



**Media Release** *Strictly embargoed until 12.01am Wednesday August 31, 2022*

## World-first allergy organisations launch to improve research, clinical care and save lives

In a major step towards addressing Australia's allergy epidemic, the Hon. Ged Kearney MP, Assistant Minister for Health and Aged Care, alongside allergy experts will launch two critical health organisations in Melbourne today.

The National Allergy Council (NAC) and National Allergy Centre of Excellence (NACE) are backed by a \$26.9 million Federal Government investment. The initiatives will help accelerate allergy research and clinical care to improve the lives of five million Australians living with allergic disease and prevent anaphylaxis, including needless deaths.

Assistant Minister Kearney said: "Serious allergies impact the lives of individuals and families in a massive way. That's why this \$26.9 million funding boost is so important. It's so critical to bring together all of our nation's peak allergy organisations, clinicians, researchers, policymakers and crucially, patients and carers."

Maria Said AM, NAC Director and Co-chair, Allergy & Anaphylaxis Australia CEO, said: "Allergic disease impacts significantly on a person's health and wellbeing and can be life threatening. Allergy is among the fastest growing chronic conditions in Australia, affecting approximately 1 in 5 Australians.<sup>1</sup> I can't emphasise enough how the Government's significant investment will transform the lives of these Australians through improved allergy research, clinical care, education, prevention and support."

Dr Preeti Joshi, NAC Director and Co-chair, Australasian Society of Clinical Immunology and Allergy (ASCIA) representative and paediatric clinical immunology and allergy specialist, said: "We know from our work and the House of Representatives' [Walking the allergy tightrope](#) report, that it is critical we reduce the alarming trend of anaphylaxis rates and tragic deaths due to allergic disease. Establishing these organisations will ensure the findings from quality research will be implemented effectively to improve and save lives."

Associate Professor Kirsten Perrett Director, NACE and Group Leader, Murdoch Children's Research Institute, added: "Sadly, our country is considered the allergy capital of the world. As Australia's leading allergy research body, we want to change that by expanding our evidence-base for the prevention and management of drug, food, respiratory and insect allergic disease. To do this, the NACE will oversee a Clinical Trials Network, a National Allergy Repository, an Evidence and Translation Centre, and training the next generation of allergy experts. I believe this national plan of action will have a life-changing impact."

### Working together, the NAC and NACE will deliver:

- A shared care program to **significantly cut wait times** to see a specialist by at least 50 per cent and improve access to quality allergy care for all Australians, especially in rural and remote areas
- The digital infrastructure for a **National Allergy Repository** to facilitate precision medicine, allowing individualised allergy healthcare for children and adults. This would include a live anaphylaxis reporting system

- A **National Allergy Clinical Trials Network** to provide Australians with accelerated access to safe and effective allergy treatments
- Continued **public health guidelines and prevention programs** such as the successful food allergy prevention program 'Nip allergies in the Bub', which includes practical resources for parents and educational support for healthcare providers
- **New clinical and research capabilities** to enable Australia to maintain its world-leading status in allergy research and to answer the most important questions in allergy that will guide the way forward to help decrease the burden on individuals, families, the healthcare system and the community at large.

The NAC is a natural progression of the successful National Allergy Strategy and will continue to be a partnership between the Australasian Society of Clinical Immunology and Allergy (ASCIA) and Allergy & Anaphylaxis Australia. The Centre for Food & Allergy Research has expanded to become the NACE, which will generate and synthesise the evidence-base that underpins the activities of the NAC to ensure Australia remains at the forefront of evidence-based management of allergic disease.

Professor Michaela Lucas, President of the Australasian Society of Clinical Immunology and Allergy (ASCIA) concluded: "It is important the government has listened to the recommendations of the Parliamentary Inquiry. This funding will improve the health outcomes for patients with allergic disease and enable Australia's allergy organisations to provide world leading allergy management and research."

#### **Case study:**

Ben and Tamara McKenzie tragically lost their 15-year-old son Max to anaphylaxis a year ago. Max had anaphylaxis his whole life and managed his condition extremely carefully. Yet despite this and having a father that is an emergency physician and a mother with a background in health, he died suddenly from anaphylaxis in metropolitan Melbourne.

Max's father Ben says: "Max ate some walnuts and he developed sudden asthma as his main symptom. He used his EpiPen and his ventolin, and he entered health care with 100% oxygen levels. Despite this, he deteriorated and did not receive the care from health professionals that he should have. His brain did not get enough oxygen and he died suddenly in intensive care 13 days later. Our pain is unimaginable, and it has not lessened. Sadly, we are not the only family who have had their child die in Melbourne in this way last year.

