

Factors	Design	Wheeze		Asthma		Outcome	
		N	†	N	†	Atopic dermatitis	Allergic rhinitis (Hay fever)
Maternal complication during delivery	Cohort	N: 80 (asthma or wheezing)				N: 80	
Maternal depression	Cross-sectional		†: 52				
Multiple birth	Cohort		N: 57				
Premature/preterm birth	Cohort	†: 31 N: 31, 33					
	Cross-sectional	†: 14, 50		†: 12, 14			
Gestational age	Cohort	N: 87		†: 39 ‡: 89 N: 38, 40, 57, 73, 74, 87 †: 84		N: 63, 89	†: 73, 89
Season of birth	Case-control			N: 38			
Intrauterine growth retardation	Cohort			N: 57			
Apgar score	Cohort			†: 38 (at 1st min) N: 38 (at 5th and 10th min)			
Mode of delivery	Cohort			N: 112			N: 112
Breech delivery	Cohort	†: 113 N: 34, 114		†: 38, 57, 73 (ever), 112, 115, 116 N: 34, 73 (current), 114		N: 112, 113, 115, 116	†: 115 N: 73, 76, 112, 113, 116
Caesarean section	Cohort			N: 112			N: 112
Forceps/vacuum extraction	Cohort			†: 38			
Forceps, manual auxiliary, and extraction breech	Cohort			N: 38			
Vacuum extraction	Cohort						
Special procedures at delivery	Cohort			N: 38			
Fetal-pelvic disproportion	Cohort			N: 38			
Fetal asphyxia	Cohort			N: 38			
Prolongation of labor	Cohort			N: 38			
Exhaustion of mother	Cohort			N: 38			
Duration of second-stage labour	Cohort						
Induced labor	Cohort	N: 80 (asthma or wheezing)					N: 76
Smoking							
Active smoking	Cohort	†: 117 N: 81		†: 117, 118, 119 N: 4 †: 8 N: 6			
	Case-control						
	Cross-sectional	†: 10, 11, 13, 15, 18, 120		†: 11, 18, 19, 20, 21, 23 (women), 120, 121 ‡: 22 (men) N: 10, 13, 22 (women), 23 (men), 120, 122, 123		N: 27, 121	†: 123 N: 21, 121, 122
Passive smoking	Cohort	†: 31 N: 30, 31, 33, 117		†: 36, 124 (at 1, 2 y) N: 117, 40, 30, 41, 33, 124, 124 (at 4 y)			†: 75 N: 125 (hay fever and/or asthma)

Environmental Factors and Allergy

Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
	Case-control		↑: 45, 61, 126 N: 46, 127	N: 58, 61, 128
	Cross-sectional	↑: 9, 120, 129 (girls), 130 N: 16, 17, 55, 86, 129 (boy), 130	↑: 9, 25 (boys), 120, 130, 131, 132 N: 17, 20, 24, 25 (girls), 25, 41, 51, 55, 65, 86, 121, 123, 129, 130, 131	↑: 9 (current), 121, 133 (hay fever/asthma) N: 9 (ever, DD), 16, 24, 121, 123, 134, 130
Maternal smoking during pregnancy	Cohort	↑: 31 N: 31, 56, 80 (asthma or wheezing), 81	↑: 135 (ever) N: 38	N: 125 (hay fever and/or asthma)
	Case-control		↑: 45, 127 N: 84	
	Cross-sectional	N: 86	↑: 26, 136 N: 86, 93	N: 26, 93
Serum cotinine level	Cohort		N: 59	
Occupation	Cohort		↓: 74, 38 (paternal) N: 9	N: 9
Farmer	Cross-sectional	N: 9		
Farmer (vs civil servant)	Case-control		N: 20	N: 58
Works at home	Cross-sectional		↓: 20	
Works outside home	Cross-sectional		↑: 137	↑: 137
Cleaning work	Cohort			
Duration of daily work	Cohort			
Shift work	Cohort			
Occupational agents	Cohort			
Asbestos	Cross-sectional	N: 138		
Replace asbestos brakes	Cohort	↑: 139 N: 138		
Quartz	Cohort	N: 138		
Dust/fumes	Cohort	↑: 138 N: 10		
Grind metal	Cross-sectional	↑: 10		
Drive combines	Cross-sectional	↑: 139		
Drive trucks	Cross-sectional	↑: 139		
Diesel tractors	Cross-sectional	↑: 139		
Gasoline to clean	Cross-sectional	↑: 139		
Gas tractors	Cross-sectional	↑: 139		
Repair engines	Cross-sectional	↑: 139		
Weld	Cross-sectional	↑: 139		
Paint	Cross-sectional	↑: 139		
Hand pick (crop activities)	Cross-sectional	↑: 139		
Plant (crop activities)	Cross-sectional	↑: 139		
Insecticide use	Case-control	N: 139		
	Cross-sectional	↑: 11		↑: 58
Pesticide	Cross-sectional	↑: 140		
Repair pesticide equipment	Cross-sectional	↑: 139		
Disinfectants	Cross-sectional			
Fertilizer	Cross-sectional	↑: 11		N: 122
Natural fertilizer	Cross-sectional	↑: 139		N: 11

Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
Chemical fertilizer	Cross-sectional	N: 139		
Livestock	Cross-sectional		↑: 13	
Cattle kept inside house	Case-control		↓: 126	
Rats	Cross-sectional		N: 122	N: 122
Rat allergen (Rat n 1)	Cross-sectional		N: 122	N: 122
IgE to rat urinary proteins	Cross-sectional		N: 122	↑: 122
Air pollution				
NO	Cross-sectional		N: 141	
NO ₂	Cohort	N: 141	↑: 41	
	Case-control	N: 143	↑: 144	
	Cross-sectional	↓: 55 (ever)	N: 41, 55, 141, 145	N: 145
	Cross-sectional	N: 55 (current), 145		
NOx	Cross-sectional		N: 141	
SO ₂	Cross-sectional	↑: 145	↑: 145	N: 145
	Cohort	N: 55	N: 55	
	Cohort	↑: 147	N: 41	
Particulate matter < 10µm	Cross-sectional	N: 145	N: 41, 141, 145	N: 145
Particulate matter 2.5 µm	Cohort	N: 142		
Particulate matter 2.5 µm absorbance	Cohort	N: 142		
Total suspended particulate	Case-control		↑: 144	
Black carbon	Cross-sectional		N: 141	
O ₃	Cross-sectional	N: 55, 145	N: 55, 145	N: 145
Air quality	Cohort		N: 5	
Home environment				
Temperature	Case-control		↑: 6, 147	
Carpeting	Case-control		↓: 45	
Vacuuming	Cross-sectional	↓: 129		
Dust	Case-control		N: 148	
	Cross-sectional	N: 149	↓: 148 (house)	
	Cohort	N: 13	N: 148 (bedroom)	
House dust allergens				
Der f 1	Cohort		N: 150	
	Case-control	N: 151	N: 151	
	Cross-sectional	N: 152		N: 152
	Ecological	N: 153		
Der p 1	Cohort	N: 154 (atopic wheeze)	N: 153	
	Case-control	N: 151	N: 150	
	Cross-sectional	N: 152	↑: 6	
	Ecological	↑: 153 (13-14 y)		
	Ecological	N: 153 (6-7 y)		N: 152
Der f 1 + Der p 1	Cohort		N: 153	
	Case-control	N: 151	N: 155	
Fel d 1	Cohort	↑: 157 (with maternal asthma)	N: 151	
	Case-control	↓: 157 (without maternal asthma)		
	Cohort	N: 154 (atopic wheeze), 157, 158	N: 157	
	Case-control	N: 151	N: 151	N: 83

Factors	Design	Wheeze		Asthma		Outcome	
						Allergic rhinitis (Hay fever)	
Fuel							
Coal as fuel	Cross-sectional	N: 11		N: 11			
Cornstalks as fuel	Cross-sectional	N: 11		N: 11		↓ : 58	
Wood as fuel	Case-control						
	Cross-sectional	N: 11		N: 11		↑ : 58	
Electricity as fuel	Case-control						
Cooking							
Gas cooking	Case-control			N: 6 (heating and cooking), 45		N: 148	
	Cross-sectional	N: 86, 129		↑ : 86			
				N: 129			
				↑ : 20			
				↓ : 20			
Wood, animal dung, or crop residues as fuel	Cross-sectional						
Separate kitchen	Cross-sectional						
Heating							
Gas as fuel	Case-control					N: 148	
	Cross-sectional	N: 129		N: 129			
Coal as fuel	Cross-sectional	N: 129		N: 129			
Oil as fuel	Cross-sectional	N: 129		N: 129			
Wood as fuel	Cross-sectional	N: 129		N: 129			
Wood stove	Cohort	N: 158					
	Cross-sectional	N: 173		N: 173			N: 173
Gas stove	Cohort	N: 158					
	Cross-sectional	N: 174					
Unvented heater	Cohort						
	Cross-sectional			N: 41			
				N: 41			
				↓ : 9 (DD)			↓ : 9 (ever)
				N: 9 (ever)			N: 9 (current, DD)
				↑ : 126			
Stove (kerosene, coal, wood, dung, straw)	Cross-sectional	N: 9					
Biosmoke (open fire or burning smoke without a fuel vs. gas or kerosene stove)	Case-control						
Furne emitting heaters	Cross-sectional	↑ : 175 (first year of life)		N: 175			
		N: 175 (current)					
Radiator in bedroom	Case-control						
Hearth or open fire place	Case-control			N: 45			
Central heating or electricity as fuel	Case-control			N: 45			
Space heating							
Gas as fuel	Cross-sectional	N: 129		N: 129			
Coal as fuel	Cross-sectional	↑ : 129 (boys)		↑ : 129 (girls)			
		N: 129 (girls)		N: 129 (boys)			
Oil as fuel	Cross-sectional	N: 129		N: 129			
Wood as fuel	Cross-sectional	N: 129		N: 129			
Air conditioning	Case-control			↓ : 6			
	Cross-sectional			N: 25			
Water heating unvented gasgeyser	Case-control			↑ : 45			
Dampness							
Dampness/humidity	Cohort	↑ : 176		N: 32, 176			N: 43
		N: 32					

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Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
	Case-control	† : 177		
	Cross-sectional	N: 178	† : 178 N: 6 (living room)	† : 178 (DD) N: 178 (current) N: 75
Mold or mold odour	Cohort	† : 158 (with maternal asthma) N: 158 (without maternal asthma)		
	Case-control	† : 177	† : 45	
	Cross-sectional	† : 86	† : 86	
		N: 129	N: 129	
Condensation	Cross-sectional	N: 178	† : 178	† : 178
Water leakage	Cross-sectional	N: 178	N: 178	† : 178 (current) N: 178 (DD)
Water damage	Cross-sectional	† : 86	N: 86	
Flooding	Case-control		N: 128	
Floor moisture	Cross-sectional	† : 178	† : 178	† : 178 (current) N: 178 (DD)
Chemical agents				
Formaldehyde	Case-control		† : 147	
Volatile organic compounds	Case-control		† : 6	
Butyl benzyl phthalate in house dust	Case-control		N: 179	† : 179
Di (2-ethylhexyl)phthalate in house dust	Case-control		† : 179	N: 179
Chemical household products (disinfectant, bleach etc)	Cohort	† : 180 (persistent) N: 180 (transient, late onset)		
Repainting child's room	Case-control	† : 177		
Biological exposure at home				
Pig ownership	Cross-sectional	N: 9		N: 9
Poultry kept inside house	Case-control		N: 126	
Mouse	Cohort	† : 90		
Bedding items				
Cocoon use	Cohort	† : 181		
Bottom bunk bed	Cross-sectional	† : 50		
Foam mattress	Cross-sectional	N: 50		
Old mattress	Case-control			
Electric blanket	Cross-sectional	† : 50		
Feather quilt	Cohort	† : 50	↓ : 182	
Sheepskin underbedding	Cross-sectional	† : 183		
Synthetic pillow	Cohort			
	Case-control	† : 50, 183, 184	† : 184	
Synthetic quilt (duvet)	Cross-sectional			
	Case-control	† : 50, 183		
Synthetic blanket	Cross-sectional	† : 184		
Number of synthetic bedding items	Cohort	† : 185		

Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
Housing characteristics				
Building age (40+ yrs vs < 10 yrs)	Cross-sectional	↑: 86	N: 86	
Building material (Concrete vs wood)	Cross-sectional	N: 86	N: 86	
House of steel or reinforced concrete	Cohort		N: 41	
Residence near a major road	Cross-sectional	↑: 186 (among 13-14 y), 187 N: 86, 187 (among 6-7 y), 188, 189	N: 86, 186, 188	↑: 186 (rhinitis), 189 N: 186 (hay fever), 188
Seaside living	Cross-sectional		N: 190	N: 190
Living near opencast coal mining site	Cross-sectional	N: 190	N: 190	
Living in apartment	Cohort	N: 56 (repeated wheeze)	N: 17	
Living in mobile home	Cross-sectional	N: 17	N: 17	
(vs apartment)	Cross-sectional	N: 17	N: 17	
Living in condominium/town home	Cross-sectional	N: 17	N: 17	
(vs apartment)	Cross-sectional	N: 17	N: 17	
Dwelling type (Single-family house vs other dwelling type)	Cross-sectional	N: 86	N: 86	
Area of residence (> 60 m ² vs < 25 m ²)	Cross-sectional	N: 86	N: 86	
Floor (cement)	Case-control		N: 58	
Lifestyle related factor				
Watches TV every week	Cross-sectional		N: 20	
Reads newspaper/magazine every week	Cross-sectional		N: 20	
Sleep position	Cross-sectional	N: 50		
Spending first 24 h of life in mothers bed only	Cohort			↑: 76
Physical activity	Cohort			
	Cross-sectional		N: 4, 59 ↓: 23 (men) N: 22, 23 (women)	
Medical history				
Allergy or atopy	Cohort			
	Case-control		↑: 37, 40, 41 ↑: 6	
	Cross-sectional	↑: 12	↑: 12, 41, 122 N: 191	↑: 122
Asthma	Cohort			↑: 43
	Cross-sectional		N: 57	↑: 27
Asthma or bronchitis	Cohort			
Wheezing	Cohort			
Wheezing bronchitis (< 2 y)	Cohort			
Allergic rhinitis or hay fever	Cohort			
	Case-control		↑: 4	↑: 125 (hay fever and/or asthma)
	Cross-sectional	↑: 50	↑: 8	
Rhinitis	Cross-sectional		↑: 19	
Eczema	Cohort		↑: 4	
	Cross-sectional	↑: 50	↑: 132	

Environmental Factors and Allergy

Factors	Design	Wheeze		Asthma		Outcome	
						Allergic rhinitis (Hay fever)	
Hay fever and eczema	Cohort			↑ : 4			
Respiratory allergy	Cross-sectional			↑ : 25			
Respiratory illness	Cohort	↑ : 158		N: 41			
	Cross-sectional			↑ : 25, 41			
Pneumonia	Cohort			N: 57		N: 66	
Bronchial hyperresponsiveness	Cohort			↑ : 42			
Chronic bronchitis emphysema	Cross-sectional			↑ : 132		↑ : 27	
Chronic obstructive pulmonary disease	Case-control			N: 8			
Chronic lung diseases	Cohort			↑ : 36			
History of tuberculosis	Cross-sectional	N: 9		↑ : 9			↑ : 9 (ever, DD) N: 9, 9 (current)
RSV bronchiolitis	Cohort		↑ : 192	↑ : 192			
Lower respiratory tract illness	Cohort		↑ : 33, 56, 90	↑ : 33, 82, 193			
Respiratory disease in infancy	Cross-sectional		↑ : 55	↑ : 55		N: 82	
Transient tachypnoea of newborn or respiratory distress syndrome	Cohort			↑ : 194			
Adenoidectomy and/or tonsillectomy	Cohort			N: 195		N: 195	
Adenoidectomy	Cohort			↑ : 196			
Otitis media	Cross-sectional			↑ : 196			
Parotitis	Cohort			N: 82			
Fever	Case-control			↑ : 198 (during pregnancy)			
	Cross-sectional			↑ : 199			
	Case-control		↑ : 199	↑ : 198 (during pregnancy)			
Flu	Cohort			↑ : 132		N: 66	
Cold lasting 3 + days	Cross-sectional			N: 8			
Dyspnea	Case-control			↑ : 199			
Gastroesophageal reflux disease	Cohort			↑ : 7			
Acute gastroenteritis	Cross-sectional		↑ : 199	↑ : 199			
Stomach ulcer	Case-control			↑ : 7			
Diarrhoea lasting 3 + days	Cohort			↑ : 7			
Depression	Case-control			↑ : 7			
Illness or health problems in first week of life	Cohort		N: 80 (asthma or wheezing)				
Infantile colic	Cohort			N: 200			
Flash	Cohort			↑ : 43			
Exanthema subitum	Cohort			N: 66			
Viral warts	Cross-sectional			↑ : 7			
Arthritis	Case-control			↑ : 7			
Hypertension	Case-control						
Infection	Cohort						
Infection	Cohort		N: 80 (asthma or wheezing during pregnancy)			N: 80 (during pregnancy)	
Total number of infections	Cohort			↑ : 32 (ever)		↑ : 66	
Respiratory infection	Cohort			N: 81		N: 197	

