



What's the forecast? Cloudy, with a good chance of pollen

By Krysten Godfrey Maddocks
Special to the Union Leader

Over the next few weeks, New Hampshire residents can expect to see yellowish dust coat sidewalks, cars and the insides of windowsills. Peak tree pollen season begins in April, followed by the start of grass pollen.

For some, it's a long, unwelcome season of sneezing.

According to the Asthma & Allergy Network, in the United States, 25.7% of adults and 18.9% of children have seasonal allergies, with tree pollen being the most common.

Pollen reactions include runny noses, watery eyes and difficulty breathing because our immune systems mistakenly identify it as an invasive protein. When exposed, the body releases chemicals, primarily histamine, to fight the pollen.

"When we talk about allergies, most people are referring to allergic rhinitis — nasal and eye symptoms. Those can have a big impact on quality of life, causing daytime sleepiness and difficulty concentrating," said Dr. Walter Ryan, an allergist and immunologist at Dartmouth Health in Nashua.

Allergy season isn't confined to a few weeks of the year. While tree pollen and grass pollen emerge in the spring and early summer, ragweed appears in the fall.

"Then you have year-round indoor allergens like pet dander, dust mites and mold," Ryan said. "So, patients are often dealing with a combination of seasonal and chronic exposures."

Because the environmental allergy season is now longer



MYKOLA SOSIUKIN/GETTY

With allergy season under way, pollen in the air can lead to runny noses, difficulty breathing and itchy, watery eyes.

due to climate change, health care providers suggest sufferers avoid exposure to begin with, if possible. Pollen counts are typically higher in the morning and on windy days, so it's better to engage in outdoor activities later in the day, Ryan said.

"People can track pollen counts through sources like pollen.com or the National Allergy Bureau, although those systems aren't perfect because reporting isn't always consistent," he said.

Where to get relief

It can be difficult to determine whether your symptoms are triggered by pollen, an indoor allergy or something else, said Dr. Louie Olive, a family practice provider at Elliot Primary Care at Londonderry.

Before assuming you have a seasonal allergy and spend money on medications, you should see your primary care provider if you are at all unsure, he said.

"This is the trickiest time of year because we're getting some

environmental allergies and it's still really cold," he said. "We're having some influenza and RSV activity, so there is sometimes a little bit of an overlap."

If you do know you have seasonal allergies, there are a number of over-the-counter treatments to choose from. To combat sinusitis, you can try nasal steroids like Flonase, Nascort or Rhinocort, Ryan said, but you need to use them for several

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Track local pollen counts with Dartmouth Health

Feeling the effects of spring allergies?

A pollen-counting station at Dartmouth Hitchcock Medical Center in Lebanon can give you the data you need to manage your seasonal allergies.

This season marks the second spring the hospital's rooftop pollen counter will provide regular data on pollen counts.

Led by Dartmouth allergy and clinical immunology specialist Dr. Erin L. Reigh, the station collects daily measurements of tree, grass, weed and mold pollen.

Data is then shared with the American Academy of Allergy, Asthma & Immunology's National Allergy Bureau (NAB). Reigh launched the project in fall 2024, after she was asked to oversee a new monitoring site.

After completing certification and training, she worked with engineers to install the collection device on the hospital's roof.

The system pulls in air samples, capturing pollen and mold spores on a rotating drum coated with

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Top tips for managing allergy symptoms

By Krysten Godfrey Maddocks
Special to the Union Leader

Congestion, runny nose and sinus pressure can sap your energy during allergy season, but small daily habits can make a big difference. Stacy Casella, a nurse practitioner at Concord Hospital Otolaryngology, shares practical ways you can reduce exposure and manage symptoms.

Start with nasal care

Keeping your nasal passages clear can reduce irritation and inflammation. Casella suggests that patients use saline rinses regularly.

"Rinsing your nose with saline multiple times a day clears out all the allergens that you're breathing in," she said.

