

EAACI Clinical Fellowship Report



Project Title: Advancing clinical competence in the diagnosis and management of drug allergy with an emphasis on the study of drug desensitization protocols

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Fellowship Type: EAACI Ukraine Clinical Fellowship

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Location: Hospital Universitari Vall d'Hebron, Passeig Vall d'Hebron 119–129, 08035 Barcelona, Spain

Host Institution: Allergy Department, Hospital Universitari Vall d'Hebron, Barcelona, Spain

Supervisor: Dr. Victoria Cardona, Head of the Allergy Department

Overview of the Fellowship

The three-month clinical fellowship at the Allergy Department of Hospital Universitari Vall d'Hebron was designed to strengthen my clinical and academic skills in allergology, with a particular focus on diagnosing and managing drug allergies.

The fellowship program was initially planned to include clinical observership and patient care, hands-on training in specialized procedures, interdisciplinary case discussions, research and academic activities, and participation in educational sessions. During the fellowship, these objectives were fulfilled through a structured combination of outpatient consultations, day-hospital activities, drug provocation testing, skin testing, drug delabelling, drug desensitization, inpatient consultations, multidisciplinary case discussions, severe asthma committee meetings, and bibliographic sessions.

The fellowship provided an opportunity not only to observe highly specialized allergy care but also to participate actively in diagnostic and therapeutic procedures under the supervision of experienced allergologists. This was particularly valuable in the field of drug allergy, where appropriate diagnostic evaluation can prevent unnecessary avoidance of first-line medications and can substantially improve the treatment options available to patients.

Clinical Activities and Patient Exposure

During the fellowship, I participated in clinical activities involving approximately 10 patients per clinical day. Throughout the fellowship, the standard clinical working schedule was approximately 8 hours per day, Monday to Friday, corresponding to approximately 40 hours per week.

The patients represented a broad spectrum of allergic and immunological conditions, with a particular emphasis on suspected drug hypersensitivity reactions.

The clinical program included patients referred for:

- suspected immediate and delayed drug hypersensitivity;
- assessment of previous drug allergy labels;
- skin testing for suspected drug allergy;
- drug provocation testing;
- identification of safe alternative medications;
- drug delabelling when hypersensitivity was not confirmed;
- drug desensitization;
- management of patients with hypersensitivity reactions during treatment in other hospital departments;
- complex allergic conditions requiring multidisciplinary assessment;
- severe asthma and other allergic diseases.

The diversity and complexity of the cases allowed me to observe the complete diagnostic pathway, from detailed history-taking and risk stratification to diagnostic testing, interpretation of results, selection of safe medications, and individualized management plans.

Clinical Settings and Activities

June 2026 — Allergy Day Hospital

During June, I participated in the activities of the Allergy Department's day-hospital for patients with suspected drug allergy who were considered to be at increased risk.

The main focus was the assessment of high-risk adult patients with suspected drug hypersensitivity, including supervised diagnostic procedures and drug provocation testing.

Under specialist supervision, I participated in:

- detailed assessment of the patient's previous allergic reaction;
- review of the clinical history and assessment of the probability and severity of drug hypersensitivity;
- skin testing and interpretation of the results;
- preparation and monitoring of drug provocation procedures;
- evaluation of tolerance to alternative medications;
- identification of patients in whom a previous drug allergy label could be removed;
- documentation of the diagnostic outcome and recommendations regarding future drug use.

One of the most important learning experiences was understanding how systematic drug allergy assessment can distinguish true hypersensitivity from historical or unconfirmed allergy labels. When appropriate, negative testing and supervised drug provocation allowed patients to be delabelled, while in other cases a safe and well-tolerated alternative medication was identified.

This experience directly fulfilled the fellowship objective of gaining practical knowledge of modern approaches to the diagnosis and management of drug allergy.

Although the primary objective of my fellowship was to gain advanced experience in the diagnosis and management of drug allergy, the clinical experience at the Allergy Department extended well beyond this initial focus.

