

O V I D*

Full Text

[Results Display](#) [Main Search Page](#) [Help](#) [LOGOFF](#)

[PayPerView Account](#) [View Cart](#)



The NEW ENGLAND
JOURNAL of MEDICINE

ESTABLISHED 1812 • ISSN 0028-4793 • WWW.NEJM.ORG

Owned, published, and © copyrighted, 2000, by the MASSACHUSETTS MEDICAL
SOCIETY Volume 342(1), 6 January 2000, pp 58-59

[About this Journal](#)

[Table of Contents](#)

[Browse TOC](#)

[Find Citing Articles](#)

[Email Jumpstart](#)

[Save Article Text](#)

[Email Article Text](#)

[Print Preview](#)

Links

[Complete Reference](#)
[Catalogo Biblioteca ISS](#)

Outline

- REFERENCES

Recent History

Clinical Efficacy of Gras...



[Previous Page](#)

Clinical Efficacy of Grass-Pollen Immunotherapy [Correspondence]

Ostergaard, Marianne Stubbe; Witt, Klaus

University of Copenhagen; 2200 Copenhagen N, Denmark

To the Editor: The study by Durham et al. (Aug. 12 issue) [1] of the clinical efficacy of

grass-pollen immunotherapy has a complex design. According to the authors, the study is a randomized, double-blind, placebo-controlled study of the discontinuation of immunotherapy in patients with rhinitis. The authors conclude that "immunotherapy for grass-pollen allergy for three to four years induces prolonged clinical remission."

The design of the study has a flaw that we believe invalidates their conclusion: it did not include a randomized group that received placebo to control for the spontaneous course of rhinitis. In 1988, patients were randomly assigned to receive immunotherapy for three or four years. In 1992, each of these patients was randomly assigned to one of two groups, an immunotherapy-maintenance group or a discontinuation group, which received placebo injections until 1995. In 1992, an open, nonplacebo control group was added so that symptoms could be monitored.

Rhinitis is a common disease, but little is known about its epidemiology [\[2\]](#) or its spontaneous course. Clinical experience shows that there is great variation in the severity of rhinitis and its course. Often, seasonal rhinitis diminishes after some years of disease.

Without the use of a randomized placebo group, Durham et al. cannot show whether immunotherapy is better than a seven-year spontaneous course of grass-pollen rhinitis. The study design does, however, support the conclusion that patients who have received immunotherapy for three to four years will not be harmed by discontinuing the treatment.

Marianne Stubbe Ostergaard, M.D., Ph.D.

Klaus Witt, M.D., Ph.D.

University of Copenhagen; 2200 Copenhagen N, Denmark

REFERENCES

1. Durham SR, Walker SM, Varga E-M, et al. Long-term clinical efficacy of grass-pollen immunotherapy. N Engl J Med 1999;341:468-75. [Catalogo Biblioteca ISS Full text \(pacchetto Ovid\) Bibliographic Links](#) [\[Context Link\]](#)
2. International Rhinitis Management Working Group. International consensus report on the diagnosis and management of rhinitis. Allergy 1994;49:Suppl:1-34. [Catalogo Biblioteca ISS Bibliographic Links](#) [\[Context Link\]](#)

Accession Number: 00006024-200001060-00018

Copyright (c) 2000-2005 [Ovid Technologies, Inc.](#)

Version: rel10.2.0, SourceID 1.11354.1.53