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No Flavors this week

The monthly NHMedical section takes the place of this week's Flavors section. Flavors, with Our Gourmet, returns next week.

Adult-onset allergies on the rise: What to do when your immune system changes

By Krysten Godfrey Maddocks
Special to the Union Leader

Most people outgrow childhood allergies to eggs or milk. But for a growing number of adults, new allergies may suddenly appear.

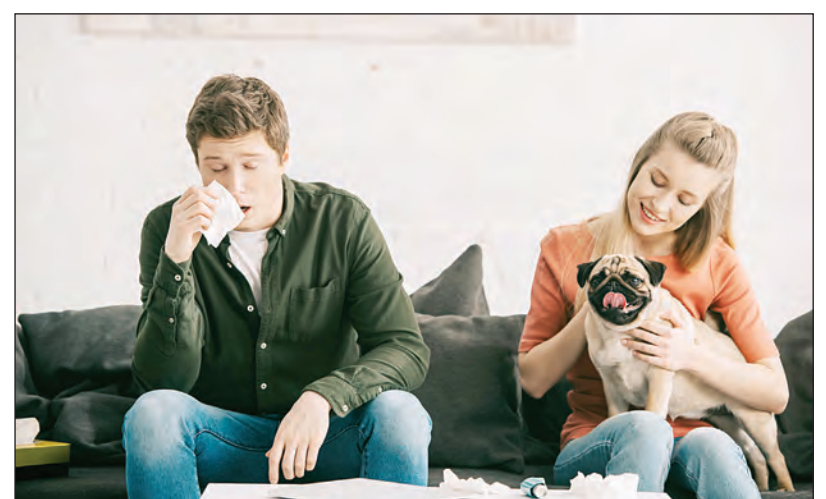
Reactions can be mild or severe, but they are almost always puzzling.

However, the CDC reports that nearly 1 in 3 U.S. adults has some type of allergy, and other studies say about 25% of adults without childhood allergies go on to develop new ones later in life.

Why are adults suddenly unable to enjoy a milkshake or tolerate ragweed?

Health care providers say there's no single explanation, but that adult-onset allergies are driven by a combination of internal and external factors.

Genetics may play a role, too, according to Dr. Amitha Harish, an allergist and immunologist with



LIGHTFIELDSTUDIOS/GETTY

Adult-onset allergies happen when someone starts reacting to something that never caused problems before, often after age 20.

Southern New Hampshire Asthma & Allergy.

"Adult-onset allergies are basically when people develop a new immunologic response to

something that was previously not bothering them or that is harmful in the environment, after the age

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Forecast

days to get relief.

One of the most popular medications used to reduce allergy symptoms such as watery eyes, hives or congestion right away is Benadryl, a first-generation antihistamine sold over the counter.

Claritin, Zyrtec and Allegra are popular second-generation medications that reduce symptoms by blocking histamine, and tend to make patients feel less drowsy, Ryan said, making these second-generation antihistamines a better choice for most.

“First-generation antihistamines have anticholinergic effects, which can impair cognition, especially with long-term use,” he said.

“That’s why we generally recommend second-generation antihistamines. Even then, people should understand that not all of them are truly non-sedating.”

Olive tells patients that choosing the right allergy medication for your symptoms can be challenging because brands may have several different formulations. If you chose an antihistamine combined with something else, it could introduce side effects, interact with other medications you’re taking or do nothing.

“There are good over-the-counter options, but it’s better to go over them with somebody who feels really comfortable going over exactly what you need,” he said.

“I might tell a patient to take Claritin but then a patient will get Claritin-D, which contains two medicines, one of which is loratadine, which is safe to be on every day. The other is a decongestant that can affect blood pressure and (is one) you shouldn’t be on long term.”



Dr. Louie Olive



Dr. Walter Ryan

Can allergy medication suddenly stop working?

If you’ve been taking a particular antihistamine to control your allergies regularly and it isn’t stopping the sniffles this year, it might be time to reevaluate your treatment plan, Ryan said.

