

## EDITORS' CHOICE

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The main themes in this issue of the *PCRJ* are asthma, allergy and rhinitis.

### Food allergy and asthma

In their excellent review on pg 258 Bird and Burks stress that food allergy and asthma commonly co-exist. Patients with both these atopic conditions are at greater risk of a fatal reaction from food allergen exposure. One should strive to obtain good asthma control in these patients, and they should be carefully instructed on allergen avoidance and the proper use of self-injectable adrenaline. The authors summarise the literature on patients with these two conditions, specifically looking at disease prevalence, IgE-mediated effects on the respiratory tract secondary to foods, the interplay of food additives and asthma, and food allergy as a risk factor for asthma morbidity in its own right.

### Guidelines for allergic rhinitis

Bousquet *et al.* review the importance of guidelines for allergic rhinitis on pg 250. Various guidelines have been developed over the years, and primary care physicians should be involved in their development and implementation. In the authors' opinion, guidelines themselves should be evaluated for their accuracy and user-friendliness as well as the way in which they emphasise the applicability of high quality RCTs (which are often based on highly selected patients who may not represent the population as a whole).

### Choosing the correct inhaler for patients: a key issue for asthma control

Chrystyn and Price, in their review on pg 243, highlight the importance of inhalation technique and ease of use of inhalers, as well as the advantages and disadvantages of MDIs and DPIs. They also discuss the recent formulation of beclometasone CFC-free MDIs, which should be prescribed by brand name rather than generically. In their accompanying editorial on pg 241, Lavorini *et al.* emphasise the role of trained nurses and pharmacists in selecting an appropriate device for patients, as well as the need to update healthcare professionals' skills, knowledge and competence on inhaler devices regularly.

### Original research

- Stallberg *et al.* report the findings of two patient questionnaire surveys on asthma control conducted four years apart in Sweden (pg 279); many patients used inhaled steroids (ICS) erratically, and the use prescription of combination ICS/LABA inhalers increased from 34.2% to 48.2%.
- Schafheutle analyses the impact of prescription charges on patients with asthma (pg 266); affordability, views on paying prescription charges, and patient perceptions of asthma medication, were all influential factors.
- Shipman *et al.* (pg 273) present a qualitative study on the use of general practice services by people with COPD; use was influenced by perceptions of ease of access, the quality of the patient's relationship with their GP, and perceived disease severity and threat.
- Finally, Clatworthy *et al.* report on pg 300 the value of self-report measures of ICS adherence, degree of rhinitis and smoking status, and their association with asthma control.

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