

# Epidemiology of allergic conjunctivitis : Current Opinion in Allergy and Clinical Immunology

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Eye allergy: Edited by Leonard Bielory and Stefano Bonini

## Epidemiology of allergic conjunctivitis

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# Abstract

## Purpose of review

To describe currently available epidemiological data on the prevalence of allergic conjunctivitis. Allergic conjunctivitis is often underdiagnosed and consequently undertreated except when it is severe and the chief complaint of a consultation in a specialty clinic. Use of healthcare resources and reduced quality of life of affected individuals justify studies on the prevalence of allergic conjunctivitis.

## Recent findings

The association of allergic nasal and ocular symptoms (rhinoconjunctivitis) is common. Most children with allergic conjunctivitis have allergic rhinitis. Older population studies estimate a prevalence of 15–20% of allergic conjunctivitis, but more recent studies implicate rates as high as 40%. Ocular symptoms are common and contribute to the burden of allergic rhinitis and lower quality of life. Ocular allergies rank a very close second and at times may overcome the primary complaints of nasal congestion in rhinoconjunctivitis patients.

## Summary

Little focus has been set on the impact of allergic conjunctivitis as comorbidity to asthma and rhinitis in atopic patients. Conjunctivitis symptoms are at least as severe as rhinitis symptoms in patients with 'hay fever' and some have even generated the term of conjunctivorhinitis stressing the ocular symptoms. Prevalence studies should be specifically addressed to ocular allergy symptoms.

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### KEY POINTS

- There is accumulating evidence to suggest that some ocular symptoms in allergic conjunctivitis may be neuropathic in origin.
- Neurogenic mechanisms including peripheral and central sensitization may drive chronic ocular itch and pain secondary to allergic inflammation.
- More precise elucidation of the neuroimmune crosstalk on the ocular surface may delineate novel therapeutic targets in allergic conjunctivitis.

### [Neuropathic pain and itch: mechanisms in allergic conjunctivitis](#)

October 2022

### KEY POINTS

- Chemokines are small, potent, peptide chemoattractants that moderate the migration and activation of cells that participate in allergic inflammation, by binding to specific receptors thus playing a central role in the progression of the late-phase allergic response.
- Chemokines are present at low levels in healthy eyes in the tears, conjunctiva, limbal area and corneal keratocytes, and their levels in the tears increase during late-phase allergy response. Defining this tear composition may promote detection of tear mediators as possible disease markers.
- Drug research focus is in developing chemokine receptor targeted therapies through various avenues such as peptide nanoparticle inhibitors, amino terminus modification, peptide-based and nonpeptide-based antagonists and mAbs. Part of the challenge is to adequately individualize the antagonist drug to overcome the redundancy issue, as multiple chemokines can have multiple receptors.

## [Chemokines in allergic conjunctivitis](#)

October 2020

### **KEY POINTS**

- Ocular allergies are estimated to affect 6–30% of the general population
- Even though ocular allergy is often associated with rhinitis (30–70%), tools used in epidemiology studies on rhinoconjunctivitis do not include specific ophthalmological evaluations.
- Although most ocular allergic patients presented with recurrent episodes, only a minority receive an allergy diagnostic evaluation.
- The majority of ocular allergy patients have few episodes of mild conjunctivitis annually.
- Approximately 30% of patients with allergic conjunctivitis may have frequent episodes with intense and persistent symptoms.
- Patients with allergic conjunctivitis tend to self-treat and are often treated by nonophthalmologists.

## [Epidemiology of allergic conjunctivitis](#)

October 2015

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## KEY POINTS

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- Big data analysis of a large cohort of patients with AED has provided us with information on demographics, clinical patterns and seasonal variations in disease presentation.
  - Literature on the use of allergy testing and immunotherapy is growing, but more evidence is needed to assess the efficacy of these modalities.
  - Systemic therapy using anti-IgE antibodies such as omalizumab or T-cell inhibitors such as cyclosporine and tacrolimus is useful in severe and blinding forms of AED.
  - Mesenchymal stem cells, mast cells, Tregs, cell products and pathways of immune regulation are areas of active interest for research related to newer therapeutic modalities.
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### [Allergic conjunctivitis in children: current understanding and future perspectives](#)

