

# I NTERNATIONAL S TUDY OF A STHMA AND A LLERGIES IN C HILDHOOD

## NEWSLETTER – NOVEMBER 2007

Dear ISAAC Colleagues and friends,

Warmest greetings to you all again from the IIDC.

It has been quite a year – although the year has passed quickly, so much has happened.

We are excited and relieved to have obtained funding from the BUPA Foundation for financial support for the IIDC for 3 years. This is splendid news, enabling continuation of the outstanding work done by Philippa Ellwood and Tadd Clayton.

The annual ERS/ISAAC Collaborators social gathering, this year, was hosted by our Regional Coordinator for Northern and Eastern Europe, Professor Bengt Björkstén, at his home in Stockholm. We thank Bengt and his wife Karin for hosting such a wonderful occasion, with many ISAAC colleagues attending. We bring you a report from Gary Wong on this occasion and share some photos with you.

The eighteenth annual Steering Committee meeting was held in Münster, Germany, hosted by our Regional Coordinator for Western Europe, Ulrich Keil. We wish to congratulate Ulrich on his organisation of an excellent and productive meeting. We had a wonderful meeting with many developments, one of which is to find out the level of support there is for ISAAC to run further prevalence studies. You will find a more detailed report of the Münster meeting and an expression of interest (EOI) form in the Newsletter. This EOI form will be sent as an additional word document for your convenience. We have also included some photos from Münster.

We congratulate several of our colleagues for special achievements. Please, if you know of other special achievements among our ISAAC collaborators, we would love to hear from you. The ISAAC Newsletter is an excellent way of sharing information among the ISAAC 'family'.

Professor Bengt Björkstén has decided to retire from the ISAAC Executive Committee. He has made an outstanding contribution in this role, however we are fortunate to have him remain as a Steering Committee member and Regional Coordinator for Northern and Eastern Europe. We warmly welcome Professor Luis García-Marcos (Spain) to the membership of the ISAAC Executive and also to Professor Gary Wong (Hong Kong) and Dr Gudrun Weinmayr (Ulm, Germany) onto the ISAAC Steering Committee.

One of the ways in which the ISAAC collaboration thrives is through sharing publications. We would appreciate it if you would check the ISAAC website list of publications and let us know of any we have omitted from any of the sections.

On behalf of the ISAAC Steering Committee and the ISAAC International Data Centre I wish you well.

Warm wishes

*Innes Asher*

Professor Innes Asher ONZM

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## Highlights from the ISAAC Steering Committee Meeting, September 12-13, Münster, Germany

This meeting was attended by Nadia Aït-Khaled, Ross Anderson, Innes Asher, Bert Brunekreef, Bengt Björkstén, Tadd Clayton, Julian Crane, Philippa Ellwood, Luis García-Marcos, Ulrich Keil, Chris Lai, Javier Mallol, Ed Mitchell, Joseph Odhiambo, Neil Pearce, Colin Robertson, Alistair Stewart, David Strachan, Erika von Mutius, Gudrun Weinmayr, Hywel Williams, and Gary Wong.

The meeting began with a further tribute to Stephan Weiland from Ulrich Keil. Ulrich read from the obituary he wrote, just published in *Epidemiology*, September 2007, Volume 18, Number 5, p652:

*“Stephan Weiland died suddenly on 19 March 2007 after a full day's work at his institute in Ulm and an evening swim. Stephan was a well-trained sportsman – he was a marathon runner, a mountain climber, and a dedicated cyclist. At the time of his death he was preparing for a triathlon.*

*Stephan was born in Münster on 25 December 1958. He studied medicine at the University of Cologne from 1978 to 1985, followed by 2 years of surgery training at the University Hospital of Cologne. From 1987 to 1989 he studied at McGill University in Montreal, where he completed an MSc degree in epidemiology.*

*He joined the Department of Social Medicine and Epidemiology at Ruhr-University Bochum in 1990. In 1993 he accepted a position at the University of Münster, and in 2002 he moved to the University of Ulm where he was appointed Professor and Chair of the Department of Epidemiology.*

*Stephan started his career in the field of occupational epidemiology. He created a large historical cohort study and a surveillance project in the German rubber industry, which over the years produced a number of landmark papers. Early in his career, he also became interested in the epidemiology of asthma and allergies. Together with colleagues in England, New Zealand, and Germany, he started the International Study of Asthma and Allergies in Childhood—the well-known ISAAC Project. Throughout his career, Stephan was particularly dedicated to this project, and became one of the most important members of the ISAAC family. The international community will perhaps remember him best for his contributions to this worldwide endeavour. He had a sincere interest in science, and was always a pleasant and stimulating person to work with.*

*Stephan Weiland viewed epidemiology as a contributor to clinical medicine and as a basic science of public health. One of his last papers is titled “Increasing life expectancy in Germany.” His paper begins by reporting the impressive increases of life expectancy during the last decades. It goes on to note that, despite this progress, nearly 20% of men and 10% of women die before reaching the age of 65. It is heart-breaking to realize that Stephan belongs to this group. He was beloved by his friends and colleagues, and will be sorely missed.”*

## ISAAC Phase Two

David Strachan

Following the untimely death of Stephan Weiland in March 2007, the work of the ISAAC Phase Two Data Centre (I2DC) is continuing at Ulm University with support from an expanded Phase Two Steering Group.