Factors	Design	Wheeze		Asthma		Outcome	
						Atopic dermatitis	Allergic rhinitis (Hay fever)
	Case-control	N: 12		↑ : 19 (infection before 5 yrs, 51 (childhood and adolescent 12onset)	N: 201		
	Cross-sectional						
Upper respiratory tract infections	Cohort			N: 51 (adult onset)			
Lower respiratory infection	Cohort			N: 82, 193	N: 82		N: 82
	Cross-sectional	↑ : 202		↑ : 39, 202			
Ear infection	Cross-sectional			↑ : 93	N: 93		N: 93
Gastrointestinal infection	Cohort			↑ : 203			
	Case-control	N: 202		N: 202	N: 201		
Viral infection	Cohort			↓ : 202	N: 197		
	Case-control	↑ : 44 (among < 2 y)					
	Case-control	N: 44 (among 2-12 y)					
Hepatitis A virus	Case-control	N: 77		N: 77 (wheeze + asthma)			↓ : 204
	Cross-sectional			↓ : 204			N: 204
Hepatitis B virus	Cross-sectional			N: 204			N: 204
Hepatitis C virus	Cross-sectional			N: 204			N: 204
Herpes	Cohort			↓ : 292			
Herpes simplex	Cross-sectional				N: 93		
Herpes simplex virus type 1	Cross-sectional			↓ : 204			
Herpes simplex virus type 2	Cross-sectional			N: 204			
Measles	Cohort			N: 202	N: 205		N: 204
	Case-control	N: 77, 206		↓ : 77 (< 3 y, wheeze + asthma)			↑ : 207
	Cross-sectional			N: 77 (> 3 y, wheeze + asthma)	↑ : 207		
	Case-control			↑ : 207	N: 93		
Rubella	Case-control	N: 77, 206		N: 77 (wheeze + asthma)			
	Cross-sectional				↓ : 93		
Epstein-Barr virus	Cohort						N: 208 (suspected)
Mumps	Case-control	N: 208					
Varicella	Cohort	N: 77, 206		N: 77 (wheeze + asthma)	N: 66		
Bacterial infections	Case-control	N: 77, 206		N: 77 (wheeze + asthma)			
Chlamydia pneumoniae	Cohort	N: 202		N: 202	N: 209		↓ : 209
	Cohort			↓ : 209			
	Cross-sectional			N: 118			
	Case-control	↑ : 210 (prior infection)		N: 210			
	Cross-sectional	N: 210 (acute infection)					
Pertussis	Case-control	N: 77		N: 77 (wheeze + asthma)			
Helicobacter pylori	Case-control	N: 77		N: 77 (wheeze + asthma)			
Salmonellosis	Cohort	↓ : 211		↓ : 211			↓ : 211
Scarlet fever	Case-control	N: 207					
Geohelminth	Cross-sectional	↓ : 212 (exercise-induced)					
	Case-control	N: 170, 212		N: 129	N: 212		N: 212
Helminth	Cross-sectional						
Malaria	Case-control			N: 213			↑ : 58
Hookworm	Case-control						N: 58
Ascariis	Cross-sectional			↑ : 214			N: 58
	Case-control						↓ : 28
Worm	Cross-sectional						
Toxocara	Case-control						
Trichuris	Case-control			N: 215			↑ : 58

Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
Isoxsuprine	Case-control			
Aspirin	Case-control			
Hormone replacement therapy	Cross-sectional	† : 18, 226	† : 198 (during pregnancy) N: 225	† : 226
Oral contraceptive	Cohort	† : 80 (asthma or wheezing), 227 (without asthma) ‡ : 227 (with asthma) N: 18	N: 80	
Paracetamol	Cross-sectional		N: 18, 228	N: 228
Salicylate	Case-control		† : 225	
Trimethoprim/co-trimox.	Case-control		N: 198 (during pregnancy)	N: 223
Medical/health related factor				
Admitted to hospital for infection	Cohort			
Visits to the GP in previous year	Case-control		† : 8	N: 66
Referral/hospitalization in previous year	Case-control		N: 8	
Blood pressure	Cross-sectional			
Heart rate	Cross-sectional			
Catch-up growing	Cohort		N: 97	
Child care/day care	Cohort		N: 40 (in first 3 mo) † : 229	† : 66 (before 6 mo)
Child psychological risk	Cohort		N: 57	
Neonatal hospital admission	Cross-sectional	† : 92	N: 22	
Expulsion of intestinal worms	Cohort		† : 61	† : 95 (diastolic) N: 95 (systolic) † : 95 (DD + reported)
Physical examination	Cross-sectional		N: 230	
Life events	Case-control		N: 230	
Life satisfaction	Cohort		N: 230	
Stress	Cross-sectional	† : 15	N: 230	N: 61
Neuroticism	Cohort		N: 230	
Extroversion	Cross-sectional		N: 230	
Nitric oxide levels in exhaled air	Cross-sectional		† : 230 (women) N: 230 (men)	
Early age at menarche	Cohort	N: 231	N: 230	
Number of pregnancies	Cohort		† : 231	
Number of live births	Cross-sectional	N: 60	† : 227	
Mechanical ventilation	Cross-sectional	N: 60	N: 60	N: 60
Threatened abortions	Cohort		N: 97	† : 60 (allergic conjunctivitis)
Total IgE	Case-control		N: 198	
Specific IgE	Cohort	† : 79, 232	† : 229, 233 (at 10 y; in cord serum) N: 233 (at 4 y; in cord serum)	† : 43 N: 79
Mite, cockroach, cat, dog, egg, milk, soy, wheat, fish, or peanut	Case-control	† : 44		
Mite, cockroach, cat, or dog	Case-control	† : 44		
Ascaris lumbricooides	Case-control	N: 44		
Timothy grass	Cohort		† : 42	

