The effects of a synbiotic in infants with atopic dermatitis

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Impact of maternal atopy and probiotic supplementation during pregnancy on infant sensitization

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LETTER TO THE EDITOR

With great interest we have read the article by Huurre et al. (1) reporting on the impact of maternal atopy and probiotic supplementation during pregnancy on infant sensitization. We would like to comment on some of the results of this trial.

First, the authors found an increased risk of sensitization in infants with allergic mothers breastfeeding over 6 months or exclusively breastfeeding over 2.5 months. Therefore they conclude that breastfeeding in atopic mothers is a risk factor for sensitization in infants. However, these results may be a biased, because of reversed causation (2). The authors give no information regarding the prevalence of allergic disease, specifically atopic dermatitis, in the participating infants. It seems likely that the presence of allergic symptoms caused mothers to continue breastfeeding for a longer period of time, which could explain the observed relation between breastfeeding and increased sensitization.

Second, considerable attention is given to the observation that TGF-β2 was higher in the probiotic than in the placebo group. However, this difference did not reach significance (CI 0.96-2.34, p 0.073). Moreover, this moderate effect was only seen in the colostrum sample and had totally disappeared after one month, despite that the probiotic suppletion was still continued at that time. Therefore, it is questionable if probiotic suppletion actually changed the breast milk cytokine pattern.

Finally, we regret that no faecal samples of the mothers were analysed to confirm actual colonisation with the given probiotic strains. This would have given important information on compliance.

Reference List