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EDITORIAL

Goodbye ISAAC, farewell Joseph

By the time the present words are printed on paper, the International Study of Asthma and Allergies in Childhood (ISAAC) will have officially come to an end. The most comprehensive survey on asthma, rhinoconjunctivitis and eczema in children ever performed will have – at this time – reinvented itself into the Global Asthma Network (<http://www.globalasthmanetwork.org/>) after an alliance with the International Union against Tuberculosis and Lung Diseases which started with the writing of the Global Asthma Report in 2011 (<http://www.globalasthmareport.org/>). It is a great honour for Allergologia et Immunopathologia to host one of the last papers¹ of this immense international collaboration the achievements of which can be traced on its website at <http://isaac.auckland.ac.nz/>.

The ISAAC collaboration started in 1991 when several international groups, led by groups in New Zealand (Auckland and Wellington), Germany (Munster and Munich) and the United Kingdom (London) decided to launch a survey on allergic diseases in children, which could raise participation from all over the world, sharing common instruments and definitions. In spite of the limitations of the instruments used, the ISAAC study has produced a great body of knowledge in relation to the prevalence and risk factors of the conditions studied, always fuelled by the International Data Centre based at the Department of Paediatrics in The University of Auckland. The people responsible for that centre are one of the keys to ISAAC's success over time and over space. This is thus a good opportunity to thank Prof. Innes Asher, Mrs. Philippa Ellwood and Mr. Tadd Clayton for all their enthusiastic work for more than 20 years.

The paper by Mallol et al. included in this issue of Allergologia et Immunopathologia is a global synthesis of the last and – in terms of participation – the largest part of the ISAAC study: Phase Three. This phase included 233 centres in 98 countries and about 1,200,000 children 6–7 and 13–14 years of age. The paper shows by means of very straightforward maps and figures that there is a wide variety in the prevalence of asthma, rhinoconjunctivitis and eczema among countries, but also within countries among centres of the same country, and even between centres of the same city. Those findings stress the importance of local environmental factors which might be playing a much more definite role than genetic predisposition on those conditions.² Although genetic polymorphisms related to those diseases may play

some role, it definitely seems that environmental factors, acting either directly or through epigenetic mechanisms,³ appear to be the most important ones. Furthermore, the synthesis paper shows that the presence of two or more conditions (comorbidities) is not as frequent as might be thought and varies widely across continents. For instance, in Western Europe, only 39.5% of children 6–7 years-old with current symptoms of asthma had also rhinoconjunctivitis or eczema or both. This proportion is slightly higher in adolescents (41.7%). It seems quite clear that the picture arising from specialised clinical units is quite different to that from the real world. Thus, when searching for asthma causes and pathophysiologic mechanisms the real world situation should be seriously taken into account.

But apart from the scientific importance of the ISAAC study and the synthesis of its findings published herein, a totally different but no less important issue should be mentioned in these words: one of the leading authors of the paper is Joseph Odhiambo, a very well-respected physician and a marvellous person from the Centre of Respiratory Diseases Research Unit, Kenya Medical Research Institute in Nairobi (Kenya), who – as the coordinator of English speaking Africa – was part of the Steering Committee of the ISAAC collaboration since the beginning. Last October, Joseph was attacked and brutally killed in Kisumu (Kenya) during one of his trips related to his job for the Institute. This was the second great shock for the collaboration, the first one being the sudden death of Dr. Stephan Weiland, Professor and Head of Epidemiology at the University of Ulm (Germany), in 2007.

The ISAAC collaboration has generously cooperated with Allergologia et Immunopathologia submitting important papers during the past years, which – on the other hand – could have been published in journals of much higher impact factor. To keep with the Spanish saying “Es de bien nacidos ser agradecidos” (gratitude is of the well bred), and with the consent of the current president of the Spanish Society of Paediatric Allergy and Clinical Immunology, a short tribute to Joseph is included at the end of the present issue of the journal. May he rest in peace.

Let us then say goodbye to ISAAC and sadly farewell Joseph, who will be deeply missed. Let us also welcome the Global Asthma Network and prepare to follow its future developments.

References

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2. Cookson W, Moffatt M, Strachan DP. Genetic risks and childhood-onset asthma. *J Allergy Clin Immunol*. 2011;128:266–70.
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