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Factors	Design	Wheeze	Outcome	
			Asthma	Allergic rhinitis (Hay fever)
Chlamydia pneumoniae	Case-control		† : 234 (self-reported)	
Car dander	Cross-sectional		† : 19	
Cladosporium	Cross-sectional		† : 19	
Dermatophagoides pteronyssinus	Cross-sectional		† : 19	
Food	Case-control		† : 47 (grass pollen asthma)	
IgG	Cohort	N: 232	N: 234 (current)	
Sensitization (skin prick test)				
Alternaria	Cohort		N: 235	N: 235
Animal	Case-control		† : 47 (grass pollen asthma)	N: 235
Cat	Cohort		N: 235	† : 235
Cladosporium herbarum	Cohort		N: 235	N: 235
Cod	Cohort		N: 235	N: 235
Cockroach	Cross-sectional	† : 170	N: 170	N: 235
Dog	Cohort		N: 235	N: 235
Egg	Cohort		N: 235	† : 235
Grass pollen	Cohort		N: 235	† : 235
Milk	Cohort		N: 235	N: 235
Mites	Cohort		† : 235	N: 235
Molds	Case-control		† : 47 (grass pollen asthma)	
Peanut	Case-control		N: 47 (grass pollen asthma)	
Soya	Cohort		N: 235	† : 235
Wheat	Cohort		N: 235	N: 235
Dermatophagoides pteronyssinus	Cross-sectional	N: 170	† : 170	
Dermatophagoides pteronyssinus, cockroach, cat, Alternaria tenuis, mixed grasses and mixed trees	Cohort			
Birch, limothy, mugwort, cat, dog, horse, Dermatophagoides pteronyssinus, Dermatophagoides farinae, Cladosporium, and Alternaria	Cohort	† : 32	† : 32	
Silk	Cross-sectional		† : 236	
Reported food intolerance	Cohort		† : 83 (reported)	
Blood test			N: 83 (DD)	
Lead level	Cohort			
Dichlorodiphenyldichloroethylene	Cohort	† : 238 (cord serum)	N: 237	
HDL cholesterol	Cross-sectional		N: 239	N: 239
Estradiol	Case-control		† : 240 (serum)	† : 240 (serum)
Haemoglobin	Case-control		N: 241 (serum at early pregnancy)	N: 241 (serum at early pregnancy)
Ratio of progesterone/estradiol	Cohort		N: 43	
Breast milk	Case-control		N: 241 (serum at early pregnancy)	N: 241 (serum at early pregnancy)
Progesterone	Case-control		N: 241 (serum at early pregnancy)	N: 241 (serum at early pregnancy)
soluble CD14	Cohort		† : 242 (without maternal atopy)	
			N: 242 (with maternal atopy)	

Factors	Design	Outcome		
		Wheeze	Asthma	Atopic dermatitis Allergic rhinitis (Hay fever)
Others				
Oil-fire smoke (Gulf War)	Cross-sectional		1 : 243	
Parenting difficulties	Cohort		1 : 229	
Source of water	Cohort			
(Well vs piped)	Case-control			N: 58
(River vs piped)	Case-control			↓ : 58
(Spring vs piped)	Case-control			↓ : 58

↑ : significant positive association

↓ : significant inverse association

N: not statistically significant

DD: Doctor-diagnosed

Numerals in columns indicate reference numbers.

between pet ownership and allergic diseases, but the conclusions were contradictory. Several studies reported that pet ownership was associated with a decreased risk and prevalence of allergic diseases. In an Australian cohort study, having had a cat in childhood protected against adult asthma, irrespective of the presence of a cat in adulthood.¹⁶² Age at the first exposure to pets or the critical period (*i.e.* the time window of immune maturation) might relate to the development of allergies. Some cross-sectional studies showed inverse associations between contact with a pet or pets and the prevalence of allergic diseases.^{51,169,172} These findings may reflect pet avoidance because of allergic diseases in the family. A Swedish study showed a decreased prevalence of wheeze, asthma, and rhinitis among children exposed to pets soon after birth: crude ORs for wheeze, asthma, and rhinitis were 0.86 (95% CI: 0.78–0.95), 0.82 (95% CI: 0.69–0.98), and 0.78 (95% CI: 0.69–0.88), respectively.¹⁶⁸ However, in that study, adjustment for pet avoidance apparently changed the results: a positive association between exposure to pets at the time of birth and the prevalence of allergic diseases was observed. Adjusted ORs for wheeze, asthma, and rhinitis were 1.13 (95% CI: 1.01–1.26), 1.51 (95% CI: 1.23–1.84), and 1.05 (95% CI: 0.91–1.21), respectively.¹⁶⁸ A potential selection bias should be considered when interpreting results of the association between pet ownership and allergic diseases, if avoidance behaviour has not been dealt with properly. A parental history of allergy also might affect the relation between exposure to pets and allergic disorders in offspring. A birth cohort study in Finland found an inverse association of dog ownership with wheeze among children without parental asthma, but not among those with parental asthma.¹⁶³

DAMPNESS

Epidemiological studies of dampness and allergic diseases have employed a variety of definitions for indoor dampness such as water leakage, visible mould, and condensation on windows. Five cohort studies,^{32,43,75,158,176} 4 case-control studies,^{45,128,148,177} and 4 cross-sectional studies,^{6,86,129,178} examined the relation between dampness and allergic diseases. One half found positive associations between indoor dampness and the risk and prevalence of allergic disorders while no significant associations were observed in the remaining half.

HOUSE DUST ALLERGENS

A number of investigators have examined whether house dust allergen exposure contributes to the development of allergic diseases. In many communities, house dust mite (designated Der fl for one species of mite and Der p1 for another) is the principal allergen. Eight reports analyzed the association between house dust mite allergens and allergies. Among children in

Australia, Der p1 exposure was related to an increased risk of asthma (adjusted OR = 2.04, 95% CI: 1.08–3.86).⁶ Most of the studies reported no associations with house dust mite. A few, however, found that exposure to cockroach allergen (Bla g1) was positively associated with the risk and prevalence of wheeze and asthma.^{33,56,90} The evidence is likely to be insufficient to infer the presence or absence of a relationship between indoor allergen exposure and allergic diseases.

INFECTION

It has been argued that bacterial and viral infections during early life direct the maturing immune system toward Th1, which counterbalances the proallergic responses of Th2 cells. Epidemiological studies that have tested the association between infection and allergic disorders fall into 2 groups: those relating to specific infections, and those assessing more generally the burden of infectious illness.