The Data Centre moved with Stephan from Münster to Ulm in 2002, and was initially supported by a European Union Framework Programme 5 grant on which Stephan was the co-ordinator. Since the completion of the FP5 funding in early 2004, the group have been supported by funds from Ulm University as part of the Institute of Epidemiology, of which Stephan was the Director.

The Phase Two Data Centre currently comprises 1 full time data analyst (Andrea Kleiner) and 4 part time epidemiologists (Gise Büchele, Jon Genuneit, Gabriele Nagel, Gudrun Weinmayr) who have been engaged with data interpretation and writing up specific aspects of the study, alongside other research and teaching duties in the Institute. Gudrun has been the main point of contact for the Phase Two centres since 2002.

A major part of the FP5 work programme was to assemble and clean datasets from the European Phase Two centres. This was expanded to include all the non-European centres also, so there is now a single, cleaned and coded dataset of all modules, except for disease management modules, on which work will commence shortly.

The Phase Two dataset now includes the following data from 30 study centres worldwide:

- Over 50,000 questionnaires with symptoms and risk factor information
- Over 30,000 results from skin examination and allergen skin prick test results
- Almost 9,000 results from hypertonic saline bronchial challenge and serum IgE tests.

DNA samples (from over 4,000 children) are part of an ongoing programme of genetic epidemiology, initially as part of the EU FP5 programme but continuing as part of the EU FP6 GABRIEL collaboration, led by Bill Cookson and Erika von Mutius. Measurements of endotoxin and allergen levels in dust collected from the homes of over 800 children have been completed in Bert Brunekreef's laboratory.

Three papers describing the relationship of atopy to symptoms of asthma, rhinitis and eczema, respectively, have been submitted for publication in the last year. The first of these, atopy and asthma symptoms is now published (Weinmayr G, Weiland SK, Björkstén B, Brunekreef B, Büchele G, Cookson WO, Garcia-Marcos L, Gotua M, Gratziau C, van Hage M, von Mutius E, Riiikjäv M-A, Rzehak P, Stein RT, Strachan DP, Tsanakas J, Wickens K, Wong GW, and the ISAAC Phase Two Study Group. Atopic sensitization and the international variation of asthma symptom prevalence in children. *Am J Respir Crit Care Med* 2007; 176: 565-74) and the second, relating atopy to eczema, is in press with the *Journal of Allergy and Clinical Immunology*. Papers relating to BHR, endotoxin levels and the relationship of breast feeding to asthma symptoms are well advanced.

The Phase Two Steering Group has been reconfigured following Stephan's death. David Strachan has been appointed as Phase Two Co-ordinator, with Gudrun Weinmayr representing the Ulm Data Centre. Bengt Björkstén has stepped down and been replaced by Carsten Flohr, a dermatologist who works closely with Hywel Williams. Francesco Forastiere, formerly a member of the Phase Two Publications Group, has now joined the Steering Group. Bert Brunekreef, Bill Cookson and Erika von Mutius continue as members of the Steering Group.

### **ISAAC Phase Three**

Four papers of the worldwide analyses of time trends in prevalence have been published or are in press (see publication list at end of newsletter).

Drafts of three papers, are in progress, of the updated and expanded worldwide prevalence of asthma, rhinitis and eczema, with data from more than 380,000 children in 44 centres in 61 countries in the 6-7 year age group, and from more than 750,000 children in 233 centres in 97 countries in the 13-14 year age group. We expect submission of these papers in the first part of 2008.

There are several papers planned analysing the data from the environmental questionnaires (EQ). As for all the worldwide papers, a lot of work goes into preparing the data in a standardised way, and conducting analyses which are the most accurate and informative. This process is well on its way, and drafting of the first papers has begun. We expect submission of these papers over the next 1-2 years. There may be from time to time questions from the IIDC relating to some aspects of data collection for some EQ questions. For example the writing group for the weight, BMI, exercise paper are discussing the method of how the weight and height of the participants was obtained and may wish to contact centres for this information. Only the Principal Investigators of the centres involved will be contacted directly by the IIDC.

### **Other developments**

**ISAAC Phase Four** is a range of activities for the ISAAC collaboration, focused on education and resources. The underpinning of these activities will be a redevelopment of the ISAAC website which will begin in 2008. This will be modelled on the successful features of the UK NHS website ([www.nhs.uk](http://www.nhs.uk)). We will focus on simple tools and resources which are usable in a wide range of settings. Development of the website requires funding of an information technologist, and we seek funding for this.

Through this we intend to make ISAAC publications and other materials more widely accessible to the ISAAC collaboration. Also summaries of ISAAC research, and what we have learned will be presented. We wish to ask you to consider whether ISAAC should develop simple management recommendations useful for developing countries, combined with models for evaluation of their effectiveness. Existing management recommendations will be reviewed and a consultation process will take place.

