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References

Association between sibship size and allergic diseases in the Glasgow Alumni Study

We read the interesting study by Kinra et al which gives us important information on the relationship between sibship size, birth order, and allergic disease in British students born in the first half of the 20th century. There are, however, a few points which we would like to raise:

(1) The authors observed a stronger association between sibship size and allergy in the oldest cohort as was reported in our study. This finding may support the hygiene hypothesis because of the postulated larger difference in hygiene between larger and smaller families in this cohort compared with younger cohorts. However, another possible explanation—not related to the hygiene hypothesis—is the change of determinants of family size. With modernisation and emancipation of women and the discovery of the biochemical rhythm in the female reproductive cycle and the increasing popularity of condoms, all taking place in the first half of the 20th century, the determinants of family size may have shifted considerably during this period with probable consequences for the association between family size and allergy.

(2) Similarly, an interaction between socioeconomic status (SES) and birth order was interpreted as—without a chance finding—supporting the hygiene hypothesis. However, other explanations cannot be excluded if we assume a prenatal birth order effect: a stronger relationship between birth order and allergy in lower SES categories might be due to a possibly higher rate of spontaneous abortions in these groups.

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In the paper entitled “COPD exacerbations,” by Scott, P Walker and P M A Calverley which appeared in the May issue of Thorax (2006;61:440–7), the dose of tiotropium used in the studies by Casaburi and Brusasco referred to in table 1 on page 444 which currently reads “18 µg twice daily” should read “18 µg once daily.” The publishers apologise for this error.
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