

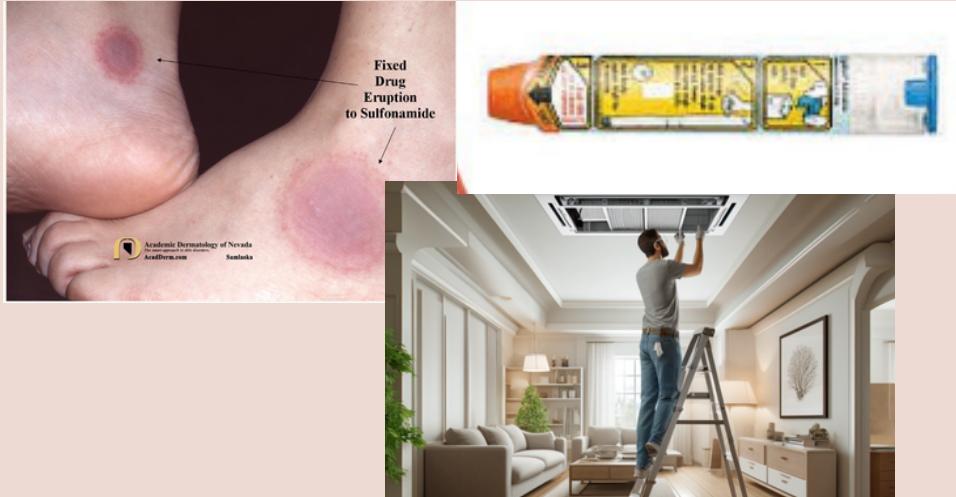
# BENGALURU ALLERGY FOUNDATION



## NEWS LETTER

**FEBRUARY**

# CONTENTS



**PAGE 1**      **FIXED DRUG ERUPTION**

**PAGE 2**      **WINTER ALLERGY-PROOFING:  
THE ESSENTIAL CHECKLIST**

**PAGE 3**      **EPIPEN INSTRUCTION GUIDE**

# FIXED DRUG ERUPTION

The "Repeat" Skin Allergy



Fixed drug eruption is a unique allergic skin reaction characterized by lesions that recur at the exact same anatomical site whenever a person is re-exposed to a specific medication or chemical agent. This delayed type IV hypersensitivity reaction occurs when memory T-cells at the dermo-epidermal junction are activated by an antigen, leading to localized damage to skin cells. While the initial eruption may take weeks or even years of regular drug use to develop, subsequent episodes typically flare up within minutes to hours of re-exposure. Between flares, the skin often retains a distinctive brown post-inflammatory hyperpigmentation because dermal macrophages collect melanin during the healing phase.

## COMMON TRIGGERS

The most common triggers for FDE are oral medications, particularly antimicrobials like co-trimoxazole and tetracyclines, or non-steroidal anti-inflammatory drugs (NSAIDs) such as naproxen and ibuprofen. However, triggers can also include topical agents, herbal supplements, and even specific foods or coloring agents like tartrazine



## IDENTIFYING THE SYMPTOMS

Physically, a typical FDE presents as a single, well-defined, round or oval red or violaceous patch that may blister or ulcerate. These lesions frequently appear on the hands, feet, eyelids, or anogenital areas. While most patients remain systemically well, certain variants, such as mucosal FDE, can cause painful erosions on the lips or tongue, and the rare generalized bullous FDE can be life-threatening, requiring intensive medical care.



# DIAGNOSIS

Diagnosis is primarily reached through a detailed clinical history and physical examination, though doctors may utilize skin biopsies, patch testing at the site of the lesion, or controlled oral challenges to identify the culprit drug. The most critical treatment involves identifying and indefinitely avoiding the specific medication or chemical that caused the reaction. Once the trigger is removed, lesions usually resolve on their own, though topical or systemic corticosteroids may be prescribed to manage symptoms during an active flare. Because subsequent episodes can become more severe or involve more patches of skin, strict avoidance of the identified trigger is the only way to prevent recurrence.