We value your opinion on these developments. Please send comments to Philippa at the IIDC ([p.ellwood@auckland.ac.nz](mailto:p.ellwood@auckland.ac.nz)).

### **Phase Five?**

Many centres have contacted us to enquire about whether there will be an ISAAC Phase Five – a repeat of Phase Three.

The purpose of such a study would be to monitor trends and determinants of asthma, rhinitis and eczema. Phase Five would obtain the first time trend data for Phase Three B centres, and additional time trend data for Phase Three A centres. Phase Five would also allow the examination of time trends for the risk factors in the Phase Three EQ.

The Steering Committee has made no commitment to Phase Five, at this stage and has no funds to support it, but is interested in principle in conducting Phase Five if there is sufficient interest and there is funding available. To make an informed decision on the matter we would like you to complete the enclosed Expression of Interest form on the next page.

## ISAAC Phase Five - Expression of Interest November 2007

The ISAAC Steering Committee wish to know whether there is sufficient worldwide interest in undertaking a further Phase of ISAAC (Phase Five). There is no funding available for Phase Five at this stage and we would have to raise new funds for the coordination. Phase Five would not be undertaken until 2010-2012. If it is conducted, then it will involve the same compulsory and optional questionnaires that were used in Phase three, but there is a possibility that further questions or modules could be added. Apart from the possible additions to the questionnaires, the methodology would follow that of Phases One and Three and centres would be expected to arrange their own funding and ethical approval.

We would appreciate it very much if you could please complete and return this form to the **ISAAC International Data Centre (IIDC): Fax: +64 9 373 7602**

or Email to: [p.ellwood@auckland.ac.nz](mailto:p.ellwood@auckland.ac.nz)

|                                                                                                |                                     |                             |                                     |
|------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------|-------------------------------------|
| My centre is interested in taking part in a further ISAAC Phase Five symptoms prevalence study | <b>Yes</b> <input type="checkbox"/> | No <input type="checkbox"/> | Don't know <input type="checkbox"/> |
| My centre took part in ISAAC Phase One                                                         | <b>Yes</b> <input type="checkbox"/> | No <input type="checkbox"/> | Don't know <input type="checkbox"/> |
| My centre took part in ISAAC Phase Two                                                         | <b>Yes</b> <input type="checkbox"/> | No <input type="checkbox"/> | Don't know <input type="checkbox"/> |
| My centre took part in ISAAC Phase Three                                                       | <b>Yes</b> <input type="checkbox"/> | No <input type="checkbox"/> | Don't know <input type="checkbox"/> |

|                                             |  |
|---------------------------------------------|--|
| Centre name:                                |  |
| Country:                                    |  |
| Principal Investigator:<br>(one per centre) |  |
| Phone:                                      |  |
| Fax:                                        |  |
| Email:                                      |  |
| Postal Address:                             |  |
| COMMENTS                                    |  |

Date: \_\_\_\_\_

Name of person completing this form. \_\_\_\_\_

# Congratulations to:

**ELF award 2007 Professor Bert Brunekreef - ELF Award winner 2007 – Member of the ISAAC Steering Committee. A citation from the ERS**



The 2007 European Lung Foundation Award was presented to Professor Bert Brunekreef, who has devoted much of his working life to the study of [air pollution](#) and its effects on our health.

Professor Brunekreef received his award on September 15, 2007 during the opening ceremony of the European Respiratory Society Congress, which was held in Stockholm, Sweden.

Working in first Wageningen and now Utrecht, in The Netherlands, Professor Brunekreef has helped to author more than 300 peer-reviewed scientific articles, as well as organising conferences, giving lectures and advising organisations such as the World Health Organization, among many other activities.

In the 1980s, Professor Brunekreef carried out an important study on the effects of fine [particulate matter](#) (PM10) pollution, which helped to create the first 24-hour air quality standard for this type of pollution. This led to many further studies into fine particulate pollution and to recent European laws on the subject.

Professor Brunekreef has also studied the effect of damp homes on children as they are growing up. He found that children in damp homes in the USA were more at risk from [asthma](#) than other children. His work on traffic pollution, which looked at the effects on children living near busy roads, has been very influential in encouraging more research and attempts to reduce children's exposure to pollution.

As one of the world's top air pollution experts, Professor Brunekreef was asked in 2002 to write a review of the effects of air pollution for the journal *The Lancet*. This has become one of the most widely read articles on the subject. (Register your details on [The Lancet's website](#) and read the article.)

As well as carrying out his own scientific work, Professor Brunekreef has helped to nurture the next generation of pollution scientists. So far in his career, he has supervised 27 young scientists through their doctoral degrees, and he has worked with many scientific journals to publish other scientists' research.

His work on investigating the effects of pollution and helping to make sure that this knowledge is used to change the law have made Professor Brunekreef a worthy winner of the European Lung Foundation Award.

