

tração), e a cada seis semanas para manutenção; ou, preferivelmente, suspender o tratamento até que as medidas pandêmicas sejam levantadas.

- 5) Não deve haver alteração para início da imunoterapia de veneno (ITAv) de pacientes com histórico de reação sistêmica ao veneno, pois é uma condição com risco de vida e é um serviço essencial. Os pacientes em ITAv de manutenção podem ser espaçados a cada 2-3 meses, se estiverem em manutenção há pelo menos um ano. ITAv NÃO deve ser iniciada ou continuada em pacientes com grandes reações locais ou com história de reação cutânea generalizada isolada<sup>4,5</sup>.

É importante ressaltar que somente os especialistas que tenham a estrutura física do consultório ou clínica em condições de cumprir todas as recomendações do Ministério da Saúde e CFM, incluindo duas salas de espera, duas salas de atendimento e a possibilidade de distanciamento de 2 metros entre os pacientes, enquanto aguardam o atendimento, poderão manter os atendimentos clínicos e a imunoterapia alérgeno-específica.

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Não foram declarados conflitos de interesse associados à publicação desta carta.

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## Exercise-induced anaphylaxis: food-and drug-dependent

*Arq Asma Alerg Imunol.* 2020;4(2):239.

<http://dx.doi.org/10.5935/2526-5393.20200036>

Exercise-induced anaphylaxis is estimated to account for 3% of all cases of anaphylaxis. The main differential diagnosis is with cholinergic urticaria. All aerobic exercises are triggers and exercise-induced anaphylaxis may display food-dependence, with or without specific IgE sensitivity. The most commonly implicated foods are wheat/gluten (omega-5 gliadin epitope) and shellfish. In wheat-dependent exercise-induced anaphylaxis, a high gluten intake without exercising, but with aspirin and alcohol as co-triggers, may also cause anaphylaxis. Exercise-induced anaphylaxis may also be associated with dependence to non-steroidal anti-inflammatory drugs, including aspirin.

Avoidance of eating 4-6 hours prior to exercising is extremely important. The diagnostic test consists of standard treadmill exercises for about 30 minutes with prior food or drug challenges. Therapeutic measures include the possible use of second generation anti-H1 antihistamines, and an epinephrine auto-injector. It is very important to immediately stop exercising at the onset of symptoms. Omalizumab can be successfully used in refractory cases.<sup>1-4</sup>

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No conflicts of interest were declared associated with the publication of this letter.

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