#### REFERENCES

- Amitai DB, Fichman S, Merlob P, Morad Y, Lapidoth M, Metzker A. Cutis marmorata telengiectatica congenita: Clinical findings in 85 patients. Pediatr Dermatol 2000; 17: 100-104.
- Gerritsen MJ, Steijlen PM, Brunner HG, Rieu P. Cutis marmorata telangiectatica con-genita: Report of 18 cases. Br J Dermatol 2000; 142: 366-369.
- Devillers AC, de Waard-van der Spek FB, Oranje AP. Cutis marmorata telangiectatica congenital: Clinical features in 35 cases. Arch Dermatol 1999: 135: 34-38.
- Mazereeuw-Hautier J, Carel-Caneppele S, Bonafe JL. Cutis marmorata telengiectatica congenita: report of two persistent cases. Pediatr Dermatol 2002; 19: 506-509.

# Avoidance of Food Allergens in Asthma (Reply)

At the outset, allow us to make it clear to all the readers of IP that there was a communication gap between the editorial board of IP and the authors (caused by the demise of one of our co-authors, Dr. B.N. Bapat). Had it not been for this, our readers would have received answers to their queries much earlier.

Reply to Dr. Sarpotdar(1). His first question was about allergens and the method of their preparation.

The food allergens were proteins extracted by standard method of protein extraction. High molecular weight fractions were used, food allergens are water soluble glycoproteins with molecular weight in the range of 10,000 to 60,000 daltons. They are suitable for treatment by heat, acid and proteases. They are not haptens.

Regarding the second question, we are glad the concept of total allergenic load was accepted. Ours was a pilot clinical study to demonstrate whether avoidance of food allergens would have any beneficial role at all in the management of childhood asthma. It is nice to know that Dr. Sarpotdar agrees with the role of allergen avoidance and is encouraging us to carry out a study for a longer duration to see the effects on perennial symptoms. We were encouraged by the response in this limited period. Larger study with a longer duration of food allergen avoidance is being planned.

To answer the queries raised by Dr. Yash Paul(2). Yes, certain food items like curd, cheese and milk products, generally good for the intestine, are harmful for some asthmatics and need to be avoided.

With only a small blood sample, we were able to study age against 84 food items. Not all were excluded from the diet. Those items against which allergy was detected, were excluded. Twenty had allergy against rice, 12 had allergy against wheat, 9 against maida. Avoidance was advised and was followed by parents for the period of the study. One of the patients was a breast fed infant and the mother was advised to avoid eating these items - we got encouraging results in this case as well.

We really appreciate Dr. Yash Paul's concern for nutritional intake. Masoor dal and soyabean can take care of protein requirement.

Tomato and orange can take care of vitamins. Spices are required for taste buds and adults. Children's food items can be and were managed without, in our study. All credit to motivated mothers.

Despite all the food allergen avoidance, 30% were not benefited. But look at the bright side - 70% were definitely benefitting. Reasons of failure in the 30% could be lack of compliance or children getting fed lip with the dietary restrictions and rebelling against them.

We are really glad that our article created interest in the minds of readers and set this debate rolling. We are interested in food allergens avoidance.

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### REFERENCES

- Sarpotdar VG. Avoidance of food allergens in childhood asthma. Indian Pediatr 2005; 42: 963-964.
- Paul Y. Avoidance of food allergens in childhood asthma. Indian Pediatr 2005; 42: 964

Editor's note: Dr. Agarkhedkar's reply to Dr. Sarpotdar and Yash Paul's comments on his manuscript could not be published simultaneously in earlier issues, due to a communication gap.

# More Steps Needed to Tackle Authors Who Do Not Respond

We read with great interest the correspondence between Dr. Paul and the Editorial Board regarding the dilemma that arises both for the readers and for the journal when there is no response from authors to pertinent queries made on their article(1,2). We agree with the Editorial Board that failure of authors to respond to a query cannot be a valid reason for the journal to withdraw an article which has already been considered worthy of publication after peer-review. Also, the Editorial Board has taken the right decision to print the queries even though there was no response from the authors.

Most often authors do respond to queries that are raised against their article, as this gives them an opportunity to clarify an issue and defend their work. At times, their reply also gives them an opportunity to inform the readers details of their work which had not been published earlier due to limitations of text length. However, sometimes authors just do not respond, the reasons could be related to: (i) logistical problems (for example, loss of original data or lack of communication amongst various investigators), (ii) lack of interest or paucity of time for drafting a reply, (iii) lack of incentive (authors' reply are not considered as a separate publication and are therefore not listed separately on PubMed), or (iv) genuine inability to respond to a very pertinent query and to therefore defend their work. It is the last reason that is a cause for worry. As readers, we would be concerned if a journal encounters several such instances of non-response. Does it mean that nondefensible articles are getting through the peerreview process? Such instances might create doubts in the minds of the readers about the quality of articles published in the journal in general and this could tarnish the exalted image of the journal.