During my time in the day-hospital setting, alongside patients undergoing assessment for suspected drug hypersensitivity, I had the opportunity to observe and participate in the management of a significant number of patients with severe food allergy. These included complex cases requiring specialist assessment, diagnostic testing, supervised procedures and individualized management strategies.

This was an unexpected but highly valuable component of my fellowship. My Spanish colleagues shared their practical experience in the assessment and management of patients with severe food allergy and involved me in clinical decision-making and diagnostic procedures. Through these cases, I gained additional practical knowledge of the structured approach to severe food allergy, including clinical risk assessment, interpretation of diagnostic findings and development of individualized management plans.

Therefore, although drug allergy remained the central focus of my fellowship, the experience ultimately allowed me to achieve broader learning outcomes than originally anticipated. Exposure to severe food allergy complemented my previous clinical experience and further strengthened my overall competence as an allergologist.

I particularly appreciated the willingness of my Spanish colleagues to teach and involve me in these cases. Their approach demonstrated how a highly specialized allergy service can provide comprehensive care across different allergic diseases while maintaining a strong focus on individualized risk assessment and patient safety.

July 2026 — Outpatient Allergy Consultations and Drug Desensitization in Oncology

During the first two weeks of July, I participated in outpatient allergy consultations together with experienced allergologists.

The clinical work involved patients with suspected drug allergy, particularly those assessed as having a lower probability or lower risk of severe drug hypersensitivity. I was actively involved in the clinical assessment rather than functioning solely as an observer.

The activities included:

- taking and analysing a detailed allergy history;
- assessment of the characteristics, timing and severity of previous reactions;
- risk stratification;
- selection of appropriate diagnostic tests;

- skin testing when indicated;
- interpretation of test results;
- assessment of the likelihood of true drug hypersensitivity;
- identification of suitable and safe medications;
- development of individualized diagnostic and therapeutic strategies;
- documentation and communication of recommendations to patients and other healthcare professionals.

This part of the fellowship was particularly useful for developing a structured approach to the initial evaluation of patients with suspected drug allergy and for understanding how the intensity of diagnostic procedures can be adapted according to individual risk.

During the second half of July, I participated in allergy consultations and procedures in the oncology setting, focusing on patients who had experienced hypersensitivity reactions to antineoplastic or other oncology-related medications.

This was one of the most valuable and unique components of my fellowship.

I observed and participated under specialist supervision in drug desensitization procedures for patients who required essential oncological treatment despite previous hypersensitivity reactions.

Particular attention was paid to:

- assessment of the previous hypersensitivity reaction;
- evaluation of the indication for desensitization;
- selection of the appropriate desensitization strategy;
- preparation of the patient and medication;
- close monitoring throughout the procedure;
- recognition and management of potential breakthrough reactions;
- documentation of the procedure and subsequent treatment recommendations.

A particularly valuable experience was participation in desensitization involving acalabrutinib, as well as exposure to the use of an adrenaline infusion pump in the management of these highly specialized procedures. This represented a new clinical experience for me and significantly broadened my understanding of the role of allergology in supporting patients receiving essential cancer treatment.

The oncology experience demonstrated particularly well the importance of collaboration between allergologists and other specialties. Rather than simply recommending avoidance of a suspected allergenic medication, the allergy team worked to maintain access to essential treatment whenever clinically appropriate.

August 2026 — Pediatric Allergy Day Hospital and Inpatient Consultations

During August, I participated in the Allergy Department's day-hospital activities in the pediatric setting, where I continued to gain experience in diagnostic procedures and supervised drug provocation testing.

Although the department provided exposure to pediatric allergy practice, a significant part of my clinical experience throughout the fellowship remained focused on drug allergy and the principles of safe diagnostic assessment.

In addition, during August I participated in allergy consultations for patients hospitalized in different departments of the hospital who had developed suspected drug reactions during their treatment.