# Congratulations to:

## Massey University Research Medals 2007

### ***Individual award. Professor Neil Pearce - ISAAC Steering Committee and Executive Committee member - citation***

**Professor Neil Pearce** founded the Centre for Public Health Research in Wellington, when he joined Massey University in 2000, with the centre awarded the Massey Research Award for a team last year.



Professor Pearce has made significant discoveries relating to public health not only in New Zealand but also worldwide; his contribution spanning several decades. During the 1980s Professor Pearce showed there were strong socio-economic differences in mortality in New Zealand, leading to a number of confirmatory studies and incorporation of this knowledge into health policy. Also in the 1980s research led by Professor Pearce found that the high mortality rates for Māori were not due solely to socio-economic factors but were also due to problems of access to health care. In 1988 Professor Pearce showed that meat workers have an increased risk of some types of cancer, work which has been confirmed overseas igniting interest in the likely aetiological mechanisms.

In 1990 and in 1995 Professor Pearce studied the role of Fenoterol in the New Zealand asthma mortality epidemic of the 1970s and 1980s, with the Government ultimately acknowledging the role of Fenoterol in many deaths and restricting its availability.

Asthma has been an area of sustained research, and Professor Pearce was one of the founders of the international Study of Asthma and Allergies in Childhood, involving more than two million children in 250 centres in 100 countries. He also published a series of reviews and commentaries that have questioned the importance of allergic mechanisms for asthma, stimulating interest in non-allergic mechanisms.

In 1998 Professor Pearce was awarded a Silver Medal from the Royal Society of New Zealand, and in 2005 he was elected a Fellow. He is serving as president-elect of the International Epidemiological Association from 2005 and will serve as president from next year until 2011.

Professor Pearce's first degree was a BSc in mathematics, followed by a DipSci mathematics and later a PhD in epidemiology, all at the University of Otago. A DipORS was completed at Victoria University in 1978 and in 2003 Professor Pearce completed a DSc in epidemiology at Massey. Prior to joining Massey, Professor Pearce was professor and director of the asthma research group at the Wellington School of Medicine. He is an honorary research fellow at the Ministry of Health's Public Health Intelligence Unit.

Professor Pearce was successful this year in applying for a Massey University technician's award for the project Balancing Innate Immunity in Asthma. The funding for a full-time technician will allow establishment of a research programme into the immunological mechanisms of asthma, which will be developed in collaboration with the Malaghan Institute of Medical Research.

Professor Pearce also receives a University Technicians Award and a College of Sciences individual award.

# Congratulations to:

**Professor Ulrich Keil**, ISAAC Steering Committee member and Regional Coordinator for Western Europe. On the 1<sup>st</sup> of March 2007 Ulrich received the Frederick H. Epstein Memorial Lecture Award from the American Heart Association at their 47th Annual Conference on Cardiovascular Disease Epidemiology and Prevention in Orlando, Florida. The Frederick H. Epstein Memorial Lecture Award has been awarded since 1998. Ulrich is the first German who has received this rather prestigious award. The award is given for one's professional life achievements.



Philippa Ellwood with Innes Asher after receiving her MPH (first class honours) in May 2007



**STOP PRESS!** PLEASE REMEMBER THE IIDC VALUES YOUR CONTRIBUTIONS TO THIS NEWSLETTER AND WE WELCOME ITEMS THAT WILL BE OF INTEREST TO THE ISAAC 'FAMILY'. We plan the next newsletter to be issued in MARCH/APRIL 2008 Please send contributions to Philippa at the IIDC [p.ellwood@auckland.ac.nz](mailto:p.ellwood@auckland.ac.nz)



THE Eighteenth ISAAC International Workshop, Münster, Germany 12<sup>th</sup> and 13<sup>th</sup> September 2007



And a wonderful reception by the Mayor of Münster, Karin Rei Smann, seen here with Innes Asher (ISAAC Chair) and our ISAAC Steering Committee meeting host, Ulrich Keil.



We found ISAAC in the Peace Hall in Münster!



### **THE ISAAC Social Gathering**

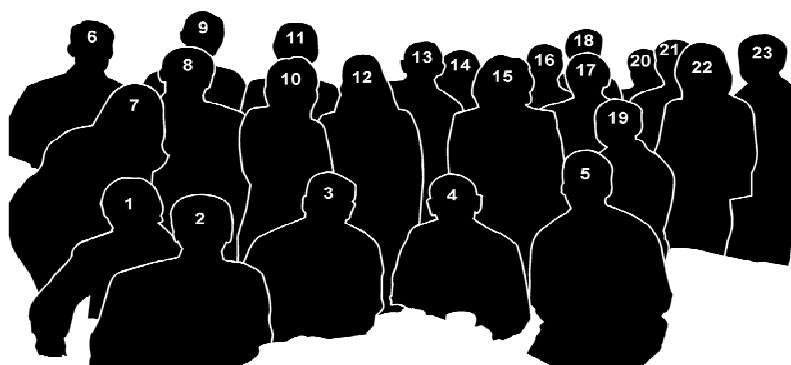
held in conjunction with the European Respiratory Society (ERS) meeting in Stockholm Sweden 17 September 2007. Report from Gary Wong (Front row, 2<sup>nd</sup> from left in the picture below).

