Dr. Gurdev (Dave) Judge, board-certified allergist-immunologist with practices in Cary, North Raleigh, and Wake Forest, is convinced that diagnosing and treating allergies, asthma, and sinus conditions relies heavily on both art and science. He also is board-certified in pediatrics.

“It’s true that my colleagues and I, in medical school and in our specialty training, are exposed to very similar content and experiences, and emerge from our training with substantially the same knowledge base,” he says. “And it’s also true that some of us are more adept at diagnosing health conditions than are others.

“Why? I think there are two related issues. One, it’s essential to develop and use high level listening skills. Listening intently to a patient, in an open-ended way, offers many, many clues about the nature of the patient’s health problem and helps develop a relationship of trust—me, and with our nurses and front office staff. Caring for patients is a team effort. Second, the unusually gifted diagnostician must not only practice good listening skills, he or she must also be a good communicator.

“In medical practice today, we are all pressed to see more patients, but nonetheless we have to find the time to listen and to share information.”

Two patients with the same problem may express it in very different ways. That underscores the need to be a careful listener. I schedule a lot of time in the early visits with a new patient, because I know there will be many questions and quite often, underlying anxiety about the nature of the condition—asthma, for example—about possible side effects of medications, and other related issues.

“The more completely the patient is informed about and is satisfied with responses to these issues, the more likely it is we can work together as a team in an effective way. All of this I would call the ‘art’ of diagnosing illness in this specialty. There’s also a good deal of art involved in encouraging compliance by patients who have episodic health problems such as allergies and asthma. It’s often difficult for them to remain vigilant at those times when their condition is less active.”

THE ROLE OF SCIENCE

And clearly, Dr. Judge points out, technology and scientific information are “critical ingredients in diagnosing and treating conditions such as allergies, asthma, and sinus problems. In asthma alone, we may use chest X-rays—to determine the condition of the lungs and rule out other health issues—spirometry, methacholine challenge tests, and other exams in making an initial diagnoses and in monitoring progress in treatment.

“Spirometry is a simple breathing test that measures how much and how fast the patient can blow air out of their lungs. It helps determine how much airway obstruction the patient may have.

“We’re more likely to use a methacholine challenge test with an adult than with a child. We turn to this if the spirometry test is inconclusive in establishing a diagnosis of asthma. Methacholine is an agent that, when inhaled, causes the airways to spasm and narrow if asthma is present. During the test, the patient inhales increasing amounts of methacholine aerosol mist before and after spirometry. The methacholine test is considered positive for asthma if the lung function drops by at least 20 percent. And then, at the conclusion of the test, we give the patient a bronchodilator to reverse the effects of the methacholine. The test is common, safe, and effective.”

Dr. Judge notes that diagnosing asthma “can be complicated when sinusitis and gastroesophageal reflux disease are present. Sinusitis is an inflammation or swelling of the sinuses due to infection. When the sinuses become blocked and filled with fluid, bacteria grow, causing infection and inflammation. Sometimes we need an X-ray or CT scan to help evaluate the condition of the sinuses. A chronic sinus condition complicates the treatment of asthma. Gastroesophageal reflux disease—known as GERD—is a condition in which stomach acid flows upward into the throat, causing a burning sensation. If untreated, GERD can trigger an asthma episode and make it more difficult to treat.”

DIAGNOSING ALLERGIES

Specialists such as Dr. Judge often use skin tests to determine whether a patient is allergic to a specific allergen. “We use diluted extracts from allergens such as dust mites, pollens, or molds commonly found in this area,” notes Dr. Judge. “The extract of each kind of allergen is injected under the patient’s skin or is applied to a tiny scratch or puncture made on the patient’s arm or back.

“When there is a positive reaction, a small, raised, reddened area, called a wheal (with a surrounding flush, called a flare) will appear at the test site. This gives us important information about the allergic condition, and sets both patient and doctor along the path of developing an effective treatment plan.”

Less frequently, Dr. Judge will use a special blood test to test for allergies. Dr. Judge offers his patients three options to deal with their allergies. “First, of great importance, there is avoidance,” he says. “A single ragweed plant may release a million pollen grains in one day, and the pollen from the ragweed, grasses, and trees is so small and buoyant that it may float on the wind many miles from its source. If you are allergic to this pollen, you must avoid contact as best as you possibly can. Mostly that means staying inside an air-conditioned space.

“Medications are usually the first option for treating allergic conditions,” he adds, “when avoidance measures don’t control the problem. We have an excellent array of medications now available that reduce or eliminate suffering from allergic reactions for most patients.

“Immunotherapy is a safe and effective alternative for patients who do not respond well to other options,” says Dr. Judge. Allergy injections are usually given at variable intervals over a period of two to five years.}