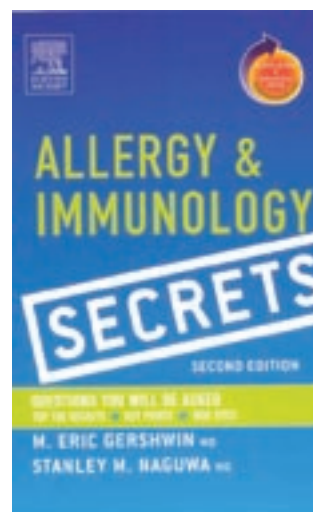


Gershwin ME, Naguwa SM, editors. Allergy & Immunology Secrets. Second Edition. Philadelphia - Elsevier Mosby, 2005. Pages 340, chapters 20. ISBN 1-56053-619.5.

This is the second edition of a book that first appeared in 2001. This edition is enriched with new concepts in allergology and immunology, and is also accessible on line (www.studentconsult.com). Pin number is provided at the book inside. Twenty-two experts in the fields of immunology and allergology from California were engaged in writing this valuable book. In the preface, the editors stress that the incidence of allergic disease has become almost epidemic. Indeed, allergies are among the most common chronic problems of childhood and most frequent complains of adults. Several national studies have demonstrated that up to 20% of people in the United States suffer from allergic rhinitis and up to 10% suffer from asthma. More than 90% of patients with allergies require some form of intermittent drug therapy. Because of the ubiquitous nature of allergies, physicians in many disciplines are called upon to treat allergic patients. Although the majority of research on allergy is performed at large university medical centers, the bulk of medical care is delivered through the community by primary care physicians. The specialization of allergy and immunology attracts students from pediatrics, internal medicine and dermatology. With a growing number of adult-onset allergy, even gerontologists need to be kept abreast of advances in the management of immune problems. The authors provide the readers with useful materials to help them in their broad examination and perhaps even stimulate a career in allergy and immunology, and most importantly in the improvement of patient care. In the first chapter, top 100 secrets are listed, representing the 100 top board alerts. They summarize the concepts, principles and most salient details of allergy and immunology. The chapters are so designed as



to contain questions followed by answers consisting of several concise sentences. Most answers are accompanied by recent literature references. All chapters contain numerous tables. Also, each chapter is accompanied by data on websites related to questions from the respective field and more than 50 references. A separate chapter is dedicated to the epidemiology and genetics of allergic disease. The key points about epidemiology conclude that the prevalence of atopic disease continues to increase, and the major relative risk factors for the development of asthma include Alternaria and house dust allergy as well as the use of antibiotics before 1 year of age. From the genetic perspective, allergy is multifactorial and the susceptibility to the disease is determined by interactions between multiple genes, and involves important nongenetic factors such the environment for its expression. Special chapters are dedicated to the immunology and pathophysiology of allergic disease, and contain 104 questions with answers, many informative tables and illustrations. Aeroallergens are elaborated in a special chapter too. The chapter on diagnostic evaluation of allergic disease concisely specifies the types of allergologic tests, indications and contraindications for their use. Allergic rhinitis, asthma and rhinosinusitis are presented in separate chapters. The chapter on urticaria depicts issues related to clinical picture, differences between acute and chronic urticaria, physical urticaria, immune and nonimmune mastocyte stimuli, contact urticaria, role of food in urticaria, urticarial vasculitis, and autoimmune urticaria. On answering the question of

association between chronic urticaria and thyroid autoimmunity, the authors stress that an increasing number of reports suggest an association of thyroid autoimmunity with urticaria. A substantial percentage (5%-25%, depending on the study) of patients with chronic urticaria have antithyroid autoantibodies. Such patients may be clinically and biochemically euthyroid. Among patients with thyroid disease, a significantly higher percentage of those with autoantibodies have chronic urticaria compared to those without autoantibodies. The questions and answers in the chapter on atopic dermatitis (AD) provide basic data on AD, the clinical picture, diagnosis and differential diagnosis, role of infective agents in the development of AD, and principles of AD treatment. A special chapter is dedicated to ocular allergies, describing various forms of conjunctivitis and keratoconjunctivitis in the form of questions and answers, and emphasizing the need of critical approach to the use of corticosteroid agents in the management of allergic conjunctivitis. The chapter on anaphylaxis defines it as a potentially life-threatening clinical syndrome characterized by the sudden onset of generalized, often unanticipated symptoms, affecting multiple organ systems in the body. Clinical features in anaphylaxis are induced by mediators released by IgE-receptor crosslinking on mast cells and basophils previously sensitized by the antigen. The most common clinical conditions which may mimic anaphylaxis/anaphylactoid reactions are shock (hemorrhagic, cardiogenic, septic), vasovagal reaction, carcinoid syndrome, systemic mastocytosis, pheochromocytoma, hereditary angioedema, and nonorganic causes (panic disorder, vocal cord dysfunction, globus hystericus). The chapter on autoimmunity also contains concise and clear questions and answers, and is enriched with tables and illustrations. Very useful tables are found in the chapter on food allergy and food intolerance, which is followed by the chapters on insect allergy and on drug hypersensitivity and allergy. An important question found there refers to distinction between drug allergy and drug hypersensitivity. Drug allergy has such a variety of meanings depending on the context that some

authors have suggested abandoning medical use of the term. In allergy and immunology specialty textbooks, allergy usually means IgE mediated or immediate-type hypersensitivity. In many medical texts and journals, drug allergy may be used interchangeably with drug hypersensitivity. These distinctions are not merely academic but can have consequences for clinical evaluation and management. The questions in the chapter on primary immunodeficiency refer to primary, secondary and combined immunodeficiency. A special chapter is dedicated to immunotherapy, defined as a treatment modality for IgE-mediated allergic disease in which increasing doses of a specific allergen are injected into an allergic patient over time. In the build up phase, injections are typically given once or twice a week, while in the maintenance phase patients receive a stable monthly injection. Maintenance can usually be achieved in 4 to 6 months.

This is one of the rare books that also tackle the issue of complementary and alternative medicine (CAM). According to definition by the US National Center for Complementary Medicine, it is a group of diverse medical and health care systems, practices and products that are not presently considered to be a part of conventional medicine. The last chapter deals with systemic mast-cell diseases. The main clinical features of systemic mastocytosis are described.

The Secret Series is back in the exciting, new Second Editions. We find all the features of The Secret Series: a question and answer format, bulleted lists, mnemonics and useful websites as well as a chapter containing the Top 100 Secrets in Allergy and Immunology and Key Point Boxes. The book is an extraordinary handbook for all those dealing with allergology and clinical immunology.

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