

ALLERGY

ATOPIC MARCH TO A DEAD END

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“.. or does the theory really have legs?” is the title of a critical editorial in JMCP last month. Although I will co-author a forthcoming paper on allergic rhinitis being a risk factor for later asthma, the situation is far from being understood. “March” implies a command for all to go into one direction which is arguable a poor analogy as most AD or AR patients will never progress to whatever battle fields. So Cutiss may have put it right

The theory that AD progresses to AM in an atopic march has been popularized by authors who are consultants to the manufacturers of drugs for AD and in BOGSAT (bunch of old guys sitting around talking) discussions. However, the theory of atopic march encountered a bump in the road when the Early Treatment allergy for global use: report of the Nomenclature Review Committee of the Atopic Child (ETAC) study found that 18 months of treatment with the antihistamine cetirizine (Zyrtec) was ineffective in preventing the development of asthma in children with early eczema.

Lets forget about atopic march but think of an underlying predisposition in many organs that may become relevant on further triggers, yea, yea.