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## The role of specific immunotherapy in reduction of viral infections in asthmatic patients

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**Introduction:** Viral respiratory infections are the most common cause of an acute asthma exacerbation in both children and adults and represent a significant global health burden. They are found in approximately 80% of wheezing episodes in school-aged children and ½ or ¾ of acute wheezing episodes in adults, 2010.

### Viral infections implicates in asthma development in many stages:

1. Resp. virus infections in infancy is a risk factor for, and may predispose to, the development of asthma later in life;
2. Resp. virus infection is associated with the acute exacerbation of bronchial asthma;
3. Glucocorticoids are not adequate for controlling asthma-related symptoms upon resp. virus infection.

**Material and Methods:** Our study is a comparative clinical research, done in the University Clinical Center in Prishtina and in cooperation with specialized allergologic center Ylli in Prishtina. The including criteria was: 60 adult patients diagnosed with allergic asthma Intermittent mild, Mild persistent, Moderate persistent Asthma (according to GINA) aged between 15 and 30 years, both sexes. 30 patients are treated with specific Immunotherapy (SCIT) and 30 of them with another anti-asthmatic drugs.

**Results:** The number of patients who visited the physician for bronchial hyperactivity (BH) depends on whether they were on immunotherapy or not  $p=0.0001$ . In the first quarter, both groups are identified to have an equal number of coldness conditions. In the second quarter, a decreased frequency of coldness conditions is registered, in the group with immunotherapy 3/30 (10%), whereas in the group without immunotherapy that number was greater 11/30 (36%). In the third and fourth quarter the percentage of coldness condition of 3% has retained in the immunotherapy group, whilst in the group without immunotherapy there was an increase from 20/30 (66%) to 27/30 (90%).

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