ISAAC - International Study of Asthma and Allergies in Childhood in France

Head :Annesi-Maesano Isabella, UMRS 707 : Épidémiologie, systèmes d'information, modélisationÉpidémiologie des maladies allergiques et respiratoires EPAR

Last update: 09/05/2017 | Version: 1 | ID: 8272

				- 1
- 1	\sim r	ገ <i>ር</i>	١rc	ור
νп	-1		-1 6	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
$\overline{}$	•			24.0

Identification

Detailed name International Study of Asthma and Allergies in

Childhood in France

Sign or acronym ISAAC

CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation CNIL agreement

General Aspects

Medical area Pediatrics

Study of allergies

Health determinants Genetic

Lifestyle and behavior

Pollution

Social and psychosocial factors

Keywords skin test, air pollution, child, environment, allergy

Scientific investigator(s)

(Contact)

Name of the director Annesi-Maesano

Surname Isabella

Address 27, rue de Chaligny 75012 Paris

Phone +33 (0)1 44 73 84 49

Email annesi@u707.jussieu.fr

Unit UMRS 707 : Épidémiologie, systèmes d'information,

modélisationÉpidémiologie des maladies allergiques

et respiratoires EPAR

_		4.3
Orgar	: לור	ation
Oi gui	112	acioi

Institut national de la santé et de la recherche médicale -

Collaborations	
Participation in projects, networks and consortia	Yes
Details	During ECHRS paediatrics. The project involves six hospital departments (Clermont-Ferrand, Marseille, Bordeaux, Reims, Strasbourg, Paris) and three specialist teams: ? epidemiology team: Dr I. Annesi-Maesano, G. Debotte, INSERM U 472), ? paediatric team: Prof. P. Scheinman, Dr. C. Karila, Dr. E. Paty (Necker-Enfants Malades Hospital, Paris); ? metrology team: M. Squinazi, Y. Le Moullec, M. Laurent (laboratoire d'hygiène de la ville de Paris [The City of Paris Hygiene Laboratory]).
Funding	
Funding status	Public
Details	- National Institute for Healthcare and Medical Research - Ministry of Employment and Solidarity - Mutuelle Générale de l'Éducation Nationale - Agency for the Environment and Energy Management, ADEME/PRIMEQUAL 96
Governance of the database	
Sponsor(s) or organisation(s) responsible	Institut national de la santé et de la recherche médicale - Inserm
Organisation status	Public
Additional contact	
Main features	
Type of database	
Type of database	Study databases
Study databases (details)	Not-repeated cross-sectional studies (except case control studies)
Database recruitment is carried out by an intermediary	A population file
Database recruitment is carried out as part of an interventional study	No

Additional information regarding sample selection.

Sample of children with average age of 10.4 (plus or minus standard deviation), plus or minus 0.7 years, from 108 schools and 401 classes.

Database objective

Main objective

To establish a global map of the prevalence of childhood allergic diseases and to determine the risk factors for these diseases by comparing contrasting population groups based on a particularly strong or weak prevalence.

The ISAAC study consists of three phases:
The objective of Phase I is to assess the prevalence of asthma, allergic rhinitis and eczema by using a simple questionnaire and possible video questionnaire (for asthma), in representative samples of children from two age groups: 13-14 years old (obligatory for all centres) and 6-7 years old (optional).

Phase II aims to identify the risk factors and treatment procedures for allergic diseases through a more detailed study of selected population groups with relatively high or low prevalence rates suggested during Phase I.

Phase III aims to assess the trends in allergy prevalence.

As such, the Phase I protocol will be repeated in areas that participated in this phase.

Inclusion criteria

- primary school children
- between 8 and 13 years old

Population type

Age Childhood (6	to 13	years)
------------------	-------	--------

Population covered General population

Gender Male Woman

Geography area International

Detail of the geography area One hundred and fifty-six centres in 56 countries: North America, Central America, South America,

Western Europe, Central Europe (Albania, Germany, Estonia, Spain, France, Greece, Iceland, Italy, Norway, Netherlands, Portugal, U.K., Sweden), the Baltic States, Far East, Western Pacific, Anglophone Africa, Francophone Africa, Southeast Asia, East Mediterranean countries and Oceania. In France

	(primary schools in six French cities: Créteil, Clermont-Ferrand, Bordeaux, Marseille, Reims, Strasbourg).
Data collection	
Dates	
Date of first collection (YYYY or MM/YYYY)	03/1999
Date of last collection (YYYY or MM/YYYY)	10/2000
Size of the database	
Size of the database (number of individuals)	[1000-10 000[individuals
Details of the number of individuals	Monde/World: 721 601 France: 7 432
Data	
Database activity	Data collection completed
Type of data collected	Clinical data Declarative data Paraclinical data Biological data
Clinical data (detail)	Medical registration
Details of collected clinical data	Allergy assessment: skin prick tests, Williams standardised skin test (eczema), free running test, with peak respiratory flow (bronchial hyperreactivity).
Declarative data (detail)	Paper self-questionnaire
Details of collected declarative data	Parent questionnaire assessing the child's personal and family history, respiratory symptoms and domestic environment (allergen exposure, passive smoking, psychosocial factors)
Paraclinical data (detail)	Anthropometric measurements (height, weight, hip contour , head circumference)
Biological data (detail)	urine and hair cotinine research (nicotine metabolite), inflammation and lead markers
Presence of a biobank	No

'	-
Procedures	
Data collection method	Pollutants measured in school yards and measurements collected by urban air quality monitoring networks: - SO2, FN, NOx, NO2, O3 and PM using collective measurements (city monitoring networks) (macroenvironment); - NOx, NO2, O3, VOC (formaldehyde) and PM using passive sensors within schools (microenvironment); - NO2, O3, COV. using individual badges as part of the panel (individual). Each centre can choose the protocol best suited to them. However, a minimum protocol was agreed at European level.
Participant monitoring	No
Links to administrative sources	No
Promotion and access	
Promotion	
Link to the document	http://erj.ersjournals.com/content/24/3/406.long
Link to the document	http://www.sciencedirect.com/science/article/pii/S03 35745708001342
Link to the document	http://www.annallergy.org/article/S1081- 1206%2810%2960598-4/abstract
Link to the document	http://www.resmedjournal.com/article/S0954-6111%2807%2900099-6/abstract
Link to the document	http://www.resmedjournal.com/article/S0954-6111%2806%2900221-6/abstract
Link to the document	http://www.sciencedirect.com/science/article/pii/S13 52231005010575
Link to the document	http://onlinelibrary.wiley.com/doi/10.1111/j.1365- 2222.2005.02336.x/abstract;jsessionid
Link to the document	http://onlinelibrary.wiley.com/doi/10.1111/j.1398- 9995.2005.00860.x/abstract
Link to the document	http://onlinelibrary.wiley.com/doi/10.1111/j.1365- 2222.2004.02002.x/abstract
Access	

Terms of data access (charter for data provision, format of data, availability delay)	Contact the scientist in charge
Access to aggregated data	Access on specific project only
Access to individual data	Access on specific project only