

CLINICAL FELLOWSHIP AWARD 2025 REPORT

SEVERE FOOD ALLERGY

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Type, duration and location of Fellowship: Clinical Fellowship, 2 months, London (United Kingdom)

Host Institution and Supervisor name: Royal Brompton Hospital, Guy's and St Thomas's Trust, Isabel Skypala.

INTRODUCTION:

For the last few months I have undertaken a clinical fellowship in the Allergy Service in the Royal Brompton Hospital in London, where I have had the opportunity to take part in multiple clinical and research activities. My main objective was to learn the clinical approach to severe food allergy. During my stay at the Royal Brompton Hospital Allergy Service I have been involved in multidisciplinary team meetings (MDT), day care unit food and drug challenges, food allergy clinics, gastroenterology-allergy joint clinic and ENT-allergy joint clinic. I have also had the opportunity of joining the Great Ormond Street's Hospital joint pediatric gastroenterology-allergy EoE clinic (GIANTS clinic) and the St Mary's Hospital pediatric allergy clinic.

This report aims to detail the skills and knowledge acquired during the past months as well as the achievement of the objectives established prior to the initiation of this fellowship.

CLINICAL ACTIVITIES AND OBSERVATIONS:

Monday: Food Challenges in the Day Care Unit and Food Allergy Clinic.

- **Time Spent:** 09:00-13:00 (Food Challenges) and 13:30-16:00 (Food Allergy Clinic)
- **Patients Observed:** 5-6 patients in the Food Challenged and Day Care Unit, 7-9 patients in the Food Allergy Clinic.
- **Activities Undertaken:**
 - **Observed:** The morning starts with an individualized assessment of each patient, starting with the vital signs evaluation, confirming that no new reactions have occurred and ensuring that patients are in the best possible condition to undergo the challenge. The procedure is then explained, and we confirm that the patient understands the challenge as well as signs the consent form. After that, the food challenge doses are prepared following the

EAACI food allergy guidelines, and the patient receives ascending doses until they complete a full regular dose. Each patient undertakes 1-3 different food challenges during the day. After the completion of all the challenges the recommendations are explained to each patient.

- **Developed:** I have actively participated in the evaluation of each patient which involves the risk evaluation and the decision making during the MDTs as well as during the day of the challenge. I have also collaborated in the preparation of the challenge doses as well as in the administration of each dose and the clinical assessment of possible allergic reactions. After the challenge, the results were explained and the case assessed in the following MDT.

Tuesday: Rhinology Clinic

- **Time Spent:** 09:00-13:00 (Rhinology clinic)
- **Patients Observed:** 7-10 patients in Rhinology Clinic.
- **Activities Undertaken:**
 - **Observed:** The patients underwent an initial clinical assessment, followed by a complete exploration that included rhinoscopy and fibroscopy. In those patients in which it was necessary, functional pulmonary tests and blood tests were also performed. All patients were evaluated jointly by the ENT surgeons and the Allergy specialist, which allowed a complete holistic attention of the patients. This also allowed me to observe numerous cases of sarcoidosis, vasculitis, cystic fibrosis, polyps as well as allergy patients.
 - **Developed:** I have actively participated in the evaluation of each patient, as well as in the performance of rhinoscopy and nose fibroscopy. I have also collaborated in differential diagnosis and in the decision making about the patients treatment.

Wednesday: Severe food allergy clinic and General Food Allergy Clinic.

- **Time Spent:** 09:00-13:00 (Severe Food Allergy Clinic) and 14:00-16:30 (General Food Allergy Clinic)
- **Patients Observed:** 8-10 patients in Severe Food Allergy Clinic and 6-8 patients in the General Food Allergy Clinic.
- **Activities Undertaken:**
 - **Observed:** The first block of patients were new appointments. These patients underwent an initial clinical assessment, establishing the current food allergy reactions and determining the severity of each one. This was followed by a complete diet assessment, establishing which foods were being avoided and which were tolerated by the patient. Other possible allergies were taken into account including hay fever, asthma, eczema and drug or insect allergy. Both skin test and blood tests would be ordered according to the clinical history. The patients were then explained which foods should be avoided or reintroduced in the diet, and the necessary steps they would have to follow in case of a reaction. The second block of patients were follow-ups, starting by evaluating any new reactions to previously assessed foods or new foods, as well as informing the patient of any test results and deciding whether the patient is a candidate for food challenges or avoidance.
 - **Developed:** I have actively participated in the evaluation and allergy test planning as well as completing the differential diagnosis and the decision making regarding the treatment. I have also participated in the decision process of which patients would be good candidates for food challenges in the Day Care Unit and which could introduce the foods at home.