October 2020

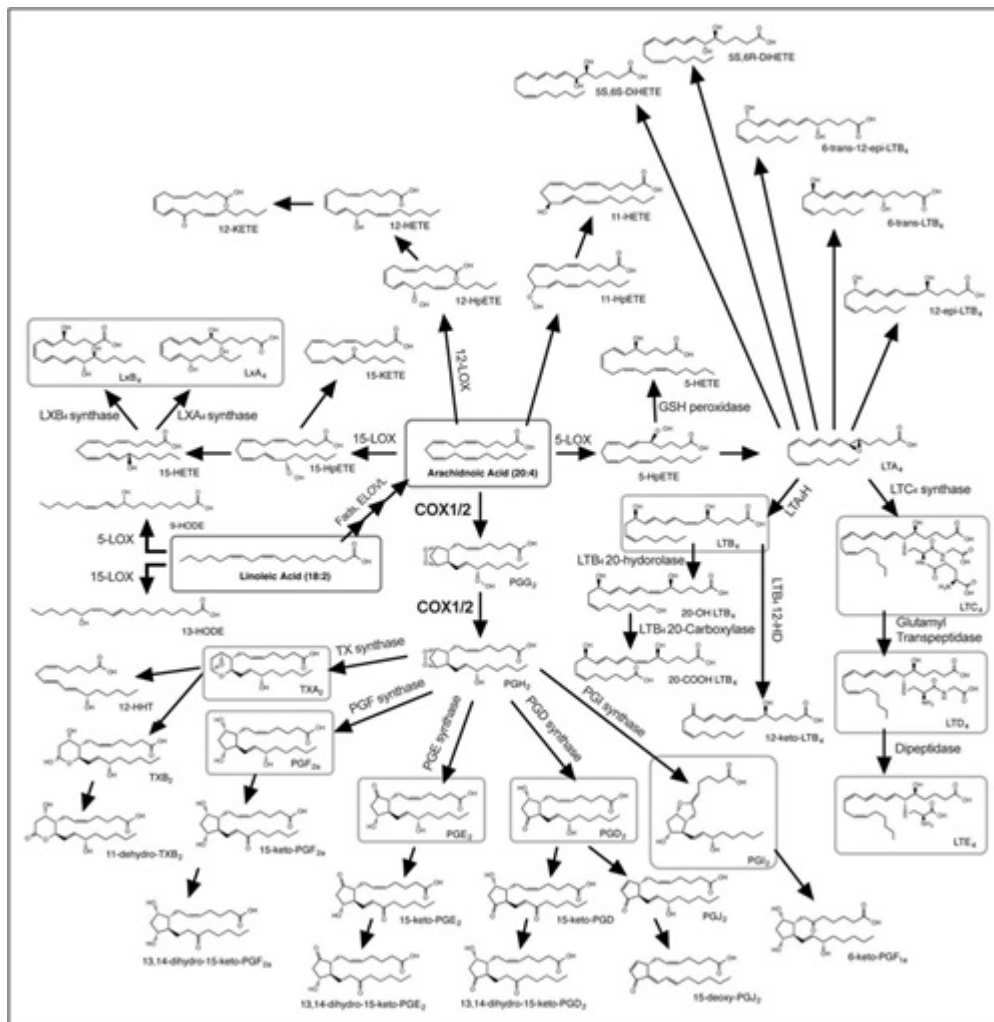


## KEY POINTS

- Both SCIT and SLIT offer improvement in conjunctival symptom scores and decrease medication utilization.
- SCIT offers greater symptomatic control than SLIT, however SLIT has the convince factor of being able to use at home after first administration.
- Patients receiving SLIT has a very high incidence of mild-to-moderate adverse effects – especially at the initiation of therapy – but rarely develop systemic or severe reactions at the rate seen with SCIT.
- Both SLIT and SCIT are affected by high rates of nonadherence and discontinuation; however, nonadherence to SLIT may potentially be improved by either in-office or telehealth check-in visits.
- Although both are cost effective, SCIT is potentially more cost-effective as is more efficacious and less impacted by nonadherence/discontinuation rates.

### [Use of allergen immunotherapy for treatment of allergic conjunctivitis](#)

December 2020



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