These consultations involved some of the most clinically complex and severely ill patients encountered during the fellowship.

I participated in:

- assessment of suspected drug reactions occurring during hospitalization;
- review of the patient's clinical history and current treatment;
- identification of potentially responsible medications;
- differential diagnosis of drug hypersensitivity versus other causes of the clinical presentation;
- assessment of the need for diagnostic procedures;
- determination of which medications could safely be continued;
- selection of alternative medications when necessary;
- formulation of recommendations for subsequent management.

This experience provided important insight into the role of the allergologist as a consultant for other hospital departments, particularly when a suspected drug reaction occurs in a patient who is critically ill or dependent on essential medications.

Personally Performed Activities and Observed Activities

A major component of the fellowship was the opportunity to move beyond passive observation and participate directly in clinical activities under supervision.

Activities in which I personally participated:

- detailed allergy history-taking and clinical assessment;
- risk stratification of patients with suspected drug allergy;
- participation in outpatient allergy consultations;
- skin testing;
- preparation and performance of diagnostic procedures under supervision;
- monitoring patients during drug provocation testing;
- assessment of tolerance to suspected or alternative medications;
- identification of patients eligible for drug delabelling;
- selection of safe alternative medications;
- preparation and documentation of drug desensitization procedures;
- participation in stepwise desensitization protocols;
- monitoring patients during desensitization;
- inpatient allergy consultations;
- formulation and documentation of diagnostic and therapeutic recommendations.

Activities primarily observed:

Some highly specialized or high-risk procedures were initially observed or performed jointly with the supervising allergologists according to the clinical circumstances and level of risk.

These included particularly complex drug provocation and desensitization procedures, management of severe breakthrough reactions, and highly specialized oncology-related procedures.

The balance between observation and supervised participation was adapted to patient safety and allowed me to progressively develop practical skills while working within an experienced multidisciplinary team.

Interdisciplinary Case Discussions and Clinical Meetings

Throughout the fellowship, I regularly participated in multidisciplinary discussions of complex clinical cases.

These meetings were particularly valuable for understanding how difficult allergy cases are managed through collaborative decision-making involving different medical specialties.

The programme included:

- multidisciplinary discussions of complex drug allergy cases;
- discussions of challenging patients referred from other departments;
- Severe Asthma Committee meetings;
- bibliographic and journal sessions;
- discussion of current evidence and clinical guidelines.

The Severe Asthma Committee meetings provided additional insight into multidisciplinary assessment and treatment selection for patients with severe asthma. These sessions broadened the fellowship beyond drug allergy and allowed me to observe how specialized allergy services integrate with the management of other complex allergic diseases.

The bibliographic sessions strengthened my ability to critically assess current evidence and translate new research findings into clinical practice.

Research and Academic Activities

An important objective of the fellowship was to strengthen my research skills and to develop ideas that could be translated into future academic work.

During the fellowship, I had regular opportunities to discuss clinical research, study design, interpretation of evidence, and publication strategies with experienced members of the Allergy Department.

The clinical model observed at Hospital Universitari Vall d'Hebron also stimulated the development of a manuscript focusing on the potential role of allergy day hospitals in Low-Resource Countries.

The manuscript is currently being completed and will discuss how structured day-hospital models can improve access to specialist allergy care, particularly for diagnostic procedures, drug provocation testing, delabelling, and desensitization, while making efficient use of limited healthcare resources.

The fellowship therefore contributed directly to the development of a research output arising from the clinical experience gained during the exchange.

Knowledge and Skills Acquired

The fellowship significantly expanded my knowledge and practical skills in several areas of allergology.

