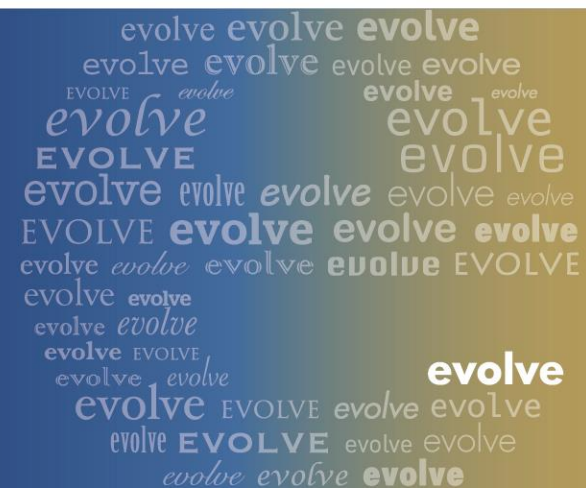




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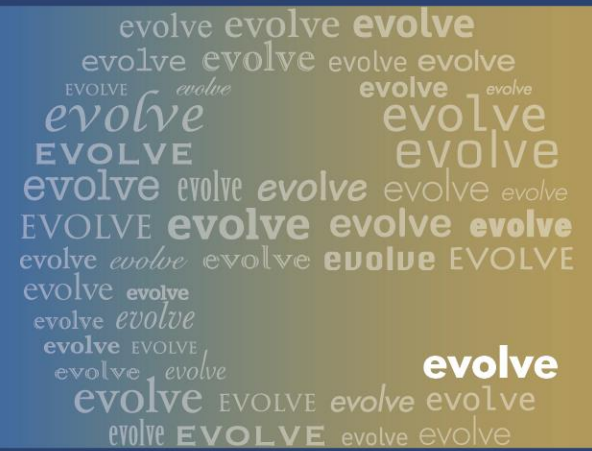
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evaluating evidence. enhancing efficiencies.



Melanie Wong

Australasian Society of Clinical Immunology and Allergy
(ASCIA)



- Assistance from RACP Strategic Policy and Advocacy group
- Compilation of list of 25 tests, treatments and services, identified in past work by ASCIA, other literature reviews or evidence reviews performed by overseas specialist physician bodies or health agencies as being:-
 - overused
 - inappropriate or
 - of limited effectiveness
- Two electronic surveys sent to ASCIA members who are Fellows of the RACP (256 in total) in February 2015 and March 2015
 - 1) rank a top 5 from the list of 25
 - 2) review the wording and rankings of the top 5 recommendations
- Overall response rate was 20%
- All ASCIA members and relevant patient organisations invited to review final list for 2 week review period

ASCIA top 5 recommendations



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1. Don't use antihistamines to treat anaphylaxis — prompt administration of adrenaline is the only treatment for anaphylaxis
2. Alternative/unorthodox methods should not be used for allergy testing or treatment
3. Allergen immunotherapy should not be used for routine treatment of food allergy — research in this area is ongoing
4. Food specific IgE testing should not be performed without a clinical history suggestive of IgE mediated food allergy
5. Don't delay introduction of solid/complementary foods to infants — ASCIA Infant Feeding Advice recommends early introduction of solid foods to infants, from 4-6 months old

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