Vitamin A status in wheezing Saudi children

To the Editor

I have 2 comments on the interesting study by Shalaby et al \(^1\) on vitamin A status in wheezing Saudi children.

First, the demonstration of the significant correlation between serum vitamin A concentration and wheezing severity, and course has led Shalaby et al \(^1\) to recommend further studies to test the effect of administration of therapeutic levels of vitamin A to the high-risk groups on the prevalence and severity of wheezing. It is noteworthy that therapeutic implication of vitamin A in managing asthmatic children was actually studied and suggested more than 5 decades ago. \(^2,3\) However, the paucity of large scale studies supporting its clinical utility has probably hindered its widespread clinical implementation.

Second, apart from vitamin A, additional vitamins have been noticed to closely link with bronchial hyper-responsiveness. For instance, asthmatic children during their exacerbations had significant lower serum levels of vitamins with antioxidant effects like vitamin C and E. \(^4\) Also, vitamin D insufficiency was found to be associated with mild to moderate persistent asthma, and linked with higher odds of severe exacerbation. \(^5\)

On the other hand, among asthmatics, serum folate levels were noticed to be significantly lower among atopics and correlated inversely with the degree of atopy. \(^6\) Measurement of serum levels of these vitamins and evaluating their therapeutic implications represent worthy objectives to be accomplished among wheezing Saudi children.

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Reply from the Author

No reply was received from the Author.

References

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ERRATUM

In manuscript “The oral hygiene habits of school students in Riyadh, Saudi Arabia” Saudi Med J 2003; 24: 1408-1410, the names of the author should have appeared as: Almas K, AlShwaimi E, Al-Shamrani HS, Skaug N.