

WHAT IS SYSTEMIC MAST CELL DISEASE?

Mast cell diseases are a group of rare disorders caused by the presence of excess or disordered mast cells (mastocytes) and/or mast cell precursors in a person's body. Genetic mutations (including c-kit receptor) may be among the causes of the disease, but research is still ongoing. Variants include: Cutaneous Mastocytosis, Mastocytic Enterocolitis, Indolent Systemic Mastocytosis, Monoclonal Mast Cell Activation, Aggressive Systemic Mastocytosis & Leukemic Systemic Mastocytosis. Diagnosis can be a prolonged, complex process as the chemicals involved are ephemeral and are not the same in all patients. Systemic Mast Cell Disease is an umbrella term used for all systemic variants of the disease.

Mast cells are located in connective tissue, including the skin, the linings of the stomach and intestine, and many other sites throughout the body. They play an important role in helping defend these tissues from disease. By releasing chemical "alarms" such as histamine, mast cells attract other key players of the immune defense system to areas of the body where they are needed. Mast cells seem to may play a part in wound healing, protection from cancer, and the growth of blood vessels. The typical itching felt around a healing scab may be caused by histamine released by mast cells.

However, when there are too many, disordered, or damaged mast cells or precursors in a person's body, a wide range of allergic and reactive symptoms can occur. Degranulation of mast cells can take place in literally any organ or tissue in the body, causing an array of allergic disease symptoms that can mimic many other disorders. For this reason, and because of rarity, patients may go misdiagnosed or undiagnosed for decades. People with mast cell disease typically have widespread drug, food, preservative, and environmental allergies, often with severe, prolonged or life threatening reactions to chemicals in the environment (see **TRIGGERS**, below) that others may not even notice. Even normal bodily processes or regular facets of life can trigger mast cell degranulation. Life threatening anaphylactic reactions are a hallmark of the disease and for many patients, a constant threat. Treatment involves life-long medication; mast cell mediators, histamine blockers, and others; but most important is strict avoidance of triggers, which often requires a very restrictive and isolating lifestyle.

TRIGGERS may include: Medications, (ALL, but Radiographic dyes, Anaesthetics, Antibiotics, esp high risk) Foods, Alcohol, Histamine containing/activating substances, Preservatives, Insect bites, Environmental toxins/chemicals (ie; food additives, scented products, dyes, detergents, anti-bacterials, cleaning/laundry/body-care products, fire retardants, synthetic materials, fertilizers, pesticides, herbicides), infection (viral, bacterial, fungal), physical & emotional stressors (ie; fatigue, exercise, hormone or blood sugar fluctuations, digestion, temperature changes, argument, strong emotion)

CLINICAL SYMPTOMS:

- Fatigue
- Skin rashes, lesions
- Flushing, itching
- Dermatographism
- Abdominal pain, swelling, bleeding
- Nausea & Vomiting
- Chronic Diarrhea
- Drug Intolerance
- Food Allergies
- Chemical sensitivity
- Malabsorption
- Respiratory Infections
- Ear/nose/throat inflammation
- Headache, including Migraine
- Widespread Edema
- Allergic seizures
- Labile blood pressure
- Syncope, Shock
- Bone & muscle pain
- Decreased bone density
- Anaphylaxis & Laryngeal Edema