



Extending discussion on alpha-gal syndrome: research needs, clinical significance, and more broad consequences

Mathan Muthu Chinnakannu Marimuthu, MTech^a, Vickram Agaran Sundaram, PhD^a, Talha Bin Emran, PhD^{b,c,*}

Dear Editor,

The paper 'Alpha-gal syndrome as a novel food allergy: a case,' which was just published and offered a thoughtful summary of this new illness, prompted me to write in response^[1]. The paper does a good job of highlighting the difficulties in identifying and treating alpha-gal syndrome (AGS), a disorder associated with tick bites that are marked by delayed anaphylaxis after ingestion of mammalian meat. Concern about this condition is rising, especially in areas where tick populations are high. Since 2009, reports of cases of post-tick exposure AGS have come from all around the globe. According to data from observational studies, case reports, and model studies using experimental mice, human exposure to tick bites may generate α -Gal-specific IgE sensitization, which can result in AGS. Further investigation is necessary to determine the precise processes and risk factors that contribute to the development of AGS. Various tick species have been associated with IgE responses specific to α -Gal around the globe; in North America, *A. americanum* is the predominant species of exposure, while other species have been implicated in other regions^[2]. Additional study is necessary to rule out the possibility that other tick species or vectors may induce α -Gal-specific IgE sensitization. In the next years, additional northern U.S. states and Canada may report instances of AGS owing to the tick's anticipated northward migration brought on by climate change. However, occurrences are probably underreported and under diagnosed because of the typical delay in responses after ingestion of foods containing α -Gal, as well as the variety in symptoms and severity. The levels of α -Gal-specific IgE needed for the diagnosis of AGS are not agreed upon or consistent; hence further research is needed to evaluate diagnostic tests. The epidemiology, inci-

dence, distribution, and risk factors for AGS in the general population and in high-risk tick-exposure populations need to be further investigated^[3].

Understanding AGS is crucial from a clinical standpoint. Delayed onset of symptoms often makes diagnosis more difficult and increases the risk of misdiagnosis or underdiagnosis. The article's example highlights the need to have a higher level of clinical suspicion for AGS, particularly in those with inexplicable anaphylaxis. It supports raising healthcare practitioners' knowledge and educating them about AGS in order to remedy this. By incorporating this information into medical education and ongoing professional development, doctors will be better equipped to identify and treat this illness. Although the essay offers a comprehensive summary, there are a few points that need further investigation. To identify at-risk groups and provide focused public health interventions, one important topic of research is the incidence of AGS in various demographics and geographical areas. Furthermore, little is known about the pathophysiological processes behind the delayed allergic reaction in AGS. Better diagnosis techniques and treatment plans may result from further study, and knowing why some people acquire AGS while others do not may provide light on possible protective factors^[4].

Due to the delayed onset of symptoms, AGS presents substantial diagnostic hurdles in identifying allergens^[5]. Alpha-gal sensitivity may not always be identified by standard allergy testing, and mistakes among medical professionals may result from a lack of knowledge. Alpha-gal-specific IgE tests might be developed and used to increase diagnostic precision^[6]. Furthermore, thorough food and exposure histories have to be an essential element of allergy evaluations, especially in areas where ticks are common, where AGS has to be taken into account in instances of inexplicable anaphylaxis^[7]. AGS also brings up more general moral and societal issues. The syndrome's dietary limitations may have a serious negative effect on a patient's quality of life and increase their risk of social stigma or isolation, especially in societies where eating meat from mammals is common^[8]. It is imperative that public health programs, such as those that encourage tick avoidance and inform the public about the dangers of tick bites, be implemented. Cultural sensitivity and accessibility are important, particularly for communities living in underserved or rural locations. In conclusion, even though the paper offers insightful information on AGS, further study and debate are required to fully understand the allergy's clinical importance, difficulties with diagnosis, and wider ramifications. By addressing these issues, we can better understand and treat AGS, which will eventually lead to better patient outcomes.

^aDepartment of Biotechnology, Saveetha School of Engineering, Saveetha Institute of Medical and Technical Sciences (SIMATS), Saveetha Nagar, Thandalam, Chennai, Tamil Nadu, India, ^bDepartment of Pharmacy, Faculty of Allied Health Sciences, Daffodil International University, Dhaka, Bangladesh and ^cDepartment of Pharmacy, BGC Trust University Bangladesh, Chittagong, Bangladesh

Sponsorships or competing interests that may be relevant to content are disclosed at the end of this article.

*Corresponding author. Address: Department of Pharmacy, BGC Trust University Bangladesh, Chittagong 4381, Bangladesh. E-mail: talhabmb@bgctub.ac.bd (T.B. Emran).

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Annals of Medicine & Surgery (2024) 86:7482–7483

Received 28 August 2024; Accepted 8 October 2024

Published online 16 October 2024

<https://dx.doi.org/10.1097/MS9.0000000000002664>

Ethical approval

Not applicable.

Consent

Not applicable.

Source of funding

Not applicable.

Author contribution

M.M.C.M.: conceptualization and writing – original draft; V.A.S.: writing – review and editing; T.B.E.: writing – review and editing.

Conflicts of interest disclosure

The authors declare no conflicts of interest.

Research registration unique identifying number (UIN)

Not applicable.

Guarantor

Talha Bin Emran.

Data availability statement

No new data sets were generated.

Provenance and peer review

Not commissioned, externally peer-reviewed.

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