“It’s not necessarily that it’s stopped working. It’s either that symptoms are more severe and they need an additional mechanism, or they’re under-dosed or they have something else going on,” he said. “In research, antihistamines seem to bind to the receptor well.”

In patients who use nasal steroids that no longer appear to keep their noses clear, Ryan said blood pressure medicine can keep their blood vessels dilated, causing a chronically stuffy nose. And, sometimes, when people get older, the lining of their nose gets thinner.

When it’s time to test

For patients who’ve avoided known allergens and have tried different over-the-counter medicines with no relief, it might be time for allergy testing and more aggressive treatment.

Providers can order blood tests or refer you to see an allergist, who can conduct a skin prick test that can pinpoint exactly which outdoor allergens trigger your symptoms.

During skin testing, a provider will put a drop of an



MJ_PROTOTYPE/GETTY

Seasonal allergies can be treated with a number of over-the-counter medications, including nasal steroids and antihistamines.

allergen into your skin via a small prick that’s relatively painless. If are allergic to that allergen, you’ll typically react by forming a mosquito bite-size bump. Blood testing can determine if your body’s making something called an IgE (Immunoglobulin). IgE is a type of antibody that plays a central role in allergic reactions.

Allergy sufferers may benefit from immunotherapy for more serious allergies. This approach is often recommended for patients whose symptoms are not well controlled by medication, who cannot avoid their allergy triggers, or who experience side effects or drug interactions from standard treatments.

Allergy shots are commonly used to treat seasonal allergies caused by pollen, year-round indoor allergies such as dust mites, mold and pet dander, and reactions to insect stings.

However, they are

typically not used for food allergies or chronic hives, Ryan said.

Immunotherapy modulates your immune system or how you make the antibodies that cause allergy. Patients can take sublingual drops or tablets, or they may need regular injections, Ryan said. Injections can be time consuming, and require patients to visit as often as weekly for the first six months. Maintenance doses require less frequent visits, but patients still need to keep up with them.

“It used to be thought that they were lifelong therapy, but you reach the maintenance dose usually after six months of injections and then take maintenance doses for three to five years,” Ryan said. “If a person’s been on injection maintenance for a year and hasn’t improved, most likely it’s not going to help them and they should just probably stop them.”

Ignoring allergies can make them worse

While some people might opt to tough it out this allergy season, that approach can backfire. Chronic exposure to outdoor allergens tends to get worse over time, particularly because your immune system weakens as you age.

Sometimes, sinus infections caused by allergies can be treated as an infection, causing patients to unnecessarily take antibiotics.

If you are unsure if your symptoms are due to allergies or you need a better treatment plan, it’s best to be seen, Olive said.

“Generally speaking, recurrent exposure to the allergen results in more intense reactions,” he said. “And the second thing is, if the tubes in your sinuses and your ears are all clogged, then you’re at increased risk for an infection setting up there.”

Pollen

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a sticky film. Because it takes time to process the samples, reported counts typically reflect conditions from one to two weeks earlier.

The new station fills an important gap. Previously, the closest monitoring site to New Hampshire was in Rochester, New York, meaning local forecasts often relied on distant data.

“There are only about 60 active certified pollen counting stations in the United States, which means the pollen counts that patients see on the news are sometimes gathered from stations hundreds of miles away,” Reigh said in a press release. “A lot of pollen counting stations are also located in big cities, which is obviously a very different environment as well. I really wanted more accurate information for our patients.”

With more localized data, health care providers hope to better identify problem allergens and refine treatment plans for their patients. The station may also help patients better understand and prepare for their symptoms throughout the season.

— Krysten Godfrey Maddocks

Interested in updates?
People can subscribe by visiting the National Allergy Bureau’s web site:
pollen.aaaai.org.

Several Hundred New Hampshire Nursing Home Residents are Experiencing Severe Medicaid Cuts

Despite bipartisan efforts by Gov. Ayotte and legislators to shore up Medicaid funding, care in many nursing homes, including Holy Cross Health Care Center in Manchester, took severe cuts January 1.

