Reviewer's report

Title: Testing for Allergic Disease: Parameters Considered and Test Value

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Reviewer: Elina Toskala

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Testing for Allergic Disease: Parameters Considered and Test Value

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Major comments: The manuscript is well written. The study is well planned and carried out. The main purpose of the study was to evaluate trade-offs among clinical parameters that influence the decision of family physician to use specific IgE blood testing as a diagnostic aid for patients suspected of having allergic rhinitis.

Manuscript is some what too long and a bit difficult to read. It discusses the methodology very broadly and could be made shorter and more readable when leaving some of that away.

Authors had decided to take IgE testing for the first choice in allergy testing for this study even SPT (skin prick tests) are as good and sometimes even better method and recommended in all mentioned guidelines like ARIA also for the first line allergy test. This should be address and explained why.

One very critical point is not discussed in the paper at all and that is the interpretation of the IgE results. When the results in IgE testing is e.g. allergy glass I (0.35-0.7 IU/l) the clinical significance of it is not clear. Physicians should be very cautious to make direct diagnosis without good clinical examination and medical history of the patient. With too much testing can also lead to false positive results and this can lead to significant restriction counselling without any real need for that. We want to endorse health, not allergy with testing and this should be discussed. When patient has allergic rhinitis or is suspected to have it, it is critical also to examine the nose and this should be address, too. Some one has to look into the nasal cavity to make differential diagnostics and exclude other reasons for rhinitis symptoms. Even patient would have AR he/she can still have also other reasons for chronic rhinitis.

Minor comments:

The supporter of the study is manufacturer for the IgE testing.