

IgE reactivity and survival probabilities in Sézary syndrome

To the Editor: We read with interest the comments of Väkevä et al¹ published in the latest issue of *Journal of the American Academy of Dermatology*, but respectfully disagree with their conclusions.

We studied, in 2012,² 55 patients affected by Sézary syndrome (SS), all characterized by the presence of a measurable T-cell clone in the peripheral blood according to the World Health Organization classification.³ Therefore, they were all “true” SS patients. At least 1 molecule among the 103 tested by means of the ISAC system was recognized in 24 (43.6%) of the patients. We found that the 5-year overall survival probabilities were $82.2\% \pm 8.3\%$ in IgE negative patients, while IgE positive patients had a significantly lower survival rate (25.5%, 5-year survival).

Väkevä et al studied 9 patients affected by true SS, comparing them to 4 patients with “atopic dermatitis (AD) - pre-SS”, 2 patients with “erythrodermic mycosis fungoides,” and 3 patients affected by atopic dermatitis. None of the 9 patients studied had specific IgE once evaluated by means of ISAC 112 (95% confidence limit 37%). In accordance with our observations, both deceased SS patients had specific IgE to staphylococcal enterotoxins, whereas only 2 of 7 were positive among SS patients still alive at the time of the observation.

It appears that their observations agree with ours, in that IgE reactivity seems to substantially increase the risk of death among true SS patients.

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