Sister Jacqueline, a former school principal, is among Holy Cross residents affected, as her care funding was cut 11.74%, or \$31.14 per day. Holy Cross was among 19 hard-hit nursing homes where daily care cuts were no less than \$10.47 per resident and as much as \$45.89 for another small nonprofit.

The state budget cannot be balanced through such cuts.



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Adult

From Page B1

of 20," Harish said. "Even if you've tolerated something for years, the immune system is constantly changing."

Which allergies are most common in adulthood?

Adults can suddenly become allergic to pollen, dust, certain foods or pets. While it may seem arbitrary, genetics can predispose you to allergic reactions in certain environments.

"A lot of times, when we interview patients for the first time, we'll find out there is a family history of allergies, but a person may have moved from Arizona to New Hampshire, and all of a sudden spring pollens are really affecting them," Harish said.

Sudden food allergies are less common, but the most common adult onset food allergies include shellfish, fish and occasionally nuts, Harish said.

Adults might also develop what's called oral allergy syndrome. This happens when you eat certain raw fruits or vegetables, and all of a sudden you get an itchy mouth, a little bit of mild swelling or throat discomfort.

"That's due to a cross reactivity between certain pollen allergies they have and those fruits or vegetables," Harish said.

Is it an allergy or an intolerance?

There are certain foods that can make us feel bloated or nauseous, but we aren't truly allergic to them. A true allergy is a reproducible immunologic reaction that usually occurs in a timely and consistent manner.

For those who have environmental allergies, symptoms can include sneezing, itchy eyes, runny nose, postnasal drip and

difficulty breathing.

Individuals with food allergies may develop hives, swelling, an itchy mouth, nausea and vomiting, or shortness of breath promptly and consistently after ingestion, Harish said.

Food intolerances present differently.

"The symptoms are usually a little bit more vague and have to do with digestive issues. But I see at least three or four people every week because primary care doesn't know what to do with these patients," she said.

"And the patients are frustrated. Sometimes they get more frustrated when we don't test them because testing is not appropriate." Up to 30% of Americans report trying to avoid gluten, often via self-diagnosis. Celiac disease is a chronic autoimmune disorder where the ingestion of gluten — a protein found in wheat, barley, and rye — triggers the immune system to attack and damage the lining of the small intestine.

Studies have estimated that 0.7-1% of the U.S. population has confirmed celiac disease, and another 6% are estimated to have non-celiac gluten sensitivity.

Harish explains that celiac disease is not an Immunoglobulin (IgE)-mediated disease, or a reaction triggered by proteins, but it is an immunologic condition that providers can test for.

However, there are a lot of adults who don't feel well when they eat gluten and there is no definitive test for that, she said.

"A lot of those patients have what we call non-celiac gluten intolerance. And there's no magic test. Or people might tell me they feel terrible when they have eggs, but they don't have an egg allergy," Harish said.

Food intolerances can increase with age because people undergo hormonal changes.

Also, some studies show that ultra-processed foods introduce allergens through cross-contamination, or by creating new allergic compounds.

In other cases, there is no clear reason for new symptoms adults may be experiencing.

Isolated digestive issues usually point to food intolerance, Harish said. Patients could have an absence of an enzyme needed to fully digest a food. Lactose intolerance is a common example. Conditions like irritable bowel syndrome can cause cramping, constipation and diarrhea.

People also can be sensitive to food additives, including sulfites used to preserve dried fruit, canned goods and wine. These can all trigger asthma attacks in people who are sensitive to food additives, she said.

"Allergy testing is not helpful in the case of intolerance, and currently, there is no existing validated intolerance of sensitivity testing," she said. "Contrary to their claims, 'food-sensitivity testing' does not help you discover your food allergies."

Tips for adults who may have acquired an allergy

For adults experiencing new or unexplained symptoms, careful observation is key.

