A 44 year old nurse was referred because of the recent onset of rhinitis and asthma,occurring at work. She had never complained about work related respiratory symptoms. In the past year she had had two attacks of rhinitis and asthma clearly related to the work environment. Family history was negative for atopic diseases and she had never complained about work related respiratory symptoms. She was instructed to avoid contact with Fissan Powder and to check the composition of similar products before using them. At present she is well and has not had any further asthma episodes.

DISCUSSION
The overall occurrence of allergic reactions to food is less frequent in adults than in children. In particular, allergy to milk is common in children under 3 years of age, but is relatively rare in adults. The most common clinical pictures of food allergy symptoms are urticaria-angioedema and other skin diseases or gastrointestinal symptoms; the respiratory tract is less frequently involved and anaphylaxis is rare. Nevertheless, casein and other milk derived proteins can be present in a number of commercial products, and may even be used in geriatric patients.

In adults, the most frequently responsible allergen, whereas casein is responsible for cows’ milk allergy in adults. In adults, the reactions to cows’ milk proteins are mostly cutaneous or respiratory, usually in a sensitised individual. In children, the reactions are more often gastrointestinal or cutaneous. The overall occurrence of allergic reactions to food is less frequent in adults than in children. In particular, allergy to milk is common in children under 3 years of age, but is relatively rare in adults. The most common clinical pictures of food allergy symptoms are urticaria-angioedema and other skin diseases or gastrointestinal symptoms; the respiratory tract is less frequently involved and anaphylaxis is rare. Nevertheless, casein and other milk derived proteins can be present in a number of commercial products, and may even be used in geriatric patients.

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gastrointestinal and are usually the consequence of a previous gastrointestinal sensitisation. In our patient, the clinical manifestations were respiratory and appeared only after exposure to a powder containing casein had begun. This would suggest that sensitisation through the respiratory tract had occurred. However, a skin positivity to milk was present and one episode of milk intolerance was reported, despite the open feeding being negative. Therefore, as we had available no previous data or serum samples, it is not possible to establish whether the exposure to airborne casein caused both sensitisation and symptoms or only caused symptoms in a previously sensitised patient. Nevertheless, we can speculate, in the present case, that the inhalatory threshold for symptoms is much lower than the oral one. Casein is the only antigen contained in the dermatological powder that can evoke a specific IgE recognition (confirmed by skin test and RAST positivity); an IgE reaction against silica or zinc oxide or magnesium nitrate is difficult to hypothesise and has never been described.

At variance with other reported cases of occupational milk allergy, in this case the presence of milk proteins at the workplace was not known or suspected, and a widely used dermatological preparation was the hidden allergen source. This further highlights the fact that in medical environments, great attention must be paid even to “innocent” products.

<table>
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<tr>
<th>Main messages</th>
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<tr>
<td>• Respiratory allergy to milk proteins is not common in adults, and in only in few cases is it related to the work environment.</td>
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<td>• Common pharmaceutical preparations may behave as hidden sources of airborne milk proteins and provoke severe respiratory symptoms.</td>
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<th>Policy implications</th>
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<td>• Greater attention in general should be paid to the possible hidden sources of sensitising/triggering allergens in the work environment. A correct diagnosis and the subsequent allergen avoidance/removal are critical: they allow patients to keep working, with a favourable socioeconomic outcome.</td>
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</table>

**REFERENCES**


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