A positive association between the number of infectious diseases and atopic dermatitis was found in a Danish birth cohort study (adjusted OR = 1.33 [95% CI: 1.16–1.53] for 3 or more infectious diseases *vs* no infection).⁶⁶ A German birth cohort showed a strong positive dose-response association of the number of lower respiratory tract infection with the risk of wheeze (adjusted OR = 3.97 [95% CI: 2.06–7.64] for ≥ 4 infections *vs* ≤ 1 infection) and asthma (adjusted OR = 4.46 [95% CI: 2.07–9.64] for ≥ 4 infections *vs* ≤ 1 infection) whereas there was an inverse relationship between the number of viral infectious diseases and the risk of asthma (adjusted OR = 0.16 [95% CI: 0.05–0.54] for ≥ 8 viral infections *vs* ≤ 1 viral infection).²⁰² In several case-control and cross-sectional studies, there were not only no material associations between infectious illness and allergic diseases but also positive relationships with infectious diseases such as respiratory infection and ear infection. Inverse relationships between infection with hepatitis A, herpes, measles, and rubella virus and the risk and prevalence of allergic disease were observed in several investigations, whereas a cross-sectional study in Finland found a strong positive association between measles and asthma (adjusted OR = 1.67, 95% CI: 1.54–1.79), atopic dermatitis (adjusted OR = 1.32, 95% CI: 1.27–1.36), and allergic rhinitis (adjusted OR = 1.41, 95% CI: 1.33–1.49).²⁰⁷

Current evidence regarding associations with common specific and non-specific infectious illness neither refute nor support the hygiene hypothesis.

VACCINATION

During the past few decades, mass immunizations have increased, leading to the hypothesis that certain vaccines may increase the risk of allergic disorders. There are theoretical reasons to suspect a possible association of vaccination with allergies. One possible

mechanism is a direct impact on the immune system that leads to raised immunoglobulin E levels.^{217,218} Another possibility is that vaccination reduces the burden of childhood illness. One case-control study reported a significant reduction in the risk of atopic dermatitis associated with DTP (adjusted OR = 0.66, 95% CI: 0.49–0.89) and oral poliovirus vaccine (adjusted OR = 0.62, 95% CI: 0.45–0.85).⁵⁸ One cohort study reported that smallpox vaccination was associated with a decreased risk of asthma, but not allergic rhinitis.²¹⁹ Several cohort studies demonstrated a positive association between vaccination, such as DPPT, MMR, and hepatitis B virus vaccine, and asthma and atopic dermatitis.^{199,216–218} We have insufficient evidence regarding the association between vaccination and allergic diseases.

DIETARY FACTORS

Studies regarding the relation between dietary intake and allergic diseases were limited compared with investigations with respect to various environmental factors and allergy (Table 2). Among Italian children, intake of citrus fruit and kiwi fruit were protective factors for wheeze (adjusted OR = 0.66, 95% CI: 0.55–0.78 for those eating fruit 5–7 times per week compared with less than once per week) and rhinitis (adjusted OR = 0.72, 95% CI: 0.63–0.83).²⁴⁷ One cohort study reported that daily consumption of butter was associated with a lower risk of wheeze and asthma, whereas no associations were observed with the consumption of fruit, vegetables, margarine, or fish.³⁰ For margarine intake, two cross-sectional studies found a positive association with allergic rhinitis.^{249,250}

There were 13 studies on the relation between nutrient intake and allergic diseases. One case-control study showed that alpha-linolenic acid intake was positively associated with asthma (adjusted OR for comparison of the fourth with the first quartile = 3.35, 95% CI: 1.29–8.66), but not wheeze.²⁵⁷ Another case-control study found no association between intake of alpha-linolenic acid and asthma.²⁴⁸ In contrast, 2 cross-sectional studies observed that alpha-linolenic acid was associated with a decreased prevalence of atopic dermatitis and allergic rhinitis.^{249,258} The ratio of n-6 to n-3 polyunsaturated fatty acid as well as that of linoleic acid to alpha-linolenic acid intake were not consistently related to allergic diseases. Although several studies investigated the relationship of mineral intake to allergies, most found no associations. Two case-control studies indicated an inverse association between intake of vitamins C and E and asthma.^{48,244} On the other hand, maternal vitamin C intake during pregnancy was positively associated with the development of wheeze and atopic dermatitis during early childhood: adjusted OR the for fifth quintile was 3.00 (95% CI: 1.47–6.12) for wheeze, and 1.56 (95% CI: 0.99–2.45) for atopic dermatitis.²⁵⁴ With re-

Table 2 Dietary factors and allergic diseases

Factors	Outcome		
	Design	Wheeze	Asthma
Dietary intake			
Total energy/calories	Case-control N: 84		
Brown bread	Case-control Cohort	N: 244 ↓ : 30	
Miso	Cross-sectional		N: 245
Miso soup	Cross-sectional		N: 245
Soy product	Cross-sectional		↓ : 245
Boiled soybeans	Cross-sectional		N: 245
Tofu	Cross-sectional		N: 245
Tofu products	Cross-sectional		N: 245
Fermented soybeans	Cross-sectional		N: 245
Vegetable	Case-control		N: 245
Green, leafy vegetables	Cross-sectional		
Fruit	Case-control		↓ : 48
	Case-control		N: 20
	Case-control		↑ : 58
Fruit and vegetable	Cross-sectional	N: 246	
	Cross-sectional		
Citrus/kiwi fruit	Cohort	↓ : 247	
	Cross-sectional	↓ : 247	
Fish	Case-control		N: 248
Meat	Case-control		N: 248
Meat products	Case-control		N: 248
Butcher's meats	Cross-sectional		N: 71
Chicken, meat, or fish	Cross-sectional		N: 20
Liver	Cross-sectional		↑ : 71
Eggs	Case-control		N: 248
	Cross-sectional		N: 20
Milk	Case-control		↓ : 48
	Case-control		N: 248
	Cross-sectional		N: 20
Semi-skimmed milk	Cross-sectional		N: 30
Unpasteurized milk	Cohort	N: 30	
Whole milk	Cross-sectional		N: 68
Milk products	Cohort	N: 30	
Cheese	Case-control	↓ : 30	
Butter	Cohort	↓ : 30	
	Cohort	↑ : 30 (current)	
	Cohort	N: 30 (ever)	
Margarine	Case-control		N: 248
	Cross-sectional		
	Cohort	N: 30	
	Case-control		↑ : 248
	Cross-sectional		
Margarine only (vs exclusive butter)	Cross-sectional		N: 249
Margarine and butter (vs exclusive butter)	Cross-sectional		N: 249

