

## Hypersensitivity Type I

This is an immediate reaction that occurs after an individual has been previously exposed to an antigen. Upon reexposure to the same antigen, IgE cross-linking on presensitized mast cells occurs resulting in release of vasoactive amines (histamine) which results in vasodilation. The reaction can be systemic resulting in anaphylaxis or local resulting in allergies. Systemic anaphylaxis is treated with epinephrine.



PLAY PICMONIC

### Previous Antigen Exposure

#### Ant-egg Photo-exposure

Once a patient has been exposed to an antigen (i.e. peanuts, bee venom) the antigen is presented to CD4+ helper cells which become T<sub>H</sub>2 cells. These T<sub>H</sub>2 secrete IL-4 which promotes B cell production of IgE antibody that goes on to bind to mast cells.

### Immediate Reaction

#### Immediate-emergency Sirens

This reaction takes minutes to occur. There is also a late phase reaction that occurs due to recruitment of inflammatory cells.

### IgE Cross-linking

#### Electric Globulin-goblins Cross-linked

Upon antigen reexposure, the IgE already bound to mast cells cross-links and activates signal transduction pathways.

### Presensitized Mast Cells

#### Mast-Sail with Single-tear

Activated signal transduction pathways in presensitized mast cells (and basophils) lead to mast cell degranulation.

### Histamine Release

#### History-men Released

Mast cell degranulation leads to release of vasoactive amines, particularly histamine.

### Vasodilation

#### Vase-dyed

Histamine release results in vasodilation and rubor (redness), calor (heat) and tumor (swelling).

### Anaphylaxis

#### Anvil-axes

This is a systemic reaction that affects many organ systems and can result in distributive (vasodilatory) shock, shortness of breath and death.

### Allergies

#### Allergy-alligator

Local allergic reactions are Immediate (Type 1) Hypersensitivity reactions. These are the type of reactions you experience to pollen and various animals.

## Treatment

### Epinephrine

#### Epi-pen

An Epi Pen must be administered to a patient that experiences systemic anaphylaxis immediately to prevent sequelae such as laryngeal edema, which can lead to airway blockage and death.