



## Effects of Eggplant Food Allergies and their Impact on Daily Routine

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### DESCRIPTION

There have been concerns about the prevalence of Food Allergy (FA) in the general public, particularly among patients and their families, medical personnel, educational institutions, food manufacturers and distributors, and governmental organizations. Food allergies typically affect infants and young children. Food allergies typically manifest in vulnerable infants in the same order as when the foods were first introduced to the diet. As a result, a country's pattern of food allergy incidence greatly depends on the prevalent eating habits within a particular population. All nations have the same allergies to milk, eggs, and seafood. However, there are a few distinct and rare food allergies that were originally reported in Asia and are not common elsewhere. Bird's nest, buckwheat chickpea, black gram, lima bean, rice, and sesame are some of these meals. Additionally, food allergy sensitization emerges in the order of exposure. Because the thresholds of reactions to certain food allergens and other allergens vary within and across persons as well as over time, there is a wide range in the allergenicity (i.e., the ability of an allergen to generate allergic reactions) of substances.

In a meta-analysis research, the self-reported prevalence of food allergy ranged from 3 to 15% for any food. Despite the fact that roughly one-third of people worldwide believe they have food allergies, the prevalence of food allergies is really estimated to be 2%-4% in adults and 6%-8% in children, as validated by appropriate diagnostic criteria.

Allergy to cow's milk protein is the most prevalent during the first year of life, with a 1-year incidence of 2%-3%, followed by allergy to eggs and fish, which most frequently occurs before the age of 2, while allergy to fruits, vegetables, and legumes emerges after the second year and is frequently linked to inhalant allergy to grass, weed, and tree pollen. These pollen-related cross-reactivity's to foods, which affect about 50% of people with pollen allergies in late childhood and adolescence, are the most prevalent type of food allergy (the oral allergy syndrome).

The lack of scientific information on the prevalence and clinical characteristics of food allergies, despite the fact that Asia is home to the majority of the world's population, is primarily attributable to a lack of public awareness of the issue and the absence of significant, well-designed epidemiological studies. For a long time, it was assumed that Asia had a low prevalence of allergic illnesses, particularly food allergies. Recent research on the pattern of anaphylaxis and the significance of food triggers reveals that food is a significant contributor to life-threatening allergic reactions in Asia. Studies on food allergies in Asia often involve questionnaires given to people who have atopic disease and infrequently employ the presence of particular IgE or food challenges to confirm the allergy.

Numerous allergens have been discovered as a result of the widespread reporting of allergic reactions to eating solanaceous vegetables, such as potato, tomato, and bell pepper. The nightshade family's most economically significant vegetable, eggplant (also known as aubergine or brinjal *Solanum melongena* L.), is ranked 12th among the top vegetables in the world. It is a popular food in Asia and Europe and is mostly consumed as a cooked vegetable in the Indian subcontinent. It is also known as the "king of vegetables" and the "poor man's meat." Only a small number of case studies from Asia have described hypersensitivity reactions to eating eggplant. These reactions are thought to be caused by cross-reactivity with tomato, latex, and grass/weed pollens.

Although unpleasant effects from eating eggplant have frequently been reported in the Indian community, there are no thorough researches that can be used to determine how common allergic reactions to eggplant or other foods are. In this chapter, a random population in and around the city of Mysore in the Indian state of Karnataka is screened in an effort to determine the prevalence of eggplant allergy in relation to age and gender using self-reported case histories and allergy diagnostic tests (SPT and eggplant allergen-specific IgE).

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