Atopic dermatitis

Allergic rhinitis (Hay fever)

Environmental Factors and Allergy

Factors	Design	Outcome	
		Wheeze	Allergic rhinitis (Hay fever)
Vegetable oils	Case-control Cross-sectional		
Alcohol	Cohort Case-control		
Carbonated beverages	Cross-sectional		
Deep-fried foods	Cross-sectional		
Hamburger	Cross-sectional		
Takeaways	Cross-sectional		
Early introduction of cereal into children's diets (before age of 3 mo)	Case-control		
Intake of nutrients			
Carbohydrates	Case-control		
Fiber	Case-control		
Total protein	Case-control		
Soy protein	Cross-sectional		
Total fat	Case-control		
Calcium	Cross-sectional		
Magnesium	Case-control Case-control		
Iron	Case-control		
Sodium	Case-control		
Zinc	Case-control		
Yttrium	Case-control		
Selenium	Case-control		
Vitamin A	Case-control		
Vitamin D	Case-control		
Vitamin E	Cohort Case-control		
Vitamin K	Case-control		
Vitamin C	Cohort Case-control		
Thiamine	Cross-sectional		
Riboflavin	Case-control		
Niacin	Case-control		
Vitamin B6	Case-control		
Vitamin B12	Case-control		
Folic acid	Case-control		
Antioxidant	Case-control		
Catechins	Case-control		
Flavones	Case-control		
Flavonols	Case-control		
Daidzein	Cross-sectional		
		Asthma	Allergic rhinitis (Hay fever)
		N: 248	† : 249 (women) N: 249 (men)
		N: 251 N: 8	
		N: 252	N: 252
		† : 71 N: 252	N: 252
		N: 252 † : 47	N: 252
		N: 244 N: 48 N: 244	N: 245
		N: 248	† : 249
		N: 48, 244 † : 48 N: 244	
		N: 244 † : 48 N: 244	
		N: 244 N: 244 N: 244	
		N: 244 † : 244	
		N: 244, 253 (supplementation)	
		† : 48, 244 N: 244	N: 254 (during pregnancy)
		† : 244 N: 48 N: 10 N: 244	† : 254 (during pregnancy)
		N: 244 N: 244 N: 244	
		N: 244 N: 244 N: 84 N: 255 N: 255	
		N: 255	† : 245

Factors	Design	Outcome		
		Wheeze	Asthma	Allergic rhinitis (Hay fever)
Genistein	Cross-sectional			
Saturated fatty acids	Cross-sectional			
Palmitic acid	Case-control		↑ : 256 N: 248	↑ : 245 N: 249
Stearic acid	Case-control		N: 248	
Monounsaturated fatty acids	Cross-sectional		↑ : 256 N: 248	↑ : 249 N: 249
Palmitoleic acid	Case-control		N: 248	
Oleic acid	Case-control	N: 257	N: 257 ↑ : 248	
Alpha-Linolenic acid	Cross-sectional	N: 257	↑ : 257 N: 248	↑ : 249
Eicosapentaenoic acid	Case-control	N: 257	N: 248, 257	
Docosahexaenoic acid	Cross-sectional		N: 248	
Linoleic acid	Case-control		N: 248	
Arachidonic acid	Cross-sectional		N: 248	N: 249, 258
Trans fatty acid	Cross-sectional			N: 249, 258
Polyunsaturated/ saturated ratio	Cohort			N: 249
n-6/n-3	Cross-sectional	N: 257	↑ : 84 N: 248, 257	
Linoleic acid/Alpha-Linolenic acid	Case-control	↓ : 257	↓ : 257	N: 249
Arachidonic acid/Linoleic acid	Cross-sectional	↑ : 257	↑ : 257 N: 244	N: 249
Lipids	Case-control			
Breastfeeding	Cohort			
Breastfeeding	Cohort	↓ : 30, 31, 37 (wheeze; 3-13 y) N: 37 (wheeze; < 3 y)	↑ : 37, 57 (breastfeeding at 3, 6, and 9 mo; partial breastfeeding at 9 and 12 mo), 193 ↓ : 30, 40, 242 (without maternal atopy), 259 N: 57 (breastfeeding at 12 mo; partial breastfeeding at 3 and 6 mo), 242 (maternal atopy), 260	N: 76, 125 (hay fever and/or asthma)
Formula feeding	Cohort		↑ : 84 ↓ : 239 N: 26, 93, 263	↓ : 26 N: 93, 239, 262 N: 125 (hay fever and/or asthma)
Measurements				
In breast milk				
n-3	Cohort		N: 264	
Alpha-Linolenic acid	Cohort		N: 264	
Eicosapentaenoic acid	Cohort		N: 264	
Docosahexaenoic acid	Cohort		↓ : 264 N: 264	

spect to traditional Japanese food, a cross-sectional study observed that consumption of soy and isoflavones was significantly associated with a decreased prevalence of allergic rhinitis among Japanese pregnant women.²⁴⁵

Overall, epidemiological evidence on the association of food and nutrient intake and allergic disease was not sufficient to draw any conclusions.