You may not be allergic to one thing, but react to a combination of the environmental factors, foods and even exercise.

"I've had a patient who was not necessarily soy allergic, but had oral allergy syndrome, and soy can be one of those triggers as well," Harish said.

"It's interesting because

he was a vegetarian who ate soy on a pretty moderate basis, but he went out golfing in the spring and had a protein drink that was purified soy, and he had a pretty significant reaction."

If you're noticing new reactions, she recommends tracking:

- Foods you've eaten (including ingredient lists).
- Environmental exposures.
- Activities such as vigorous exercise.
- The timing of your symptoms.

Patterns can help identify health care providers identify your triggers — especially in complex cases involving multiple factors. A true diagnosis ultimately requires both a clinical history of reactions and a positive test, she said.

A primary care model built for complex allergy questions

For patients struggling to understand allergy symptoms or food intolerances, time and continuity of care can make all the difference. At Delphi Enhanced Primary Care in Bedford, doctors work within a model designed to address a common frustration in modern medicine: rushed visits and limited access.

A team of three, soon to be five, Delphi doctors see a smaller number of patients and can offer longer appointments and same- or next-day visits. Individuals, couples or families pay a monthly access fee that ranges from

\$120 to \$350 to get a more personalized experience with their health care provider.

The practice's structure can be particularly helpful for people looking to get to the bottom of allergy symptoms or food intolerances, said Dr. Marcy Boucher, a family medicine doctor at Delphi Enhanced Primary Care.

"It can be frustrating for people to figure out what they're not tolerating. In a practice like mine, we have the luxury of time where we can sit down, look at a food journal with

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Managing children's food allergies at school

American Academy of Pediatrics

About 1 in every 10 children and teens in the U.S. has a food allergy, an abnormal immune response to a specific food. That's roughly two kids per classroom.

Food allergies have risen by 50% since the 1990s. With this in mind, the American Academy of Pediatrics advocates for the health of all children who must avoid certain foods to stay healthy.

AAP believes that a team approach among parents, pediatricians and schools is the best way to ensure that kids with food allergies can stay safe at school. State and federal laws can make this partnership even more effective. For example, many states have authorized schools to keep open stocks of epinephrine on hand so they can treat any child showing signs of an allergy flare-up, whether or not a prescription has been issued.

The immune system normally protects the body by fighting off germs like bacteria and viruses, but when someone has a food allergy, their immune system treats a certain food like it's a harmful germ.

While 90% of food allergies involve exposure to the top nine allergens (peanuts, tree nuts, dairy/milk, eggs, sesame, wheat, soy, fish and shellfish), people can be allergic to many other foods. Even small amounts of a food allergen can cause a reaction that can be very serious.

Avoiding allergic reactions means being prepared for allergic emergencies — wherever and whenever they might happen, including at school. Since kids spend roughly



SANDRA CUNNINGHAM/DREAMSTIME/TNS

Food allergies have risen by 50% since the 1990s. With this in mind, the American Academy of Pediatrics advocates for the health of all children who must avoid certain foods to stay healthy.

1,000 hours at school each year, it's essential to ensure they are safe, supported and ready to learn.

Getting a food allergy diagnosis is an important first step. Your health care team will ask detailed questions about the reaction including signs and symptoms your child experienced, as well as the timing of the reaction.

Your doctor can use specific testing to help confirm a food allergy. They also may recommend that your child be evaluated by a board-certified allergist. Allergists can perform skin testing and an oral food challenge, if needed, to confirm a food allergy diagnosis. This can also help keep a child from having an overly restricted diet, while avoiding the foods that truly cause a reaction.

If your child is diagnosed with a food allergy, it's important to have a clear plan to help them stay safe — especially at school. This includes knowing which foods to avoid and being prepared in case of an emergency. They'll need an allergy and

anaphylaxis emergency plan.