Thursday: SLIT Virtual Clinic and Skin Test Clinic.

- **Time Spent:** 09:00-13:00 (SLIT Virtual Clinic) and 14:00-16:30 (Skin Test Clinic)
- **Patients Observed:** 8-10 patients in SLIT Virtual Clinic and 6-8 patients in the Skin Test Clinic.
- **Activities Undertaken:**
 - **Observed:** This clinic evaluated both patients that needed to start immunotherapy as well as those in current treatment with immunotherapy. The adherence and response were evaluated. Those patients also received general clinic assessment by the specialty nurse and those with worsened symptoms or poor controlled asthma were seen in the following MDT meeting. On the other hand, in the Skin test Clinic, skin prick and prick to prick tests were performed.
 - **Developed:** I have actively participated in the evaluation of patients initiating or in current treatment with immunotherapy, by following a symptom control questionnaire, making sure the administration is correct and that the patients comprehends the alarm signs they have to perceive in case of a reaction and how to treat those reactions. I also collaborated on the performance of skin tests.

Friday: Drug Challenge Day Care Unit and MDT meeting.

- **Time Spent:** 09:00-13:00 (Drug Challenges in the Day Care Unit) and 14:30-16:30 (MDT meeting)
- **Patients Observed:** 4-6 patients in Drug Challenges and 10-15 patients discussed in the MDT meeting.

- **Activities Undertaken:**

- **Observed:** The drug challenges initiated with an individualized assessment of each patient. The evaluation of vital signs and confirmation that no new reactions have occurred, ensure that they are in the best possible condition to undergo the challenge. The procedure is then explained and the consent form is signed, making sure that the patient understands the aim and the risks of the challenge. After that, the drug challenge doses are prepared following the EAACI drug allergy guidelines, and the patient receives ascending doses until they complete the full dose. After the end of all the challenges the recommendations are explained to each patient. Positive and negative challenges were evaluated in the weekly MDT. We also assessed the patients that would be attended the following week, taking into account the severity of previous reactions, blood tests, skin tests and decided which foods or drugs would be tested in each one. The second part of the MDT corresponded to the evaluation of patients with possible reactions to immunotherapy, discussed patients that needed to start immunotherapy or poorly controlled asthma patients, as well as those in which there were doubts in the management or treatment.
- **Developed:** I have actively participated in the evaluation of each patient, during the week prior MDT as well as during the challenges. I have also collaborated in the preparation of the challenge doses, in the administration of each dose as well as in the clinical assessment of possible allergic reactions. After the challenge, the results were explained and the case assessed in the same week MDT.

Others:

1. Pediatrics Eosinophilic Esophagitis Clinic (GIANTS) at Great Ormond Street Hospital

- **Time Spent:** 8:30-9:30 (Pediatric Eosinophilic Esophagitis (EoE) MDT meeting) and 09:30-14:30 (Pediatrics EoE Clinic)
- **Patients Observed:** 4-6 patients in the Pediatric EoE MDT meeting and 4-6 patients in the Pediatric EoE Clinic.
- **Activities Undertaken:**
 - **Observed:** Patients were first evaluated in the MDT meeting by a Pediatric Allergy Physician and a Gastroenterology Physician as well as by a psychologist, a dietitian and a specialty nurse. After the MDT the clinic started, and each patient was evaluated by each member of the GIANTS team, taking into consideration the reactions, level of symptom control with the treatment and evaluation of results of gastroscopy and histologic biopsies. We also assessed the patient's diet and the potential stress and discomfort caused by the reactions. Last but not least the specialty nurse controlled the weight and height of as well as the correct growth of each patient.
 - **Developed:** I have actively participated in the clinical evaluation of each patient as well as in the test assessment, including gastroscopy and histological results. I also collaborated in the diet planning and the decision making about which patients were candidates for food exclusion diets and which weren't.

2. Pediatrics Severe Food Allergy Clinic at St Mary's Hospital

- **Time Spent:** 8:30-9:30 (Pediatric Allergy MDT meeting) and 09:30-14:30 (Pediatric Severe Food Allergy Clinic)
- **Patients Observed:** 4-6 patients in the Pediatric EoE MDT meeting and 4-6 patients in the Pediatric EoE Clinic.
- **Activities Undertaken:**
 - **Observed:** Patients were first evaluated in the MDT meeting by a Pediatric Allergy Physician and a specialty nurse. After the MDT the clinic included a complete clinical assessment, followed by a skin test. The patient was then referred to the day care unit or given recommendations to which foods should be avoided or introduced.
 - **Developed:** I have actively participated in the clinical evaluation of each patient as well as in the test assessment, including gastroscopy and histological results. I also collaborated in the diet planning and the decision making about which patients were candidates for food exclusion diets and which weren't.

