

Correspondence

Apparent latex allergy provoked by fear

To the Editor:

We draw attention to a situation that may become more common with increasing publicity regarding severe latex allergic reactions. In 1991, a 52-year-old woman was referred to the University of Washington's Dental Fears Research Clinic because of urticaria, which developed during oral examination by two different dentists. The reactions were attributed to latex allergy, and thus the dentists were unable to provide appropriate treatment.

When assessed at the Dental Fears Research Clinic, the patient had moderate dental fear and felt incapable of stopping the dentist if she experienced pain or needed a rest break. At an appointment set aside to assess her skin reactivity, the clinician first performed an oral assessment without gloves. The patient reported an almost immediate "itchiness" in her ears, and this was followed shortly by facial erythema. She reported high anxiety (7 on a 10-point scale). These responses subsided during a rest break. The patient was then taken to a quiet, nonclinical area and was asked to handle a latex glove. No reaction occurred. At a subsequent appointment and after behavioral treatment for her dental fear, the dentist performed a tooth extraction for treatment of alveolar infection, without incident, using latex gloves.

This case is instructive in demonstrating that emotion-related causes of symptoms need not constitute a "wastebasket diagnosis" but can be systematically tested. For this patient, the probable cause of symptoms was emotion-induced urticaria, which may well have been cholinergic urticaria, because similar reactions had been provoked in the past by heat and exercise.

We wish to know whether readers have had similar experiences. Other patients undoubtedly carry an incorrect diagnosis of latex allergy for whom allergists could perform a valuable service by providing reassurance with the aid of appropriate skin tests.

A full report of this case has been published elsewhere (Longley et al. "Fear can mimic latex allergy in patients with dental phobia." *Journal of the Academy of General Dentistry* 1993;42:236-40), and reprints are available from the authors.

Alison J. Longley, PhD

Louis Fiset, DDS

Tracy Getz, MS

Dental Fears Research Clinic

DPHS, RM-13

University of Washington

Paul P. Van Arsdel, MD

Section of Allergy

Department of Medicine

University of Washington Medical Center, RM-13

Seattle, Washington

Bonsai: A new allergenic source

To the Editor:

In Italy, as well as in the United States, bonsai plants for the home are becoming increasingly popular, but as yet most physicians are unaware that they are a new allergenic source.

In 1991, a 43-year-old man was referred to us with symptoms of allergic rhinitis, which had lasted from mid January to early March. The patient was otherwise healthy, had no significant disease in the past, and did not report a history of atopy in his family. During the year before referral, after eating apples, he had oral edema with blistering. The nasal symptoms appeared when the patient was at home and improved markedly when he was in the open air. Skin prick tests with a complete set of allergens (DHS -Bayropharm, Milan, Italy), which were performed on the volar surface of both forearms according to the instructions of the Italian Society of Immunology and Clinical Allergology,¹ showed a positive reaction to birch pollen. Specific IgE assay, made with a fluoroimmunoassay method (CAP System; Pharmacia, Milan, Italy), confirmed the positive findings in vivo (specific anti-birch IgE = 17.9 kU/L; class IV), and moreover, showed the greater sensitivity of in vitro dosage in comparison to skin prick tests.

On being questioned further, the patient reported that he kept two birch bonsai plants in his home. It was therefore reasonable to attribute the appearance of oral symptoms after the ingestion of apples to the typical pollinosis associated with *Betulaceae*—oral allergic syndrome from apples. In January 1992, the patient reported that rhinitis symptoms reappeared but disappeared when the birch bonsai plants were removed from his home.

We believe that this case is of interest because pollinosis caused by ornamental trees may be difficult to diagnose, and because they are kept in a different environment, their pollinosis period can be different from that of other trees.

Mario Plebani, MD

Franco Borghesan, MD

Angelo Burlina, MD

Institute of Laboratory Medicine

University-Hospital of Padova

Via Giustiniani, 2

35128 Padova, Italy

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