Kids eat meals, snacks and treats during the school day, so having a system to prevent accidental exposures to food allergens is important. School staff should be trained on cross-contact protocols and ensure all eating utensils are properly stored and washed to prevent contact with potential allergens that could trigger a reaction when used by a child with an allergy.

Staff should also discourage children from sharing snacks and encourage them to eat only the food intended for them.

Although eating an allergen is the most common and important trigger of severe allergic reactions, there are also other ways to come in contact with a food allergen. Some classroom materials may contain hidden food allergens such as play dough with wheat or finger paints that contain milk proteins. These products don't always list their ingredients. So it's a good idea to ask your child's teacher or

school staff about the materials they use. Let them know about your child's allergies so they can help keep your child safe.

Rarely, food allergens can get into the air. For example, steam from cooking or powders used in class can be breathed in and cause a reaction. A child's skin usually does a good job keeping allergens out of the body. But if they touch a food allergen with their finger and then put it in their mouth, they can have a reaction.

Schools and students can follow simple steps to avoid these types of reactions, such as hand washing, and surface and dishware/utensil cleaning. As students get older, they can gradually take on more responsibility. You can also coach your child to ask for help when they feel allergy symptoms starting.

If they are exposed to an allergen, the child can have a reaction called anaphylaxis, which can progress quickly and can be life-

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PHEELINGS MEDIA/GETTY

Patients with allergy symptoms or food intolerances may benefit from longer appointments and more personalized primary care.

Primary

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patients and say, let's try cutting out this," she said. "Then, I can say I want to talk to you in two weeks and see how you're feeling. Because a lot of that is trial and error about what makes people not feel well and what to cut out. We try to get people to the point where they can add foods back in, but that's a whole other tedious process."

Even if patients aren't sure whether or not they have an allergy or intolerance, they should take symptoms seriously, Boucher said. A true food allergy can lead to death if a person consumes a food to which they are truly allergic.

"If someone says, I cannot eat that, we really have to take them at their word," she said. "And with the complexity of our food supply, when we're talking about intolerances, we

need to give people support and let them know that what your body is experiencing is real and we can help you work through it."

Like other primary care doctors, Boucher can prescribe allergy medications and refer patients to area specialists for further allergy testing.

Doctors at Delphi can also help patients find the most affordable testing options.

"I think a good way to think of us is how you would remember that small town doc who knew you well and who took care of your parents and grandparents," Boucher said. "That's the dream of how I wanted to practice primary care when I was a medical student, and that's what we're trying to create here at Delphi."

— Krysten Godfrey Maddocks

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Tips

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• Reduce exposure after being outdoors. Pollen and other allergens can cling to your body and clothing after outdoor activity. Casella suggests showering after you've been outside, changing clothes and washing your face to rinse away allergens.

• Control your home environment. Indoor air quality can also trigger allergy symptoms. By keeping windows closed during allergy season, you can keep some airborne irritants out. Air conditioners and air purifiers can also filter indoor air.

• Target dust mites. Dust mites are one of the most common allergens, and these microscopic creatures can be found on



Stacy Casella

pillowcases and bedspreads. Casella suggests washing all bedding weekly and drying sheets, blankets and comforters on high heat.

You should also consider putting dust mite covers on pillows and mattresses.

• Don't overlook your heating system. You might still be running your furnace on cold, early spring days, blowing dust into your home. Make sure forced hot air systems are cleaned to eliminate dust and consider using vent filters, Casella said.

• Manage pet allergies (without giving up your pet). For most people, giving up a beloved dog or cat isn't an option — even if a loved one suffers from pet allergies. By keeping pets out of bedrooms, bathing them regularly and using air purifiers, you help reduce symptoms for family members.

• Be strategic with medications. Medications that may work for some people may not work for you, particularly if you've been using the same medication for a while or experience drowsiness with some antihistamines. You should also discard nasal sprays after you've used them for a while.

Family members with pet allergies who still experience symptoms even while on medication might consider moving to immunotherapy — or allergy shots — if they aren't getting relief, Casella said.