Place: Professor Bengt Bengt Björkstén's house

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It was one of the biggest ISAAC gathering in recent years when we gathered at Prof Bengt Björkstén's house in Stockholm, Sweden on Monday 17th September. There were 29 attendees from 28 countries including 7 members from the ISAAC Steering committee. Professor Innes Asher gave her opening remarks with a review of the great progress of what ISAAC has achieved in the past year. Sadly, Professor Stephen Weiland's death was not only a tremendous set-back especially for the ongoing analyses of ISAAC Phase Two but we have all missed him so dearly. We will continue to work diligently with the support of all members of the ISAAC family. In addition to the exchanges of ideas of the work among different countries, members also had a chance to learn about Bengt's collection of art work from around the world. There were clocks from the 18<sup>th</sup> century and photographs of Bengt's great grandparents on the walls of his home. At the end, many of us were so happy that we can put a face to those names that we read in the recent ISAAC publication in The Lancet. See you next year in Berlin.

Photos taken at Bengt's house of the ISAAC/ERS Collaborators function



Participants at the ISAAC collaborators function Stockholm, Sweden, 17 September 2007

- |                                                                 |                                  |                                       |
|-----------------------------------------------------------------|----------------------------------|---------------------------------------|
| 1. Donna Rennie (Canada)                                        | 2. Gary Wong (Hong Kong)         | 3. Luis Garcia-Marcos (Spain)         |
| 4. Renato Stein (Brazil)                                        | 5. Marcus Jones (Brazil)         | 6. Josh Lawson (Canada)               |
| 7. Heather Zar (South Africa)                                   | 8. Akylbek Sydykov (Kyrgyzstan)  | 9. Virendra Singh (India)             |
| 10. Gulmira Najimidinova (Kyrgyzstan)                           | 11. Innes Asher (New Zealand)    | 12. Hongyu Wang (China)               |
| 13. Mohammed Sabir (India)                                      | 14. Diana Dumitraşcu (Romania)   | 15. Margarita Figueroa (El Salvador)  |
| 16. Manuel Soto Quiros (Costa Rica)                             | 17. José Rosado Pinto (Portugal) | 18. Bert Brunekreef (The Netherlands) |
| 19. Maia Gotua (Georgia)                                        | 20. Julian Crane (New Zealand)   | 21. Bengt Björkstén (Sweden)          |
| 22. Emilija Vlaski (Macedonia, the Former Yugoslav Republic of) |                                  | 23. Zoltan Novak (Hungary)            |

Innes thanking Bengt on behalf of the ISAAC collaborators



**REPORT FROM ROMANIA – Tadd Clayton speaking at the GA<sup>2</sup>LEN/EAACI Allergy School, 5-10 September 2007, University of Medicine and Pharmacy “Iuliu Hatieganu”, Cluj Napoca, Romania.**

I was very honoured to be asked to represent ISAAC at the GA<sup>2</sup>LEN/EAACI Allergy School (<http://alergologiecluj.ro/index.php>) which was held in the beautiful city of Cluj Napoca in the North of Romania. The Allergy School was organised by Dr Diana Dumitraşcu who is the President of Romanian Society of Allergology and Clinical Immunology and is also our ISAAC investigator in Cluj Napoca.

The program for the Allergy School was very interesting and included many excellent Romanian and international speakers who addressed a wide variety of topics including the epidemiology of rhinitis, the pathophysiology and genetic basis of asthma and clinical management of severe disease. Among the distinguished international speakers were Torsten Zuberbier (Germany), Sergio Romagnani (Italy), Peter Howarth (England), Martien Kapsenberg (Netherlands), Jean Baptiste Watelet (Belgium), Martin Church (England), Ömer Kalayci (Turkey) and Ralph Mosges (Germany).

The scientific program was complemented by a very enjoyable social program which included dinner at a traditional Romanian restaurant accompanied by a performance of traditional Romanian song and dance by a youth group. A further highlight was a visit to the beautiful historic city of Sibiu.

I would like to congratulate Dr Dumitraşcu and her colleagues for their efforts in organising a wonderful Allergy School. As an inexperienced visiting speaker from the far side of the world, I was made to feel very welcome and made many new friends.

Tadd Clayton  
IIDC Data Manager



Poem from the book titled “**Sing Song**”

Author Anne Kennedy, New Zealand.