BREASTFEEDING

Twenty-two studies were identified with investigation on whether breastfeeding practice was associated with allergic diseases. While several investigations showed a protective effect of breastfeeding on wheeze and asthma, others failed to show such a beneficial relationship. In several studies, positive associations between breastfeeding and asthma and atopic dermatitis were observed. One cohort study found that the duration of breastfeeding was inversely associated with the risk of asthma in children without a maternal history of atopic diseases: adjusted OR was 0.35 (95% CI: 0.18–0.66) in children exclusively breastfed 9 or more months in comparison with children who had never been breastfed.²⁴² On the other hand, another cohort study found an increased risk of atopic dermatitis associated with breastfeeding in children without a parental history of allergic diseases (adjusted OR for exclusive breastfeeding for at least 4 months compared with less than 4 months = 1.29, 95% CI: 1.06–1.55).²⁶¹ These results should be interpreted with caution. The main factor that may have induced bias is inherent in the breastfeeding practice itself, that is, it is the personal choice of mothers whether or not to breastfeed. This choice is subject to several influences, including previous knowledge of allergic diseases or allergic diseases in the family and perceived benefits of breastfeeding or not breastfeeding.

The beneficial influence of breastfeeding on allergic diseases may be attributed to several possible mechanisms. Breast milk stimulates intestinal colonization with specific bacterial flora. Gut colonization induces the production of Th1 cytokines, which counterbalances Th2 activity. On the other hand, a possible detriment is protection against infections that can be important stimuli for the development of allergic diseases. Breastfeeding might reduce the effect of bacteria on the immune system, so that the infant does not fully develop mature immune response mechanisms.²⁶⁷

The evidence is insufficient to infer a causal relationship between breastfeeding and allergic diseases. Further research is needed to achieve a greater understanding.

FAMILY HISTORY

A summary of the results of investigation of the association between a family history of allergy and aller-

gic diseases in offspring is shown in Table 3. Most of the studies showed that allergic diseases were likely to have a strong genetic component. The increased risk seemed to be present no matter which type of allergic diseases were in family members. No study showed an inverse relation with the presence of a family history of allergic diseases. Atopic heredity may influence susceptibility to allergic diseases. This indicates a positive association of family history of allergies and allergic disorders with such conditions in offspring.

DISCUSSION

In the present paper, we reviewed 263 studies on the associations of various environmental factors with wheeze, asthma, atopic dermatitis, and allergic rhinitis. Because to our knowledge there has not been such an extensive review on a wide range of environmental factors in relation to allergic disorders, including dietary intake and family history, this report may be useful for future research on this area.

Although a number of reports addressed the effect of environmental factors on allergic diseases, evidence is conflicting. The wide variation in results among the many epidemiological studies may be attributed, at least in part, to the limitation of environmental measurements using indirect approaches or surrogates. In addition, interpretations of findings were limited because most were case-control studies or of a cross-sectional nature which could not infer a causal relationship. However, such investigations are quite useful and much less costly, take much less time, and are more suitable for hypothesis generation than other methodologies.

It is important to note that findings should be interpreted and applied with great caution. First, the exclusion of literature in languages other than English could have introduced publication bias. Second, cited studies used various defined diagnostic criteria (e.g. doctor-diagnosed asthma, self-reported asthma, and according to questionnaires filled out by parents). Variations in outcome based on a variety of such diagnostic criteria would result in discrepant results. Third, we summarized the results without differentiating the age of subjects. The impact of risk factors among children may be different from that among adults due to age-specific differences in immune maturation or other potentially antiallergic effects. Lastly, many epidemiological investigations in terms of allergic disorders were not included in this review because our review consisted of a search of one database (PubMed) using only one set of search terms, and we did not perform additional searches from reference lists of the articles that fulfilled our inclusion criteria. Moreover, a number of reports regarding relationships with outcomes such as atopy, results of skin prick test, serum IgE levels, and bronchial hyperresponsiveness were not taken into consideration

Table 3 Family history and allergic diseases

Factors	Design	Wheeze	Outcome		
			Asthma	Atopic dermatitis	Allergic rhinitis (Hay fever)
Family history					
Asthma	Cohort	↑: 32 N: 81	↑: 32, 135		
	Case-control	↑: 6	↑: 18, 19, 55, 136		
	Cross-sectional	↑: 18, 50, 55, 92 N: 25		N: 27	
Atopy or allergy	Cohort	N: 81			
	Case-control	↑: 44 (among < 2 y)			
	Cross-sectional	N: 44 (among 2-12 y) ↑: 9	↑: 9 (ever), 136 N: 9 (DD)		N: 9
Asthma/allergy	Case-control		↑: 48		
Atopic dermatitis	Cross-sectional			↑: 27	
Allergic rhinitis	Cross-sectional			N: 27	
Chronic bronchitis emphysema	Cross-sectional			N: 27	
Household tuberculosis	Cross-sectional	N: 9	↑: 9		↑: 9 (current, ever) N: 9, 9 (DD)
Parental history					
Allergy or atopy	Cohort		↑: 74, 118 N: 41	↑: 43	↑: 125 (hay fever and/or asthma)
	Case-control			↑: 61	
	Cross-sectional		↑: 24, 41, 136	↑: 24	↑: 24 N: 29
Asthma	Case-control		↑: 61		↑: 61
	Cross-sectional	↑: 16	↑: 93, 136		N: 16
Asthma and/or allergies	Case-control		↑: 167		
	Cross-sectional		↑: 51		
Atopic dermatitis	Cross-sectional	N: 16			N: 16
Rhinitis or hayfever	Cohort				↑: 76
	Cross-sectional	N: 16	↑: 93	↑: 16	↑: 16
Maternal history					
Allergy or atopy	Cohort	N: 30	↑: 30, 38	↑: 43	↑: 26
	Cross-sectional	N: 26		N: 26	
Asthma	Cohort	↑: 31, 186 (persistent and late onset wheezing)	↑: 39, 40, 259		
	Case-control	N: 33, 56, 164 (transient wheezing)	↑: 46, 84, 167	N: 43	
	Cross-sectional	↑: 9, 14, 17	↑: 9, 52, 132	↑: 16	↑: 9, 16
Atopic dermatitis	Cohort				
	Case-control			↑: 43	
	Cross-sectional	↑: 16	↑: 46	↑: 16, 93	↑: 16