The most important competencies acquired or strengthened were:

1. Structured assessment of suspected drug hypersensitivity, including detailed history-taking and risk stratification.
2. Interpretation and practical application of skin testing in the diagnostic work-up of drug allergy.
3. Drug provocation testing, including patient selection, preparation, monitoring and interpretation of tolerance.
4. Drug delabelling, with an improved understanding of when an historical drug allergy label can be safely removed.
5. Selection of safe alternative medications for patients with suspected or confirmed drug hypersensitivity.
6. Drug desensitization, particularly in patients who require essential medications despite previous hypersensitivity reactions.
7. Oncology allergy, including the important role of allergologists in enabling continuation of essential antineoplastic treatment.
8. Inpatient allergy consultation, particularly in severely ill patients who develop suspected drug reactions while receiving multiple medications.
9. Multidisciplinary clinical decision-making, through collaboration with oncology, pediatric, inpatient and other specialist teams.
10. Evidence-based allergy practice, strengthened through bibliographic sessions, case discussions and exposure to current clinical protocols.

Language and Professional Integration

All physicians in the Allergy Department were proficient in English. Consequently, communication with the clinical team was smooth throughout the fellowship, and there was no significant language barrier affecting my participation.

The team was consistently supportive and actively encouraged my involvement in clinical activities. Physicians helped me understand the clinical histories and complex presentations of patients and involved me in diagnostic procedures, particularly skin testing, clinical documentation, and the development of individualized management and desensitization strategies.

This supportive learning environment was an important factor in allowing me to progress from observation to active supervised participation.

Conclusion and Personal Reflection

The EAACI Clinical Fellowship at Hospital Universitari Vall d'Hebron was an exceptionally valuable professional and academic experience. It provided me with an opportunity to observe and actively participate in a highly specialized allergy service and to understand how modern allergology can be integrated into the care of complex patients across different hospital settings.

The most significant learning experience was the comprehensive approach to drug allergy. I gained a deeper understanding of how careful clinical assessment, risk stratification, skin testing and drug provocation can prevent unnecessary drug avoidance and allow patients to regain access to medications that they had previously been told they could not receive.

I was particularly impressed by the role of the allergologist in oncology. The possibility of maintaining essential cancer treatment through individualized drug desensitization demonstrated that allergology can have a direct and substantial impact on treatment outcomes. My experience with oncology desensitization, including the unique exposure to acalabrutinib desensitization and adrenaline infusion, was particularly important for my professional development.

Another important lesson was the value of the allergy day-hospital model. The fellowship demonstrated how specialized diagnostic and therapeutic procedures can be delivered safely and efficiently without requiring prolonged hospitalization. This observation was especially relevant to my own clinical context in Ukraine and stimulated the development of a research manuscript exploring the potential adaptation of this model to low- and middle-income countries.

Following the fellowship, I intend to incorporate the acquired principles of structured drug allergy assessment, delabelling, drug provocation testing and desensitization into my clinical practice whenever resources and patient safety allow. I also hope to further develop local expertise in these areas and contribute to improving access to evidence-based allergy care.

At the same time, the fellowship showed me areas in which I would like to continue developing, particularly advanced drug desensitization protocols, management of complex inpatient drug reactions, and research methodology. Continued collaboration with experienced international allergy centres and participation in clinical research will be important for this further development.

Overall, the fellowship significantly strengthened both my clinical competence and my understanding of how a modern allergy service can be organized around patient safety, multidisciplinary collaboration, evidence-based practice and efficient use of healthcare resources.

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I am also deeply grateful to all physicians, nurses and other healthcare professionals of the Allergy Department and the collaborating hospital departments for welcoming me into their clinical environment and for actively involving me in patient care, diagnostic procedures, drug provocation testing and desensitization activities.

I particularly appreciate the willingness of the team to explain complex clinical cases, discuss diagnostic and therapeutic decisions, and share their practical experience. Their openness and support made it possible for me to gain meaningful hands-on experience while maintaining the highest standards of patient safety.

Finally, I would like to express my gratitude to the European Academy of Allergy and Clinical Immunology for providing me with this fellowship opportunity. This experience has contributed substantially to my professional development and will have a lasting impact on my clinical practice, research activities and future development of allergy care in Ukraine.