

AGS background document: Virginia

Background

Alpha-gal syndrome (AGS), is an IgE-mediated allergy to the sugar galactose- α -1,3-galactose (alpha-gal), which is found in all mammals except some primates.¹ Its onset is associated with tick bites.² In the U.S., lone star ticks are responsible for the majority of cases.³

People with AGS react to products made from mammals. This includes foods such as beef, pork, lamb, venison, dairy products, and gelatin.³⁻⁵ It also includes drugs and medical products, such as monoclonal antibodies, heparin, bioprosthetic heart valves, some vaccines, antivenom, medication in gelatin capsules, and many other medical products.³⁻⁵ Over 75% of people with AGS report reacting to a medication, and about 50% report that they have experienced anaphylactic reactions to a health product.⁷ Many people with AGS also react to personal care and household products with mammal-derived ingredients.³

Alpha-gal reactions are often severe and can be fatal.^{3,4,6} Over 60% of people with AGS experience anaphylactic reactions.^{8,9} In areas of high prevalence, reactions to alpha-gal can be the number one cause of anaphylaxis in adults and adolescents, accounting for a third of all cases, more than all other food allergies combined.¹⁰

Due to growing lone star tick populations, the number of cases of AGS is increasing at an alarming rate.^{11,12} In July, 2023, the CDC reported that between 2010 and 2022, more than 110,000 suspected cases of AGS were identified.¹² The CDC estimates that up to 450,000 Americans may be affected, making AGS the 10th most common food allergy.^{12,13} Yet alarmingly, 78% of physicians know little to nothing about AGS, and only 5% feel very confident in diagnosing and managing it.¹⁴

Virginia: an alpha-gal syndrome hotspot

Virginia is an alpha-gal syndrome hotspot. Residents in rural areas and in the lowerelevation Piedmont and Coastal Plain regions are most affected.^{12,18} This is coincident with the abundance of lone star ticks, which account for the vast majority of all human tick encounters within the state.¹⁵⁻¹⁷ Over 20% of residents in some areas of Virginia are sensitized to alpha-gal,¹⁸⁻²² and up to 9% of these individuals may have allergic reactions to alpha-gal.^{3,23-25} A recent study found that more than 2% of an unselected cohort from central Virginia had AGS.²⁴ Other estimates suggest that up to 3% of people in the hardest hit areas may be affected.^{3,23,25} In addition, small studies suggest that AGS may be a frequent cause of both IBS-like symptoms and rheumatological issues, accounting for up to 25% of such cases in central Virginia.^{26,27} Concerningly, research conducted at UVA and elsewhere found that people who are sensitized to alpha-gal, even if they do not develop allergic reactions, may be at increased risk of cardiovascular disease.^{22,28}

A call to action

In a July 2023 report, the CDC recognized AGS as a growing clinical and public health concern.¹² Due to the current lack of surveillance, they state, the true prevalence of AGS is largely unknown.¹² The CDC identified a "critical need" for state and local health authorities to initiate surveillance and encourages them to do so.^{12,31}

The CDC recently laid the groundwork for states to make AGS reporting mandatory, publishing a National Notifiable Diseases Surveillance System <u>case definition for alpha-gal syndrome (AGS)</u>²⁹ and creating an <u>Alpha-gal Syndrome Case Report Form</u>.³⁰ In September, 2023 Arkansas became the first state to make AGS a mandatory, reportable health condition,³² and other states in high prevalence regions are expected to follow suit.

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