If you have a known food or insect allergy, always carry an unexpired epinephrine auto-injector (EpiPen). Neffy (the nasal epinephrine spray) is also now available on the market as the first needle-free alternative to an EpiPen for emergency anaphylaxis treatment.

School

From Page B4

threatening. Serious allergic reactions like anaphylaxis are reported in about 1 out of every 15 schools in the United States each year.

It's important to recognize the signs of anaphylaxis right away. Using epinephrine early — before the reaction gets worse — can keep a reaction from becoming life-threatening. That's why having an allergy and anaphylaxis emergency care plan is so helpful. Ideally, your doctor will create one for your child right when they

are diagnosed with a food allergy, at the beginning of the school year and when the allergy list changes.

Some schools also use an Individualized Health Care Plan (IHCP) — a nursing document that outlines how your child's allergy will be managed throughout the school day.

Because food allergies can interfere with breathing and restrict diet, your child may qualify for special accommodations under Section 504 of the Rehabilitation Act of 1973. A 504 plan is a

legally binding document that ensures your child can safely participate in their daily activities at school alongside their peers. It also provides legal protections if the school is unable to meet your child's needs.

To help your child stay safe, give their school an allergy and anaphylaxis emergency plan signed by your child's doctor, any school-specific forms required to give your child medicine and epinephrine to treat potential reactions.

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When you need a primary care provider, we've got you covered. With more than 140 primary care providers, across 17 locations accepting new patients, you can access the care you need. Our team-based approach provides a more integrated and patient-focused approach to primary care, leading to better overall health and well-being — delivered right in your community. With team-based care, you receive:

- Resources and guidance to support your health needs;
- A broad range of services provided within the primary care setting;
- Access to a strong network of specialists for specialized care.

ACCEPTING NEW PATIENTS AT ALL PRIMARY CARE LOCATIONS.

Concord Family Medicine

CH Medical Offices North
18 Foundry Street, Suite 201, Concord, NH 03301

Concord Hospital Family Health Center

Memorial Medical Office Building East
246 Pleasant Street, Suite G200, Concord, NH 03301

Concord Hospital Family Health Center - Hillsboro

15 Antrim Road, Hillsboro, NH 03244

Concord Hospital Internal Medicine

Memorial Medical Office Building West, Floor 2
246 Pleasant Street, Concord, NH 03301

Concord Hospital Internal Medicine - Laconia

724 North Main Street, Laconia, NH 03246

Concord Hospital Pediatrics – Belmont

8 Corporate Drive, Belmont, NH 03220

Concord Hospital Primary Care - Belmont

8 Corporate Drive, Belmont, NH 03220

Concord Hospital Primary Care - Franklin

15 Aiken Ave, Franklin, NH 03235

Concord Hospital Primary Care - Gilford

14 Maple Street, Gilford, NH 03249

Concord Hospital Primary Care - Meredith

238 Daniel Webster Highway, Meredith, NH 03253

Concord Hospital Primary Care - New London

255 Newport Road, New London, NH 03257

Concord Hospital Walk-In Primary Care

1 Interchange Drive, Concord, NH 03301

Epsom Family Medicine

CH Medical Office East
1990 Dover Road, Suite 201, Epsom, NH 03234

Family Physicians of Pembroke

121 Pembroke Street, Pembroke, NH 03275

Family Tree Health Care - Hopkinton

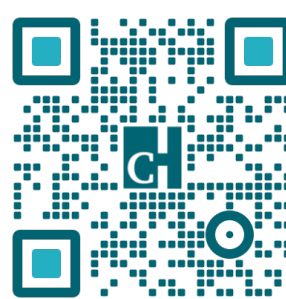
19 Farrington Corner Road, Hopkinton, NH 03229

Family Tree Health Care - Warner

2 East Main Street, Unit 2, Warner, NH 03278

Penacook Family Physicians

4 Crescent Street, Penacook, NH 03303



Schedule an
APPOINTMENT