modifies risk of allergic diseases such as asthma, allergic rhinitis, and food allergy, although, notably, the investigators did not find an association between vitamin D levels and eczema. Further study is needed to determine whether correction of vitamin D insufficiency would result in decreased food allergy and increased tolerance among those sensitized.


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Maternal and Newborn Vitamin D Status and Its Impact on Food Allergy Development in the German LINA Cohort Study

PURPOSE OF THE STUDY. To investigate the relationship of maternal and cord blood vitamin D levels on atopic outcomes in early childhood.

STUDY POPULATION. A total of 378 mother-infant pairs from Leipzig, Germany, a subgroup of the LINA (Lifestyle and environmental factors and their Influence on Newborns Allergy risk) cohort study, were included. Mothers with immune or infectious disease concerns during the pregnancy were excluded.

METHODS. Blood samples were collected from expectant mothers at the 34th week of gestation and from infant cord blood at delivery for measurement of vitamin D (25(OH)D3). Regulatory T cells were also quantified from cord blood samples. Total IgE and allergen-specific IgE measurements were determined at birth (cord blood) and at 1 and 2 years of age in participating children. During pregnancy and at the children’s first and second birthdays, parents completed questionnaires regarding family history of atopy, housing and environmental conditions, and atopic outcomes of their children (doctor-diagnosed atopic dermatitis and/or food allergy or parental report of symptoms consistent with atopic dermatitis).

RESULTS. A high correlation was observed between maternal and cord blood 25(OH)D3 levels (R = 0.812, P ≤ .001). Most pregnant women included in the study were either 25(OH)D3 deficient (<20 ng/mL; 44%) or insufficient (20–29.9 ng/mL; 25.7%), and few received vitamin D supplementation during pregnancy. Maternal 25(OH)D3 levels were positively associated with children’s risk of diagnosis of food allergy (adjusted odds ratio [aOR]: 3.66; 95% confidence interval [CI]: 1.36–9.87) in the second year of life or within the 2-year lifetime period (aOR: 1.91; 95% CI: 1.09–3.37), and with sensitization to food allergens (aOR: 1.59; 95% CI: 1.04–2.45) in the second year of life. Cord blood 25(OH)D3 levels were associated with diagnosis of food allergy in the second year of life (aOR: 4.65; 95% CI: 1.50–14.48) and negatively correlated with regulatory T-cell numbers (R = −0.168, P = .031).

CONCLUSIONS. Higher vitamin D levels in pregnancy and at birth were associated with a higher risk of food allergy and lower numbers of regulatory T cells.

REVIEWER COMMENTS. The role of vitamin D in the development of atopic disease remains unclear. Whereas some previous studies have suggested that maternal vitamin D deficiency may increase the risk of developing allergy, and may even be a key reason behind the rapidly rising prevalence of food allergy, this study suggests the complete opposite. Although vitamin D supplementation may be advised for many reasons, the prevention of allergy is not yet one of them.


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Environmental and Demographic Risk Factors for Egg Allergy in a Population-Based Study of Infants

PURPOSE OF THE STUDY. To determine the influence of a variety of environmental and demographic factors on the development of challenge-confirmed egg allergy in infants.

STUDY POPULATION. The study included 5276 infants presenting for their 12-month immunizations in Melbourne, Australia, with a focus on 453 infants with egg allergy confirmed by oral food challenge.

METHODS. At the time of initial testing, parents completed a questionnaire regarding a variety of environmental exposures and demographic factors. Infants underwent skin-prick testing (SPT) to egg regardless of history of reaction. Infants with a positive SPT then underwent additional testing, including allergen-specific immunoglobulin E testing by ImmunoCAP and an oral food challenge to egg. Infants with SPT >2 mm and positive challenge were deemed egg allergic. Multivariable logistic regression was used to determine factors associated with challenge-confirmed egg allergy. Adjustment was made for multiple confounding variables.

RESULTS. Factors that demonstrated a low risk for the development of egg allergy included having older siblings and having a dog in the house. Having siblings <6 years of age and having multiple siblings showed an even
Maternal and Newborn Vitamin D Status and Its Impact on Food Allergy Development in the German LINA Cohort Study

Karen A. Robbins and Robert A. Wood

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