**Patch Testing**



**Skin Biopsy**



# Winter Allergy-Proofing: The Essential Checklist

Protect your home from dust mites, mold, and pet dander this season.

## 1. Living Room & Soft Surfaces

**HEPA Vacuuming:** Use a vacuum with a HEPA filter only. Standard filters often redistribute microscopic allergens back into the air.

**Upholstery Care:** Deep clean fabric sofas and chairs where dander embeds.

**Professional Steam Cleaning:** Once a year, have carpets steam cleaned to reach allergens trapped deep within the fibers.



## 2. The Bedroom "Sanctuary"

**Weekly Hot Wash:** Wash all sheets, pillowcases, and blankets in hot water (130°F+) every week to kill dust mites.

**Barriers:** Install dust mite-proof covers on mattresses and pillows.

**The 1-Year Rule:** Replace any pillows older than 12 months.

**Deep Dusting:** Move the bed frame and vacuum underneath to clear "dust bunnies" that accumulate over winter.

### 3. Kitchen & Bathroom (Moisture Control)

**Mold Eradication:** Use a bleach/water mix (50/50) or a natural solution (1 tbsp baking soda + 2 tbsp white vinegar + 1 quart water) for visible mold.

**Humidity Target:** Keep indoor humidity between 30% and 50%. Anything over 50% causes mold and dust mites to thrive.

**Air Filtration:** Install high-quality HEPA filters in your HVAC system and replace them frequently.



### 4. Long-Term Solutions

**Beyond Cleaning:** Cleaning removes the trigger, but Allergy Drops (sublingual immunotherapy) treat the cause.

**How it works:** Custom-formulated drops build your body's tolerance to allergens over time through consistent, low-level exposure.

# EPIPEN INSTRUCTION GUIDE

An EpiPen is used for severe, life-threatening allergic reactions.

## SIGNS & SYMPTOMS OF A SEVERE REACTION

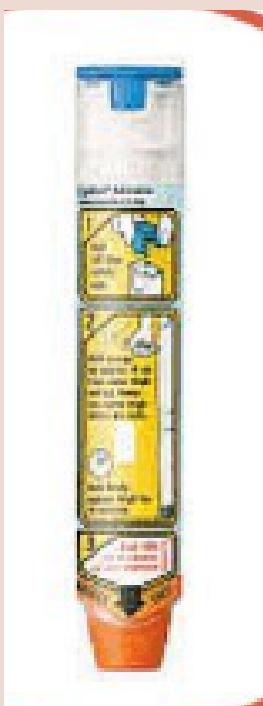
**Lungs:** Chest tightness, cough that will not stop, wheezing, or shortness of breath.

**Heart:** Lightheaded feeling, fainting, weak pulse, or low blood pressure.

**Throat:** Tightness of throat, hoarse/scratchy throat, or drooling.

**Mouth:** Swollen tongue or lips.

**SKIN:** Swelling or severe itching or hives.



## STEP-BY-STEP INSTRUCTIONS

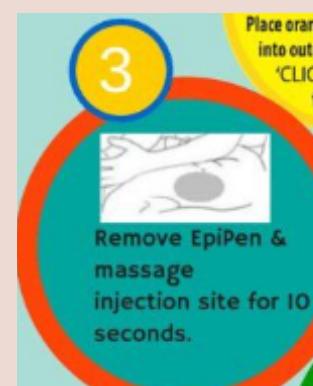
**PREPARE: FORM A FIST AROUND THE EPIPEN® AND PULL OFF THE BLUE SAFETY RELEASE.**



**ADMINISTER: PLACE THE ORANGE END HARD INTO THE OUTER THIGH SO IT 'CLICKS' AND HOLD FOR 10 SECONDS.**



**MASSAGE: REMOVE THE EPIPEN & MASSAGE THE INJECTION SITE FOR 10 SECONDS.**



**FOLLOW-UP: AFTER USING THE EPIPEN, YOU MUST SEEK MEDICAL ATTENTION.**



# ABOUT BAF

BENGALURU ALLERGY FOUNDATION (BAF) IS A CHARITABLE TRUST TO ENHANCE QUALITY OF LIFE IN PEOPLE WITH ALLERGY! IT WAS SET UP IN THE YEAR 2017, AS AN OFF SHOOT OF BANGALORE ALLERGY CENTRE IN A BID TO GIVE BACK TO THE SOCIETY IN WHATEVER WAY POSSIBLE.

