathe Better Bus.

### You Can Help the Breathe Better Foundation

- Call to schedule the Bus for your school or community activity
- Become a program volunteer
- Assist in advocacy and community activities
- Donate or help secure funding to continue programs that are free to children and their families.

Contact us at 720.858.7600, ext. 7412 or Rwwil@comcast.net, visit us on the web at [www.breathebetter.org](http://www.breathebetter.org)

Colorado Allergy and Asthma Centers, P.C. and the Breathe Better Foundation are proud to recognize the following multi-year sponsors of the Breathe Better Bus: American Lung Association of Colorado, Soule Family Foundation, Novartis, GlaxoSmithKline, and Schering/Plough. The Breathe Better Bus is operated by the Breathe Better Foundation, the not-for-profit entity of Colorado Allergy and Asthma Centers, P.C.



## “BUY A BUS FOR A BUCK” is back!

Support the Breathe Better Bus during Asthma Awareness Month. Last May \$1,800 was raised through your generosity.



### Jerome ‘The Bus’ Bettis

*of the Pittsburgh Steelers visited CAAC during Asthma Awareness Month last May. He talked about managing asthma with our patients.*

## Asthma & Exercise Clinic Update

by Tim Stewart, PA-C

It has been estimated that Exercise Induced Bronchospasm (EIB) occurs in approximately 70% to 90% of patients with persistent asthma and in about 10% of the general population. The most common symptoms associated with EIB are cough, wheezing, shortness of breath, dyspnea and chest discomfort, prolonged recovery after exercise and limited or decreased endurance.

An EXERCISE CHALLENGE can be completed in order to determine the cause of the exercise induced symptoms, the severity and if EIB is present. Each exercise challenge is preceded by a brief interview to determine the best venue for the challenge (i.e. indoors/outdoors), lung function testing, peak flow measurement, assessing heart rate and blood pressure at rest, and a brief examination of the lungs to listen for abnormal breath sounds. The challenge consists of a 12 minute run designed to allow the individual to experience the exact symptoms he/she have during exercise.

Please contact Dar Herfurt, Program Director, 720.858.7440 for more information.

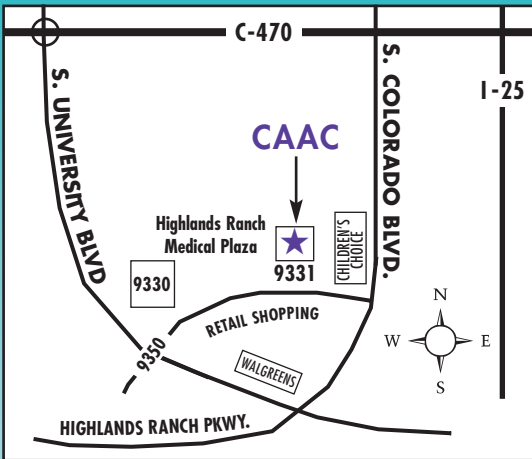


## Allergic Rhinitis *Continued from page one*

This offers a more permanent solution to your annual suffering. Whatever the nature of your allergies, identification of the problem, combined with a well thought out treatment plan, will help you lead a happier and healthier life. Remember breathe better, live better!

## HIGHLANDS RANCH OFFICE NOW OPEN

November 2005, we moved our Littleton office to 9331 South Colorado Blvd., Suite 100. We are now the Highlands Ranch Office! Please see the map for



directions to our newest office. Be sure to stop and say "Hi" to Dr. Adinoff, Dr. Koepke and all the staff! As before, this office is open Monday through Friday and Saturday A.M. only.

## COLORADO ALLERGY AND ASTHMA CENTERS, P.C.

### PHYSICIANS:

David S. Pearlman, M.D.  
Jerald W. Koepke, M.D.  
Allen D. Adinoff, M.D.  
Leon S. Greos, M.D.  
Grant C. Olson, M.D.  
Catherine M. Van Kerckhove, M.D.  
John M. James, M.D.  
Nan Laoprasert, M.D.  
Mark A. Ebadi, M.D.  
Robert A. McDermott, M.D.

### PHYSICIAN ASSISTANTS:

Kim B. Allsop, P.A.-C.  
Michael V. B. Calvin, P.A.-C.  
Penny Forry, P.A.-C.  
Robin MacLaughlin, P.A.-C.  
Mary McAfee, N.P.  
Nicole A. Mezo, P.A.-C.  
Nicole R. Rae, P.A.-C.  
Martha S. Steffen, P.A.-C.  
Tim Stewart, P.A.-C.  
Sheila Wertz, P.A.-C.  
Tamara Young, P.A.-C.

## OFFICE LOCATIONS

### DENVER-LOWRY OFFICE

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### GREELEY OFFICE

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Visit Us on the World-Wide Web at: [www.coloradoallergy.com](http://www.coloradoallergy.com)  
There you can follow the progress of the Breathe Better Bus, check our calendar to see when your allergies are likely to peak, update yourself on clinical trials currently being conducted at our three research centers, fill out an application for employment, or find a variety of resources and links available to you. If you would like to receive this newsletter via e-mail, please let us know at: [newsletter@coloradoallergy.com](mailto:newsletter@coloradoallergy.com)

**DON'T FORGET**

to change the filters in your furnace and swamp cooler.

They harbor dust and mold!

**In Step With Our Research Clinic**

Our practice has been actively involved in clinical trials since our very beginning in 1972. CAAC took part in the first trials in the United States of inhaled corticosteroids. We are committed to staying at the forefront of knowledge in order to provide you with the most up-to-date treatment for your asthma or allergies.

Three of our offices, Lakewood, Centennial, and Denver/Lowry, have specifically dedicated study staffs who work along with our CAAC physician investigators in these offices. Extended hours in the study department allow patients to participate before work or school. Currently clinical trials are under way at each of these offices.

Addresses and phone numbers for each of our research sites are listed on the back page of this newsletter.

**RESEARCH CLINIC LOCATIONS:**  
Lakewood • Centennial • Denver/Lowry