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Letters to the Editor

Diagnosing Allergic Rhinitis: Skin Test vs. IgE Testing

to the editor: I would like to commend the authors of "[Vasomotor Rhinitis](#),"¹ in the September 15, 2005, issue of *American Family Physician*, for raising the issue of testing and its importance in accurately diagnosing allergic versus nonallergic rhinitis.

I believe the article¹ implies that skin testing is superior to immunoglobulin E (IgE) testing. Both of these tests have a place in diagnosing patients²; however, because allergic symptoms are highly associated with the production of IgE, a quantitative and objective diagnostic measure such as a specific IgE blood level is important to help accurately identify what is causing a patient's symptoms.³ Furthermore, the latest generation of specific IgE blood tests have been shown to be comparable to skin-prick testing in terms of sensitivity, specificity, and positive and negative predictive value.⁴ The newest generation assays are significantly more accurate than older radioallergosorbent testing methods.³

In a primary care setting, serum IgE testing using the newest and most accurate methodology is an excellent tool to assist family physicians in accurately diagnosing the cause of symptoms related to rhinitis.^{5,6}

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editor's note: This letter was sent to the authors of "Vasomotor Rhinitis," who declined to reply.

Corrections

The "[Clinical Quiz](#)" in the September 1, 2005, issue (page 750) incorrectly identified *Candida* species as a dermatophyte in Question 3, pertaining to the article "Intertrigo and Common Secondary Skin Infections," on page 833. The correct answer to this rewritten question is A. *Candida* species. The question is reprinted below and the online version has been corrected.

Q3. Which one of the following organisms is most commonly associated with intertrigo?

- ☐ A. *Candida* species.
- ☐ B. *Trichophyton rubrum*.
- ☐ C. *Trichophyton mentagrophytes*.
- ☐ D. *Epidermophyton floccosum*.

The "[Clinical Quiz](#)" in the December 15, 2005, issue (page 2428) had an incorrectly worded question for Question 5, pertaining to the article "An Approach to the Postpartum Office Visit," on page 2491. The correct answer to this rewritten question is C. Ongoing support while breastfeeding. The question is reprinted below and the online version has been corrected.

Q5. According to the U.S. Preventive Services Task Force, which one of the following strategies has the best evidence for increased continuance of breastfeeding at six months ?

- ☐ A. Early structured breastfeeding education combined with behavioral counseling.
- ☐ B. Peer counseling alone.
- ☐ C. Ongoing support while breastfeeding.
- ☐ D. Counseling by primary care physicians during routine office visits.

Send letters to Kenny Lin, M.D., assistant editor, *American Family Physician*, e-mail: afplet@aafp.org. Letters submitted via regular mail should be sent (on disk) to: 11400 Tomahawk Creek Pkwy., Leawood, KS 66211-6272.

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