## **VISION**

**TO SERVE HUMANITY FOR ENHANCING QUALITY OF LIFE (QOL) BY MEANS OF ALLERGY AWARENESS PROGRAMS GLOBALLY.**

## **MISSION**

**TO ENHANCE THE QUALITY OF LIFE FOR PEOPLE WITH ALLERGIC DISEASES THROUGH EDUCATION, ADVOCACY AND RESEARCH.**

BAF organizes various public welfare activities, to name a few: Asthma camps, Patient Support Group Meetings, Counselling to Allergy patients, Inhaler Bank, Award ceremonies to recognize the professionals for their scientific and clinical contributions in the field of Allergy.

# TRUSTEES

BAF HAS BEEN FORMED AS A NON PROFIT ORGANIZATION UNDER THE LEADERSHIP OF DR. NAGENDRA PRASAD KOMARLA WITH TEAM OF TRUSTEES WHO ARE EXPERIENCED PROFESSIONALS.



**DR NAGENDRA PRASAD KOMARLA**  
**CONSULTANT ALLERGIST,**  
**BENGALURU ALLERGY CENTRE**



**DR PARANJOTHY KANNI**  
**HE SERVES AS RESEARCH**  
**DIRECTOR AT BAF**  
**ACADEMY, BENGALURU.**  
**PRINCIPAL SCIENTIST &**  
**SENIOR PHARMACIST, BAC**  
**PHARMACY**



**DR. PUNEET K NAGENDRA**  
**ASSOCIATE PROFESSOR,**  
**RESPIRATORY MEDICINE,**  
**CDSIMER**



**MRS. SUDHA NAGENDRA**  
**SENIOR COUNSELLOR &**  
**PSYCHOTHERAPIST.**  
**SHE IS ASSOCIATED WITH SUGAMYA**  
**ACADEMY FOR COUNSELLING, BENGALURU.**  
**SHE IS ALSO PRESIDENT FOR THE SWAMI**  
**VIVEKANANDA SHAKSHANIKA SAMSTHE,**  
**BENGALURU.**



**MR. GOPINATH M S**  
**DEPUTY GENERAL MANAGER AT HCL**  
**TECH (BANGALORE), LEADING**  
**TELECOM BSS DELIVERY IN THE ASIA**  
**PACIFIC REGION, WITH OVER 30**  
**YEARS OF IT EXPERIENCE AND**  
**EDUCATION INCLUDING AN MS AND**  
**IIM CERTIFICATE.**



**MR. SATYANARAYANA KASSI:**  
**SEASONED BANKER MR.**  
**SATYANARAYANA (ARSIKERE,**  
**KARNATAKA) SERVED VIJAYA**  
**BANK FOR OVER FOUR DECADES,**  
**LEADING OPERATIONS AND**  
**TECHNOLOGY, AND HOLDS**  
**CREDENTIALS FROM ICMAI AND**  
**CAIIB.**



# BENGALURU ALLERGY FOUNDATION

- **ADVOCACY**
- **PATIENT EDUCATION**
- **INHALER BANKS**
- **AIT AID FOR POOR**
- **ALLERGY CAMPS**
- **RECOGNIZE CONTRIBUTORS  
IN ALLERGY**
- **FREE TREATMENT FOR BPL  
PATIENTS**
- **HEALTH**
- **PROFESSIONAL TRAINING**

THANK YOU

[WWW.BAFACADEMY.COM](http://WWW.BAFACADEMY.COM)

LATEST PROJECTS, WORKSHOPS, FREE RESOURCES, AND MORE. KEEP READING