**Red Shoes**

No trouble, on the phone from Tauranga  
while the girl tries on her new red shoes.  
She can't do the buckles because she can't  
leave off scratching long enough to get

the first thread through. She gives up  
tears instead at the red tongues, her arms.  
The homeopath on the phone will talk  
till the cows come home. It appears

over the phone that the homeopathic  
treatment triggered thin-skinness in  
the girl. Her body became sensitive as  
a soft lion and the skin snivelling over

an increasing number of things. Do this:  
organic food, at least for a while. Buy  
a breadmaker or drive across Grey Lynn  
and spend four dollars on bread that breaks under

your hands, anti-inflammatory flax-seed  
oil, advises the good homeopath, but  
very few baths – baths are only good for  
throwing over a brown sugar witch

watching her sweet screams dissolve.  
The Witch of the East, Tauranga, says  
the child should never never *never*  
touch homeopathy with a bargepole

again. That much is clear. And because  
we don't know why these things happen  
why this happened, see a clairvoyant  
but first do up the red shoes for the girl.

Comment from Professor Hywel Williams  
ISAAC Steering Committee  
Centre for Evidence Based Dermatology  
Queen's Medical Centre, University  
Hospital, Nottingham UK.

"I liked this poem as it captures the frustration of conflicting and complicated advice for a child with atopic eczema. The child cannot even complete a task as simple as doing up the buckles on her shoes because of intractable scratching. So many suggestions of what to do - some may be good, some may be a load of nonsense - where does the mother turn to for clear, simple, honest and effective advice?"

Published 2003 Auckland University Press

<http://www.nzbookcouncil.org.nz/writers/kennedyanne.htm>  
<http://www2.auckland.ac.nz/aup/books/kennedy-singsong.html>

## Letter to ISAAC colleagues regarding ISAAC Publications

Dear ISAAC friends,

Since hearing of the ISAAC unparalleled project in 1993, and Stephan Weiland and Neil Pearce came to Madrid for a meeting, I have been more and more involved in it: firstly –and for many years- as National Coordinator for Spain, and more recently as a member of the Steering Group and of the Executive Committee. Just like many of you, I have experienced problems and headaches during data collection and cleaning –always soothed by gentle and encouraging mails from Philippa and Tadd-, but also during data managing and paper writing and submitting, sometimes to see how in the end the paper was rejected.

As time passes by, young colleagues turn to me and ask me to get more heavily involved in different projects. I am sure this has happened to you: don't worry it is just that –like me- you are growing older... Anyway, I have recently been appointed editor-in-chief of a journal called “Allergologia et Immunopathologia” [short name Allergol Immunopathol (Madr)], which is currently the official journal of the Spanish Paediatric Allergy Association. This journal was founded in 1973 and has been included in Medline since 1974. For the last two years all papers have been published in English and Thomson-ISI is currently surveying it in order to give it an impact factor. The process will take 2 years; so by 2010 the journal will have the impact factor corresponding to 2008.

As a general allergy journal, Allergologia et Immunopathologia includes asthma and allergies epidemiology among its interests, so I will welcome good quality papers from ISAAC centres all over the world. Although those papers will undergo the usual peer review process, they will be treated with special consideration. During the next months, the online submitting system will be improved to be entirely in English. Thus, while this process is not completed, anyone interested in sending papers can do so as an attachment to my email address ([lgmarcos@um.es](mailto:lgmarcos@um.es)) after careful reading of the journal's instructions for authors at:

[http://db.doyma.es/cgi-bin/wdbcgi.exe/doyma/mrevista\\_info.normas?pident\\_revista=105](http://db.doyma.es/cgi-bin/wdbcgi.exe/doyma/mrevista_info.normas?pident_revista=105)

(clicking on “visualizar documento”). Please ignore any other way of submission included in those instructions.

I hope this is an opportunity to have more ISAAC papers published and their information therein better spread.

Luis Garcia-Marcos  
Professor of Paediatrics. University of Murcia  
ISAAC Executive Committee

## ISAAC Phase One Publications

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### 1.0 Preliminary Papers

- 1.1 ISAAC Phase One Manual. 2<sup>nd</sup> ed. Auckland and Münster: ISAAC Steering Committee, 1993.
- 1.2 Pearce NE, Weiland S, Keil U, Langridge P, Anderson HR, Strachan D, Bauman A, Young L, Gluyas P, Ruffin D, Crane J, Beasley R. Self-reported prevalence of asthma symptoms in children in Australia, England, Germany and New Zealand: an international comparison using the ISAAC written and video questionnaires. *Eur Resp J* 1993; 6: 1455-61. [227 citations to September 2007]
- 1.3 Asher MI, Keil U, Anderson HR, Beasley R, Crane J, Martinez F, Mitchell EA, Pearce N, Sibbald B, Stewart AW, Strachan D, Weiland SK, Williams HC. International study of asthma and allergies in childhood (ISAAC): rationale and methods. *Eur Resp J* 1995; 8: 483-91. [680 citations to September 2007]

