

**FROM THE EDITOR**

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Dear Colleagues,

I am very happy and honored to be the new chief editor of our valuable scientific journal, Asthma Allergy Immunology, which is indexed in the TUBITAK/ULAKBIM, EBSCOhost Research Databases, Index Copernicus, CINAHL, Turkey Citation Index, SCOPUS, and ISI Web of Science - Emerging Sources Citation Indexes.

On behalf of the Editorial Board, I am delighted to announce the publication of the first issue of the Asthma Allergy Immunology Journal in 2025, which includes articles of a high scientific level. In this issue, the readers will find 3 very detailed reviews, an editorial, 8 very interesting research articles, 3 case reports, and 1 letter to the editor.

In the current issue, we are publishing reviews on three very important topics in the field of allergy science. Our first review article is about hereditary angioedema. Hereditary angioedema (HAE) is a rare genetic disorder characterized by recurrent episodes of localized edema, significantly impairing the health-related quality of life (HRQoL) in affected individuals. The clinical manifestations of HAE are diverse and can be life-threatening, particularly when the larynx is involved (1). These unpredictable and potentially life-threatening attacks significantly impact the patients' quality of life (QoL) (1). In this issue, the review authored by Oztürk Ozdel B. and Soyyigit S. summarizes the current literature on the Quality of Life in Hereditary Angioedema (1).

Hypersensitivity reactions (HSRs) to chemotherapeutic agent or biologicals can be potentially life-threatening and limit therapeutic options. The desensitization method has been applied world wide, utilizing various protocols, to enhance the tolerance of the implicated chemotherapeutic agent or biologicals or other injectable drugs. A three-bag, 12-step protocol has become the most widely accepted protocol for treatment. However, due to the labor-intensive and time consuming nature of the commonly used multiple-bag rapid drug desensitization (RDD) procedure, the one-bag RDD has come to the fore as an alternative protocol (2). Gül O. and Baybek S. summarize the current literature on the results of various clinical approaches by researchers for different patient groups who underwent one-bag RDD procedures (2). The authors emphasize that one-bag RDD protocols are as safe and effective as multiple-bag protocols in various patient populations (2). However, there is a need for a common strategy to classify patient groups to determine the most suitable RDD protocol (2).

Also in this issue, the review authored by Ulsan Bağcı O. and Celebi Sozener Z. summarizes the current literature on Blastocystis spp as an etiologic agent for chronic urticaria, and highlights the fact that the urticaria patient group has a higher prevalence of Blastocystis than the control group, and the regression of urticaria lesions and scores after treatment indicates that Blastocystis spp. might play a part in the pathogenesis of urticaria (3).

Yılmaz I. and Turk M. summarize the current literature on a new approach for the classification of the mechanisms of chronic spontaneous urticaria (CSU) in an Editorial in this issue (4). The authors state that a broader classification of the mechanisms of CSU may better explain both the pathophysiology and therapeutic approaches (4).

Two of the original articles in this issue are related to primary immunodeficiency. The first study, titled "Next Generation Sequencing Based Gene Identification Techniques as a Diagnostic Approach For Patients with the CVID Phenotype" emphasizes that "While most CVID cases remain without a defined molecular cause, ongoing genetic discoveries continue to reveal the complexity of immunologic pathways essential for normal B cell development and memory maintenance (5). Further studies are likely to uncover digenic or polygenic causes, offering new insights into intersecting immune pathways. Understanding these genetic defects is critical for developing personalized treatments, monitoring comorbidities, and improving patient care, emphasizing the pivotal role of CVID research in advancing immunology" (5).

The second article, "The Prognostic Nutritional Index in Common Variable Immunodeficiency: A Marker for Mortality and Autoimmune Activity" reports that the Prognostic Nutritional Index (PNI) may serve as an affordable, easily monitored prognostic tool in CVID (6). Repeated PNI measurements could also provide insights into the chronic inflammatory status, particularly in monitoring the development or activity of autoimmune complications (6).

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Another original article of this issue, titled “Investigation of the Frequency of Angioedema and Cough in Children Using Angiotensin Converting Enzyme Inhibitors” emphasizes that “Angioedema as a result of antihypertensive drugs in pediatric populations is a rare but potentially life-threatening condition (7). The use of ACE inhibitors should be queried, particularly in cases of tongue, lip, and facial angioedema.” (7)

Three studies focusing on chronic urticaria and other skin allergies are presented in this issue. The first one is “Anxiety and Depression Levels in Patients with Chronic Spontaneous Urticaria and Their Relationship with Disease Activity” and reports that “The chronic nature of the disease, recurrence of symptoms despite treatment, sedative effects of antihistamines, and the cosmetic discomfort of the disease may affect the psychological status of the patients.” (8). In this article, Ogutcu M. et al. concluded that when evaluating patients with chronic urticaria, the psychiatric status should also be assessed (8). The second article in this category was “Retrospective Evaluation of Patients Referred to Allergy and Clinical Immunology Outpatient Clinics with Isolated Pruritus: A Single Center Experience” and reported that the most common cause of pruritus in the study population was allergic diseases, followed by systemic diseases (iron deficiency anemia and thyroid disease) (9). Among the etiologies for pruritus related with dermatological disease, the most common etiology was dry skin, followed by scabies (9).

The third article in this category was related to the influence of the COVID-19 Pandemic on patients with urticaria (10). A social media listening (SML) study is an interesting research method that focuses on analyzing information from SMLs to gain insights into various topics. Here, we present a study related to SML in urticaria patients in order to analyze the impact of the COVID-19 Pandemic. Turk M. Et al. reported that chemical cleaners (4553 posts) and stress/upset (4809 posts) were the most common causes of urticaria from the patients’ perspective in the pre-COVID and COVID-19 periods, respectively (10). They emphasized that the COVID-19 pandemic influenced access to care and patient expression about the disease. (10).

The only effective antibiotics in the curative treatment of trichomoniasis are nitroimidazole antibiotics, including metronidazole. Therefore, allergy to metronidazole must be evaluated properly. Telli O. et al. have reported one of the rare studies conducted on this subject. They found a rate of metronidazole hypersensitivity confirmed by OPT as 3.65% and the reactions were mild in patients with a history of HSRs to antibiotics other than metronidazole. These patients with a history of HSRs to antibiotics other than metronidazole generally tolerate metronidazole well (11).

Zamani B. et al. have investigated the efficacy of Adalimumab in controlling severe forms of COVID-19 and concluded that the treatment with adalimumab failed to exert significant changes in the clinical and laboratory parameters related to recovery from and the outcome of COVID-19 (12).

In this issue, we publish a letter to the editor related to a very interesting patient with sesame allergy. This was a case of hidden allergen exposure in a child with sesame allergy from consuming “Dubai Chocolate” (13). Ozer M. highlights a significant lack of awareness regarding the allergen content of handmade and unlabeled food products. These types of products, which are not subject to mandatory labeling, pose a considerable risk for individuals with food allergies (13).

And finally the readers will also find three case reports in this issue: “Successful desensitization in a pediatric patient with cytarabine anaphylaxis”, “Case report of systemic mastocytosis with cutaneous involvement” and “Successful desensitization with ixekizumab in a patient with a history of multiple biological agent allergy” (14, 15, 16).

On behalf of the Editorial Board of Asthma Allergy Immunology, we hope that the readers will be able to enhance patient management and outcomes with the articles found within this issue.



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Sincerely,

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**Editor-in-Chief**