

Letters to the editor

Oral allergy syndrome (OAS) to grapes

In the April issue of the journal (1998;53:451–2), Giannoccaro et al. describe “the first case of a patient with OAS after eating grapes”. However, we have reported two such cases at the national meeting of the French Society of Allergology and Clinical Immunology in Reims in June 1997 (1), and published our findings in the *Revue Française d'Allergologie et d'Immunologie Clinique*.

In fact, the two patients first developed OAS to grapes, but they neglected this adverse reaction. Subsequently, one of them experienced anaphylactic shock at the end of a meal. The second patient, a short time after eating grapes, developed exercise-induced anaphylaxis. Such a case has been previously reported by Dohi et al. (2). In our two cases, prick by prick tests were positive with red grapes, 6/30 (W/F) and 10/30, respectively, and specific IgE determinations were 1.06 and 9.80 kU/l by the CAP-RAST method (Pharmacia, Uppsala, Sweden). Indeed, the two patients were also sensitized to pollens (mugwort and birch, respectively) and to the Rosaceae family (peach and apple, respectively).

The above mentioned report aroused our interest; in particular, the description of cross-reactivity between grape and cherry in the patient from Bari;

similar cross-reactivity between grapes and Rosaceae fruits may be suspected in these patients.

We wish to emphasize the risk of anaphylaxis in such patients after the ingestion of grapes or wine, although the meeting in Reims-Champagne, France, concluded that the risk of allergy is very low in wine growers as in wine drinkers. Patients who complain of symptoms suggesting anaphylaxis should now be also tested for hypersensitivity to grapes.

References

1. Guinépain M-T, Rassemont R, Laurent J. Le raisin est aussi un trophallergène. *Rev Fr Allergol* 1997;37:400.
2. Dohi M, Suko M, Sugiyama H, et al. Food-dependent, exercise-induced anaphylaxis: a study on 11 Japanese cases. *J Allergy Clin Immunol* 1991;87:34–40.

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Journal impact factors

I read with interest the review article of Seglen “Citations and journal impact factors: questionable indicators of research quality” (*Allergy* 1997; 52:1050–6). Impact factor is not a perfect tool to measure the quality of articles, but there is nothing better, and it has the advantage of already being in existence and is therefore a good technique for scientific evaluation. Experience has shown that in each speciality the best journals are those in which it is most difficult to have an article accepted, and these are the journals that have a high impact factor. These journals existed long before the impact factor was devised.

The use of the impact factor as a measure of quality is widespread because it fits well with the opinion we have in each field of the best journals in our speciality.

The assumption that citations indicate scientific quality derives from the fact that there is a good

correlation between the journal of high scientific level and the journal with a high impact factor. The choice of a journal for publication is usually based on the fact that each of us prefers to publish articles in prestigious journals. However, if the papers we submit are not of high quality, they will not be accepted by prestigious journals, and we have to submit articles of moderate quality to journals of inferior impact.

We agree that language discrimination is the reason for the low recorded citation rate of most journals not published in English.

In conclusion, prestigious journals publish papers of high level. Therefore, their impact factor is high, and not the contrary.

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