Guest Editorial

Allergy in Limpopo

So it’s that time of the year again! This issue of the journal is timed to coincide with the latest ALLSA Congress – ‘Allergy in the Bush’. We are proud to bring you both this issue of the journal and the congress. This year the initiative is aimed at bringing allergy teaching to an area that has been historically neglected. Limpopo has a number of doctors who have been intimately involved with the Allergy Society over many years and it is time we brought a congress to their province.

While on the topic of allergy in Limpopo let us remind you that this area has been involved in many initiatives to define allergic diseases in South Africa. Polokwane children participated in the International Study of Allergies and Asthma in Childhood (ISAAC), which documented a prevalence of both asthma and allergic rhinitis in this area almost as high as that in Cape Town. The most exciting result of this study, we believe, is that it confirmed a high ongoing prevalence of allergic conditions in the north of South Africa. This means that we can use this together with the data from Cape Town to suggest a prevalence for all of South Africa. The prevalence of asthma symptoms in Polokwane was 18.7%; not dissimilar to the 20.7% in Cape Town.1

Two further studies have emanated from Polokwane in an attempt to define asthma and risk factors for asthma in that region. In the first published study the aim was to assess the 12-month prevalence of wheeze and severe wheeze together with their risk factors.2 This was a questionnaire study (within the context of ISAAC) and the findings were of an 11.2% prevalence of wheeze and 5.7% prevalence of severe wheeze in these children. In addition these authors reported that living in a rural area significantly decreased the likelihood of wheeze (by 31%) while exposure to environmental tobacco smoke at home and the presence of both eczema and rhinoconjunctivitis symptoms increased the likelihood of wheeze. Rhinoconjunctivitis was also a predictor of severe wheeze. In their conclusion the authors suggest that wheeze (and probably therefore asthma) is an emerging public health problem in Polokwane.

Also published in 2009 was a study of determinants of asthma at the district, school and individual level in Polokwane.3 Altogether 742 school children were questioned. The authors report that persistent cough, exposure to smoke at home and the lack of access to a flushing toilet are key predictors of asthma in children. These findings deserve our attention as we know that asthma in South Africa has a distinct pattern that is not identical to atopic asthma seen elsewhere in the world. We urgently need studies such as these to explore our local conditions that expose asthma phenotypes.

Much work is under way to gain understanding of allergy in this region and it is our firm belief that this research will help to define allergy in South Africa as a whole. These researchers need our full support. We trust that through a congress like the one we present, such efforts will be rewarded and complemented.

In this issue we have five articles on topical subjects in allergy. Sam Risenga is interested in latex allergy and has recently reviewed the literature. Robin Green has given expression to his thoughts on the barriers to asthma and allergic rhinitis control in South Africa. He has also penned some thoughts on the origins of asthma. Teshni Moodley has written an informative article on chronic rhinitis. She suggests that we should not use the term ‘allergic rhinitis’ flippantly. Mike Levin has given us some insights into a condition that has become topical of late, namely eosinophilic oesophagitis.

Regular features include ABC of Allergy, Allergies in the workplace, an interesting case report and snippets from the journals.

We trust you will enjoy this edition of the journal.

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