

## Autumn leaves: about aging and allergy

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When the autumn leaves start to fall, it is ideal time to think about aging, and perhaps allergy for us.

This issue of *Asia Pacific Allergy* features important issue on respiratory allergy in the elderly from the Korean Longitudinal Study on Health and Aging cohort [1]. Population aging is an emerging issue in every part of the world, especially in Asia. As autumn leaves turn into red and gold, aging may affect the features of allergy in the elderly. The prevalence of asthma in the elderly which has different features from childhood asthma has been increasing in the Asia-Pacific region [2]. It will be important for us to prepare for the allergic diseases in a geriatric society. Song and Chang [1] explained the possible relationship of asthma and obesity, the features of rhinitis and the difference of its prevalence in urban, semiurban, and rural areas, the inhalant allergen sensitization, and the associated factors with chronic cough in the elderly from the cohort study.

On the contrary, it is spring now in Southern hemisphere such as Australia. As described in the editorial of the April issue, a recent thunderstorm event in Melbourne, Australia on November 21–22, 2016 was the largest outbreak over 30 years [3]. In this issue, Rangamuwa et al. [4] presents the data on the

thunderstorm asthma in Melbourne 2016 with 344 epidemic thunderstorm asthma cases identified from 3 Emergency Departments.

Chronic obstructive pulmonary disease (COPD) is usually regarded as not much related with allergic diseases. However, readers will find an interesting article on the frequency and effect of type 1 hypersensitivity in patients from India with COPD and associated upper airways symptoms [5]. Asthma-COPD overlap syndrome (ACOS), or asthma-COPD overlap is another interesting disease category for us. In this issue, Kawamatawong et al. [6] described ACOS in tertiary care setting of Thailand.

Readers could be also interested in an article on the nasal cytokine profiles of human metapneumovirus and respiratory syncytial virus that may cause the exacerbations of asthma [7].

Kimura disease is a chronic inflammatory disease of unknown etiology that usually presents as painless lymphadenopathy or subcutaneous mass in the head and neck region. It is regarded as an eosinophil related disease and most cases have been reported in Asia. In this issue, Nonaka et al. [8] suggested the possible role of basophil in the pathogenesis of Kimura disease.

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Oral food challenge is an essential procedure for the definite diagnosis of food allergy. Readers will find an article on the experience of oral food challenges conducted in specialized and general hospitals [9].

It's been a year since I was posted as the Editor-in-Chief at the Joint Congress of the Asia Pacific Association of Allergy, Asthma and Clinical Immunology (APAAACI) & the Asia Pacific Association of Pediatric Allergy, Respiriology and Immunology (APAPARI) 2016 in Kuala Lumpur, Malaysia. Thank you very much for your support on Asia Pacific Allergy, the official journal of APAAACI. I would like to express my sincere gratitude to readers, authors, reviewers, the editorial board members, APAAACI board members, APAAACI member societies, and the editorial team. The 11th APAAACI Congress, as the Joint Congress with APAPARI, will be held in Bangkok, Thailand on October 11–14, 2018. Please save the dates!

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