

Response to: "Evidence on pseudoallergen-free diet for chronic urticaria"

To the Editor: We thank Drs Yeung and Swerlick for their comments on our continuing medical education article "Diet in dermatology: Part II. Melanoma, chronic urticaria, and psoriasis."¹ We agree that the benefits of a pseudoallergen-free diet are controversial. Additionally, a pseudoallergen elimination diet may be of limited utility in the majority of chronic urticaria patients.^{1,2} Indeed, it is important to emphasize that a recent trial found sensitivity to pseudoallergens in less than 1% of a cohort of 100 patients with chronic urticaria.² Prospective interventional studies have reported improvement of chronic urticaria symptoms in 28% to 73% of participants adopting a pseudoallergen-free diet.^{3,4} Double-blind, placebo-controlled oral challenges with individual pseudoallergens, the current gold standard for diagnosing food allergy, yield reproducible urticaria symptoms following a pseudoallergen-free diet in only 1% to 19% of patients.^{3,5} We agree that while these studies do not confirm the efficacy of pseudoallergen elimination diets in improving chronic urticaria, they suggest that distinct pseudoallergens may trigger reproducible chronic urticaria symptoms in some patients.

A summary statement from a recent systematic review from the American Academy of Allergy, Asthma, and Immunology concludes that the evidence supporting pseudoallergen-free diets in chronic urticaria is weak.⁶ Furthermore, adhering to a pseudoallergen-free diet may be burdensome and difficult for some patients. Given its low cost and relative safety, however, a pseudoallergen elimination diet can be considered in a small subset of chronic urticaria patients. Isolation of pseudoallergens directly

causing urticaria symptoms should be determined using double-blind, placebo-controlled oral food challenges, thereby eliminating individual triggers while avoiding nutritional deficiencies.

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