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Authors' response



We thank Liccardi et al for their interest in our article and for raising the issue of prior pet sensitization as a risk factor for developing occupational asthma.¹ Another study found that a prior history of pet ownership and sensitization was associated with an increased risk of work-related asthma in animal shelter workers.² Thus, in those workers exposed to pet allergens at home and at work, the peak flow monitoring protocol described in our stepwise diagnostic approach would not always be useful in distinguishing between work-related and non-work-related asthma. We are aware of studies reporting higher frequencies of mouse and horse sensitization among cat and dog allergic subjects, but a clear association between pet allergy and work-related asthma has not been demonstrated. Without knowledge of the predictive value of pet allergen sensitization for development of work-related asthma, we cannot recommend routine pet allergen testing for animal workers. Second, the utility of testing for animal cross-reactivity is unclear because it is not yet fully understood. Cross-sectional studies have shown that IgE specific for lipocalins Equ c 1 and Mus m 1 occurred in those subjects who were also sensitized to cats and or dogs,^{3,5} but longitudinal studies are needed to provide a more definitive association before this information can be integrated into clinical practice. Finally, one must be cautious in prescreening workers for sensitization to workplace allergens, because this

might violate disability laws if used to determine employment or placement decisions.⁶

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