

Olive pollen allergy in Bari, Italy

Referring to the paper "Allergenic pollen and pollinosis in Italy: recent advances", by Negrini & Arobba (Allergy 1992: 47: 371–9), we did not participate in this study, and we do not entirely agree with certain contentions regarding the area around Bari, capital city of Apulia in southeastern Italy, with 400 000 inhabitants. In particular, the authors of this article acknowledged the substantial importance of airborne olive pollen as a cause of allergic diseases in large areas of Italy. For the last decade, we have been studying olive-pollen aerobiology and olive-pollen allergy in Bari. The seasonal highest daily counts of airborne olive pollen in Bari and the averages relevant to the high-season daily counts for the years 1982–92 are reported in Table 1. The high-pollen season was determined according to the method of Mullenders et al. (4). The figures reported here are unusually high but consistent with the huge extension of olive tree cultivation in the area around Bari. Fifty-four percent of this area was devoted to olive cultivation in 1981 (1). A definite seasonal alternation in a 2-year cycle has also been observed (Table 1). Relatively moderate and more severe seasons occurred alternately in predictable fashion. This aerobiologic phenomenon is due to agronomic peculiarities of the olive tree and is of great importance also from a clinical point of view (2). The occurrence of olive allergy in the area around Bari could be estimated to be 30–60% of all subjects with pollinosis. Of all the outpatients seen at our clinic and given treatment because of pollen-related disorders in 1979–83, 27% were patients with a diagnosis of olive pollinosis. These olive-sensitized patients made up 49.2% of the total in 1988 and 61.5% in 1991. Approximately 80–90% of these patients showed other, associated sensitizations. Therefore, olive allergy must be regarded as a pollinosis occurring mainly in polysensitized subjects, at least in the area considered (2). A statistically significant decrease in specific skin reactivity and specific IgE along with a definite increase in specific IgG was observed in patients with olive pollinosis after 1 year of immunotherapy (3).

Table 1. Airborne olive pollen in Bari, Italy, 1982–92. Seasonal highest daily counts and high-season daily count averages. The counts are expressed as number of pollen grains/m³ air

	Seasonal highest daily count	High-season daily count average
1982	1047	306
1983	1815	578
1984	667	136
1985	2213	361
1986	660	180
1987	4001	909
1988	1674	527
1989	1769	284
1990	568	166
1991	1903	508
1992	1382	412

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