### 2.0 Main Findings

- 2.1 Strachan D, Sibbald B, Weiland S, Aït-Khaled N, Anabwani G, Anderson HR, Asher MI, Beasley R, Björkstén B, Burr M, Clayton T, Crane J, Ellwood P, Keil U, Lai C, Mallol J, Martinez F, Mitchell E, Montefort S, Pearce N, Robertson C, Shah J, Stewart A, Von Mutius E, Williams H. Worldwide variations in prevalence of symptoms of allergic rhinoconjunctivitis in children: The International Study of Asthma and Allergies in Childhood (ISAAC). *Paediatric Allergy Immunology* 1997; 8: 161-76. [170 citations to September 2007]
- 2.2 ISAAC Steering Committee (Writing Committee: Beasley R, Keil U, Von Mutius E, Pearce N). Worldwide variation in prevalence of symptoms of asthma, allergic rhinoconjunctivitis and atopic eczema: ISAAC. *Lancet* 1998; 351: 1225-32. [1218 citations to September 2007]
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### 3.0 Other Overview Papers

- 3.1 Asher MI, Weiland SK, on behalf of the ISAAC Steering Committee. The International Study of Asthma and Allergies in Childhood. *Clin Exper Allergy* 1998; 28 (suppl 5): 52-66. [70 citations to September 2007]
- 3.2 Beasley R, Ellwood P, Asher I. International patterns of the prevalence of pediatric asthma the ISAAC program. *Pediatric Clinics of North America* 2003; 50(3):539-53. [16 citations to September 2007]
- 3.3 Lai C, Pearce N. The contribution of ISAAC to the understanding of asthma. *Leukotriene Res & Clin Rev* 2001; 2: 1-4.
- 3.4 Mallol J, Asher MI, Williams H, Clayton T, Beasley R. ISAAC Findings in children aged 14 years: an overview. *Allergy Clin Immunol Int* 1999; 11: 176-82.
- 3.5 von Mutius E. Epidemiology of asthma: ISAAC—International Study of Asthma and Allergies in Childhood. *Pediatr Allergy Immunol* 1996; 7(9 Suppl): 54-6.

### 4.0 Ecologic Analyses

- 4.1 Anderson R, Beasley R, David Strachan, Colin Robertson C, and the ISAAC Phase I Study Group. Mortality and hospitalisation rates. In preparation.
- 4.2 Anderson HR, Poloniecki JD, Strachan DP, Beasley R, Björkstén B, Asher MI. ISAAC Phase I Study Group. Immunization and symptoms of atopic disease in children: results from the

International Study of Asthma and Allergies in Childhood. *Am J Publ Health* 2001; 91: 1126-9. [48 citations to September 2007]

- 4.3 Anderson HR and the ISAAC Phase I Study Group. Air pollution and asthma prevalence. In preparation.
- 4.4 Asher I, et al. Overview of findings of ISAAC Phase I ecologic analyses. In preparation.
- 4.5 Burr ML, Emberlin JC, Treu R, Cheng S, Pearce N, and the ISAAC Phase I Study Group. Pollen counts in relation to the prevalence of rhinitis and asthma in the International Study of Asthma and Allergies in Childhood (ISAAC). *Clin Exper Allergy* 2003; 33: 1675-80. [14 citations to September 2007]
- 4.6 Ellwood P, Asher MI, Björkstén B, Burr M, Pearce N, Robertson CF and the ISAAC Phase One Study Group. Diet and asthma, allergic rhinoconjunctivitis and atopic eczema symptom prevalence: an ecological analysis of the International Study of Asthma and Allergies in Childhood (ISAAC) data. *Eur Respir J* 2001; 17: 436-43. [48 citations to September 2007]
- 4.7 Foliaki S, Björkstén B, Kildegaard-Nielsen S, von Mutius E, Cheng S, Pearce N. Antibiotic sales and the prevalence of symptoms of asthma, rhinitis and eczema in 13-14 year old children: The International Study of Asthma and Allergies in Childhood (ISAAC). *Int J Epidemiol* 2004; 33: 558-63. [14 citations to September 2007]
- 4.8 Mitchell EA, Stewart AW, on behalf of the ISAAC Phase One Study Group. The ecological relationship of tobacco smoking to the prevalence of symptoms of asthma and other atopic diseases in children: The International Study of Asthma and Allergies in Childhood (ISAAC). *Eur J Epidemiol* 2001; 17: 667-73. [9 citations to September 2007]
- 4.9 Shirtcliffe P, Weatherall M, Beasley R, on behalf of the ISAAC Phase I Study Group. An inverse correlation between estimated tuberculosis notification rates and asthma symptoms. *Respirology* 2002; 7: 153-5. [13 citations to September 2007]
- 4.10 Stewart AW, Mitchell EA, Pearce N, Strachan DP, Weiland SK, on behalf of the ISAAC Steering Committee. The relationship of per capita gross national product to the prevalence of symptoms of asthma and other atopic diseases in children (ISAAC). *Int J Epidemiol* 2001; 30: 173-9. [37 citations to September 2007]
- 4.11 von Mutius E, Pearce N, Beasley R, Cheng S, von Ehrenstein O, Björkstén B, Weiland S, on behalf of the ISAAC Steering Committee. International patterns of tuberculosis and the prevalence of symptoms of asthma, rhinitis and eczema. *Thorax* 2000; 55(6): 449-453. [86 citations to September 2007]
- 4.12 Weiland SK, von Mutius E, Hüsing A, Asher MI on behalf of the ISAAC Steering Committee. Intake of trans fatty acids and prevalence of childhood asthma and allergies in Europe. *Lancet* 1999; 353: 2040-41. [59 citations to September 2007]
- 4.13 Weiland S, Hüsing A, Strachan DP, Pearce N, on behalf of the ISAAC Study Group and ISAAC Europe. Climate and the prevalence of symptoms of asthma, allergic rhinoconjunctivitis and atopic eczema in children. *Occup Environ Med* 2004; 61: 609-15. [17 citations to September 2007]