"There are so many facets to reducing allergy related disease. All levels of government and all parts of our community need to play a part. Allergens are everywhere in everyday life and this means that the solutions will not be simple. We need to make sure that our emergency medical systems have world class standards for when accidents inevitably occur. We need an allergy system that brings together all of these elements in a coordinated strategy that is robust and well-funded. It is important to recognise that different groups in the system need different information and different tools to play their role in managing allergy effectively.

"Today is a step in the right direction for all of these things. So, to the federal government, to ASCIA, to Allergy and Anaphylaxis Australia, and to this brand-new National Allergy Council and the National Allergy Centre of Excellence, we applaud you and thank you for bringing some light into our grief. And on behalf of the family of the children who do not die because of this initiative, hopefully they will never know how lucky they are."

[Full statement available via this [link](#)]

- ENDS -

*Distributed by Lanham Media on behalf of National Allergy Strategy*

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## **NOTES FOR EDITORS:**

### **Spokespeople available for interview include:**

- Ms Maria Said, National Allergy Council Director - Allergy & Anaphylaxis Australia CEO and representative.
- Associate Professor Kirsten Perrett, National Allergy Centre of Excellence Director and Murdoch Children's Research Institute allergy clinician-scientist
- Dr Preeti Joshi, National Allergy Council Director - Australasian Society of Clinical Immunology and Allergy (ASCIA) representative and paediatric clinical immunology/allergy specialist.
- Professor Michaela Lucas – Australasian Society of Clinical Immunology and Allergy (ASCIA) President, clinical immunology/allergy specialist and immunopathologist.
- Personal case studies available on request

## **FURTHER BACKGROUND**

### **ABOUT THE NATIONAL ALLERGY COUNCIL**

**National Allergy Council (NAC)** is a natural progression of the highly valued and successful National Allergy Strategy. The NAC will continue to implement and expand the National Allergy Strategy as a partnership between the Australasian Society of Clinical Immunology and Allergy (ASCIA) and Allergy & Anaphylaxis Australia (A&AA) – the leading medical and patient support organisations for allergy in Australia.

[www.nationalallergystrategy.org.au](http://www.nationalallergystrategy.org.au)

### **ABOUT THE NATIONAL ALLERGY CENTRE OF EXCELLENCE**

Centre for Food & Allergy Research (CFAR), hosted at the Murdoch Children's Research Institute, has expanded to become the **National Allergy Centre of Excellence (NACE)**. As Australia's leading allergy research body, it will oversee clinical trials, a National Allergy Repository, evidence and translation, and training the next generation of allergy experts to ensure Australia remains at the forefront of evidence-based management of allergic disease.

[www.nace.org.au](http://www.nace.org.au)

### **Allergy facts**

- Allergic diseases are among the fastest growing chronic conditions in Australia, affecting approximately one in five Australians<sup>1</sup>.
- Delayed access to medical care and long waiting times for management of allergic diseases in all areas (rural, remote and metropolitan) is a major problem, due to the high number of diagnosed patients and low number of appropriately trained healthcare professionals<sup>1</sup>.
- Food allergy affects 10 per cent of infants [1], 20 per cent of children aged 10 to 14 [2] and two to four per cent of adults [3].
- Food allergy induced anaphylaxis has doubled between 2003 and 2013 [4].
- Annual food anaphylaxis admission rates increased nine-fold between 1998/99 and 2018/19 – the highest absolute rates in those aged less than one year [5]. However, the annual rate of increase slowed in those aged one to nine after changes to ASCIA infant feeding guidelines, supporting the Nip allergies in the Bub allergy prevention project.

- Deaths from anaphylaxis in Australia have increased by seven per cent per year (1997-2013) [4].
- Those at risk of anaphylaxis live with the very real daily fear of a life-threatening severe allergic reaction. Individuals at risk of food allergy induced anaphylaxis and their carers have higher than average rates of anxiety [6-8].
- Fatalities from food-induced anaphylaxis increase by around 10 per cent each year [9].
- Self-reported antibiotic allergy is common in Australia. The overall self-reported antibiotic allergy rate for all hospital patients is 18 per cent for adults (10,11) and 24 per cent reported for general medical inpatients in a multi-centre study in Victoria (10,12).
- Importantly, 90 per cent of patients with an unconfirmed antibiotic allergy label are not allergic and can safely tolerate the antibiotic after undergoing validated drug allergy assessment (13). This over labelling results in inappropriate prescribing and increased use of broad-spectrum antimicrobials, poor patient outcomes and a financial impact on the health system.

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