3. Severe Asthma Clinic and Severe Asthma MDT Meeting.

- **Time Spent:** 09:00-13:00 (Severe Asthma Clinic) and 14:30-16:30 (MDT meeting)
- **Patients Observed:** 4-6 patients in Severe Asthma Clinic and 8-10 patients discussed in the MDT meeting.
- **Activities Undertaken:**
 - **Observed:** Patients were evaluated simultaneously by an asthma physician, a physiotherapist, specialty nurse, a psychologist. Quality of life and asthma controlled tests as well as pulmonary function tests

including spirometry with or without bronchodilation and FeNO were performed in every patient. Inhaler technique and adherence were evaluated, followed by the assessment of response to the biologic therapy. After an holistic evaluation of the patients, the cases were presented in the MDT meeting, regarding control of symptoms, presence of exacerbations and quality of life. According to the level of control, the treatment was adjusted and the patient informed.

- **Developed:** I actively collaborated in the evaluation of each patient, completing the questionnaires, evaluating the level of symptom control and number of exacerbations. I also participated in the assessment of the functional pulmonary tests and the adherence and technique of inhalers. During the MDTs I collaborated in the treatment adjustments as well as in the decision making regarding the steps to follow in each patient's case.

PERSONAL REFLECTION ON THE CLINICAL FELLOWSHIP IN ROYAL BROMPTON HOSPITAL.

During my fellowship I have had the opportunity of participating in several clinical activities. My main objective was to extend my knowledge in severe food allergy, both in adult and pediatric patients. My experience is based on the multidisciplinary team meetings (MDT), general and severe food allergy clinics, the EoE pediatric clinic in Great Ormond Hospital and the severe food allergy pediatric clinic. My period in Royal Brompton Hospital has been essential for enhancing my understanding of the clinical assessment protocols, treatment planning and overall attention of patients with severe food allergy.

Domain 1: Knowledge, Skills and Performance.

This fellowship offered a great clinical exposure, specially in the management of severe food allergies, but also in general allergy, rhinology, drug allergy and asthma. By having the opportunity to participate in the MDT as well as being present in the allergy clinics I have gained valuable insights, helping me improve my knowledge in food allergy, the management of complex cases and decision making based on evidence.

Domain 2: Safety and Quality.

Throughout the fellowship, safety of the patients is the main concern of all the allergy team, during the clinics and especially during the challenges in the day care unit. This is obtained by following the protocols that have been previously set up by the allergy team, allowing them to ensure that the patient is under the best conditions to undergo challenges and therefore increase their quality of life. This experience reinforced the necessity of creating and reviewing protocols in order to maintain and ensure the patients safety.

Domain 3: Communication, Partnership and Teamwork.

The most fulfilling aspect of this fellowship is the ambiance of teamwork and effort the team from the Royal Brompton Hospital transmits. Working alongside specialized nurses, dietitians, physicians and other members in the team. A sense of inclusion is always present, transmitting the importance of taking into account any proposition or idea from any team member, with the aim of contributing to the best possible attention for the patient. They have also allowed me to participate in the decision-making process at all times, especially in the MDT meetings.

Domain 4: Managing Trust.

During the months of clinical rotation the Allergy team at the Royal Brompton Hospital and specially my mentor, Dr Skypala, have always encouraged me and offered me the guidance needed to extend my knowledge. This has allowed me to grow as an allergy specialist as well as develop a patient-centered mindset, that will help me reinforce my clinical and ethical standards necessary to manage the patients pathology as well as their trust.

Moving Forward

This fellowship has helped me gain more experience in allergy as well as help me acknowledge the importance of a multidisciplinary approach to all patients, specially those that suffer from severe forms of allergy. By introducing protocols for the procedures and by adding safety checklists, we ensure that the patient undergoes the allergy procedures with the maximum safety possible.

The objective is to introduce this knowledge in my daily practice, aiming to give the patients the best allergy care possible, under the safest conditions. By basing my practice on evidence-based knowledge I aim to improve my abilities to diagnose and treat allergies, especially in patients that suffer severe forms of allergy.

This experience has also highlighted the need to increase leadership and communication skills, particularly in managing multidisciplinary teams. I plan to improve my critical approach to scientific literature and enhance productivity through better management. Overall, this experience has reinforced my commitment to continue my professional growth in a teamwork based environment.

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