

Assessment of the medical efficacy of encasings from a clinical perspective

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Summary

The treatment of allergic conditions is intended to provide symptomatic relief as much as possible. To achieve this goal, **the main priority is to reduce exacerbating factors** such as exposure to allergens. Emphasizing this issue is of the utmost practical importance because pharmacotherapeutic measures are initiated at a later stage of the decision-making process based on the intensity of the patients' complaints.

There are multiple reasons to focus on avoiding exposure to allergens.

- First of all, for some patients, consistent allergen avoidance eliminates the need for long-term treatment.
- Second, after a clinical improvement of asthma due to anti-inflammatory pharmacotherapy, some inflammation markers are still present, and this therapeutic gap can potentially be minimized or even eliminated by means of consistent allergen avoidance.
- Third, anti-inflammatory pharmacotherapy is more effective when exposure to allergens is limited than it is when exposure is more intense.
- Fourth, making the decision to treat asthma, atopic eczema or allergic rhinitis generally entails a longer-term need for high-cost medication.

Consequently, the high prevalence of allergic diseases means that massive treatment costs have to be borne by the general public.

Drug-based treatment of an asthmatic patient with chronic complaints who is allergic to dust mites costs an average of €1-2 per day. Purchasing an encasing (which costs around €150 and has a 12-year guarantee) has an average cost of €0.035 per day.

If, for example, the use of encasings means that even only some of the patient population can reduce the of medication they need by half, that means that they are already cost-efficient. In this light, encasings are an effective basic measure in allergy treatment from an economic standpoint as well.