

Correspondence

Better drug trials: Reply

To the Editor:

Dr. Kelso¹ has written concerning what he perceives as a flaw in our study of fluticasone (Chervinsky P, Van As A, Bronsky EA, et al. Fluticasone propionate aerosol for the treatment of adults with mild to moderate asthma. *J ALLERGY CLIN IMMUNOL* 1994;94:676-83). We believe that our trial design was an improvement over previous similar trials and will lend itself to a better comparison of new and old drugs. In addition, the use of predetermined patient stability criteria can guard against severe deterioration and may be applicable in clinical management. However, Dr. Kelso believes, and justifiably so, that the most important factor is whether the drug is better than those currently available. Before this judgment about a new product can be made, however, it is necessary to assess the dose of the new preparation to be used and to establish efficacy. Only after these studies are done is it appropriate to do comparative studies. I am sure that Dr. Kelso can look forward to the publication of these studies now that the basic work has been completed. I am unaware of any drug development program that has not been conducted in this fashion. The most important question that the drug companies and the clinical investigator must answer is whether the new product is better than currently available products. If it is not, why would a drug company want to market the product?

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REFERENCE

1. Kelso JM. Better drug trials [Letter]. *J ALLERGY CLIN IMMUNOL* 1995;95:1063.

1/8/67049

Bronchial asthma caused by onion

To the Editor:

I read with great interest the article "Bronchial asthma, rhinoconjunctivitis, and contact dermatitis caused by onion" by Valdivieso et al. (*J ALLERGY CLIN IMMUNOL* 1994;94:928-30). They demonstrated IgE-specific antibodies against the onion with both skin and in vitro tests. But they did not comment on other possibilities of hypersensitivity caused by onions. Some studies have shown that platelet aggregation is inhibited by both onion (*Allium cepa*) and garlic (*Allium sativum*). Makheja et al.¹ reported that chemically similar compounds contained in both of these *Allium* species inhibit platelet aggregation by blocking thromboxane synthesis. Recently, Kawakishi and Morimitsu² found a new inhibitor

of platelet aggregation in onion oil. Bayer et al.³ isolated inhibitors of cyclooxygenase and lipoxygenase in onions and named these compounds *cepaenes*.

Is there any possibility that bronchial asthma and rhinitis caused by onion was induced by a mechanism similar to that in aspirin-sensitive asthma?

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REFERENCES

1. Makheja AN, Vanderhoek JY, Bailey JM. Inhibition of platelet aggregation and thromboxane synthesis by onion and garlic. *Lancet* 1979;1:781.
2. Kawakishi S, Morimitsu Y. New inhibitor of platelet aggregation in onion oil. *Lancet* 1988;2:330.
3. Bayer T, Wagner H, Wray V, Dorsch W. Inhibitors of cyclo-oxygenase and lipoxygenase in onions. *Lancet* 1988;2:906.

1/8/64825

Reply

To the Editor:

Our article "Bronchial asthma, rhinoconjunctivitis, and contact dermatitis caused by onion" (*J ALLERGY CLIN IMMUNOL* 1994;94:928-30) was published as a "Brief communication." Eventually, we would like to expand our work regarding onion hypersensitivity and other interesting properties of *Allium* family.

We found in our patients that IgE and cell-mediated mechanisms were active, but we do not discount the possibility that in other patients the mechanisms mentioned by Dr. Hiroshi Kawane may be present, although this must be investigated.

We thank Dr. Kawane for his interest and comments about our research.

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Allergen immunotherapy in young children

To the Editor:

I am writing to comment on the article entitled "Rostrum: The appropriate use of skin testing in allergen immunotherapy in young children" by Dr. Dennis Ownby and Dr. Allen Adinoff (*J ALLERGY CLIN IMMUNOL* 1994;94:662-5). Several situations have not been considered in this report, and I believe these situations are important and might modify the authors' conclusion that immunotherapy is relatively contraindicated in young children. Many children are allergic to cats. It has