

ANAPHYLAXIS

KNOW IT. SEE IT. TREAT IT.

Anaphylaxis, a life-threatening allergic reaction, is a significant health problem in the United States, and food allergies — a common cause of anaphylaxis — are on the rise. There's no cure for potentially life-threatening (severe) allergies, which means having an anaphylaxis action plan in place is critical. A survey* was recently conducted, which included adult patients diagnosed with a potentially life-threatening (severe) allergy and parents/caregivers of those diagnosed with a severe allergy. One objective of the survey was to understand the perceptions about anaphylaxis. The findings suggest there is a lack of understanding about anaphylaxis and more education is needed.



Seven in 10
(70%) patients feel they are somewhat or not at all knowledgeable about anaphylaxis in general

and
86%

feel others are somewhat or not at all knowledgeable about anaphylaxis in general

Of the
82%

of patients who feel other adults in their life are not prepared to manage anaphylaxis if it were to occur...

42%

say it's because they are worried others won't be able to tell if an allergic reaction is life-threatening.



Fewer than
two in five patients (38%) reported that the first thing they would do would be administer an epinephrine auto-injector if they knew they were experiencing anaphylaxis.



KNOW IT

Anaphylaxis is unpredictable and can be caused by a number of allergens. However, it is most often caused by:



Avoidance of allergic triggers is a critical first step in preventing a serious health emergency.

SEE IT

Signs and symptoms of anaphylaxis may vary from person to person, and each reaction is different.

Common symptoms of anaphylaxis may include:



TREAT IT



Epinephrine is the first-line treatment recommended for anaphylaxis.

According to national food allergy guidelines, an epinephrine auto-injector should be given at the first sign of anaphylaxis, followed by seeking immediate emergency medical care.

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*The survey was conducted online by Harris Poll on behalf of Mylan Specialty L.P. within the United States between March 10 - 28, 2014 among 509 U.S. adults aged 18 and up who have been diagnosed with an allergy to food, venom, or latex ("patients") and 515 U.S. adults who are the parent or guardian of a child under 18 diagnosed with an allergy to food, venom, or latex ("parents"). Results from the study were weighted as needed for age, gender, race/ethnicity, education, region, household income, parental status, and propensity to be online to align them with their actual proportions in the population.

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Seeing
is believing