#### **Other Papers**

- 5.1 Anderson R, Robertson C, Montefort S. World-wide variations in asthma in children: association with severity, evidence of other atopic diagnosis and sex ratio. In preparation.
- 5.2 Crane J, Mallol J, Beasley R, Stewart A, Asher MI, on behalf of the International Study of Asthma and Allergies in Childhood (ISAAC) Phase I study group. Agreement between written and video questions for comparing asthma symptoms in ISAAC. *Eur Respir J* 2003; 21: 455-61. [21 citations to September 2007]
- 5.3 Pearce N, Sunyer J, Cheng S, Chinn S, Björkstén B, Burr M, Keil U, Anderson HR, Burney P, on behalf of the ISAAC Steering Committee and the European Community Respiratory Health Survey. Comparison on asthma prevalence in the ISAAC and the ECRHS. *Eur Resp J* 2000; 16: 420-6. [43 citations to September 2007]
- 5.4 Stewart AW, Mitchell EA. Month of birth and childhood atopic diseases: the International Study of Asthma and Allergies in Childhood (ISAAC). In preparation.



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## ISAAC Phase Two Publications

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### 1.0 Preliminary Papers

- 1.1 Weiland SK, Björkstén B, Brunekreef B, Cookson WOC, von Mutius E, Strachan DP, and the ISAAC Phase II Study Group. Phase II of the International Study of Asthma and Allergies in Childhood (ISAAC II): rationale and methods. *Eur Respir J* 2004; 24: 406-412. [36 citations to September 2007]

### 2.0 Main Findings

- 2.1 Wienmayr G, Weiland SK, Björkstén B, Brunekreef B, Büchele G, Cookson WO, Garcia-Marcos L, Gotua M, Gratziou C, van Hage M, von Mutius E, Riikjärv M-A, Rzehak P, Stein RT, Strachan DP, Tsanakas J, Wickens K, Wong GW, and the ISAAC Phase Two Study Group. Atopic sensitization and the international variation of asthma symptom prevalence in children. *Am J Respir Crit Care Med* 2007; 176: 565-74.
- 2.2 Flohr C, Weiland SK, Weinmayr G, Björkstén B, Bråbäck L, Brunekreef B, Büchele G, Clausen M, Cookson WOC, von Mutius E, Strachan DP, Williams HC and the ISAAC Phase Two Study Group. The role of atopic sensitization in flexural eczema: Findings from the International Study of Asthma and Allergies in Childhood (ISAAC) and the ISAAC Phase Two Study Group. *Journal Allergy and Clinical Immunology* 2007 DOI information: 10.1016/j.jaci.2007.08.066

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## ISAAC Phase Three Publications

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### 1.0 Preliminary Papers

- 1.1 Ellwood P, Asher MI, Beasley R, Clayton TO, Stewart AW and the ISAAC Steering Committee. International Study of Asthma and Allergies in Childhood (ISAAC II): Phase III rationale and methods. *Int J Tuberculosis Lung Dis* 2005; 9: 10-6. [17 citations to September 2007]

### 2.0 Main Findings

- 2.1 Asher MI, Montefort S, Björkstén B, Lai CKW, Strachan D, Weiland SK, Williams H, and the ISAAC Phase Three Study Group. Worldwide trends in the prevalence of symptoms of asthma, allergic rhinoconjunctivitis and eczema in childhood – ISAAC Phase Three. *Lancet* 2006; 368: 733-43. [38 citations to September 2007]
- 2.2 Pearce N, Ait-Khaled N, Beasley R, Mallol J, Mitchell E, Robertson C, and the ISAAC Phase Three Study group. Worldwide trends in the prevalence of asthma symptoms: Phase Three of the International Study of Asthma and Allergies in Childhood (ISAAC). *Thorax* 2007; 62: 757-62.
- 2.3 Björkstén B, Clayton T, Ellwood P, Stewart A, Strachan D, and the ISAAC Phase Three Study Group. Worldwide trends for symptoms of rhinoconjunctivitis: Phase Three of the International Study of Asthma and Allergies in Childhood. *Paediatric Allergy Immunol*, (In Press).
- 2.4 Williams H, Stewart A, von Mutius E, Cookson B, Anderson HR and the International Study of Asthma and Allergies in Childhood (ISAAC) Phase One and Three Study groups. Is eczema really on the increase worldwide? *Journal Allergy and Clinical Immunology* 2007 (In Press).

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