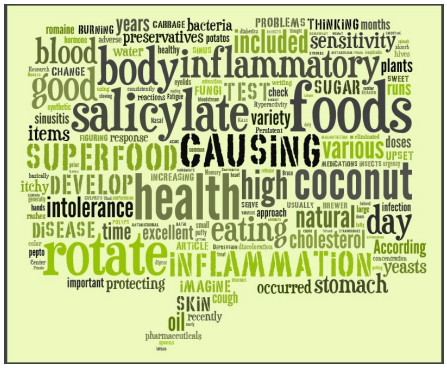

Salicylate Intolerance

Although salicylate intolerance has been known for over 100 years, it is still not widely recognised by the medical community. Salicylates, analgesics and anti-inflammatory drugs, particularly the non-steroidal anti-inflammatory drugs (NSAIDs), mainly used in rheumatology inhibit cyclooxygenase and reduce prostaglandin synthesis, which are involved in inflammation and pain. In intolerant individuals, there is also activation of a wide range of cells (basophils, eosinophils, macrophages, mast cells, platelets and lymphocytes). These cells play a central role in the symptoms experienced. The pattern of symptoms may depend on the relative numbers of cells involved. The effects of salicylates in food from plants or in industrially produced products are essentially the same. Please note that the adverse effect of salicylates here is different to the salicylates sensitivity that we see in children with behavioural issues.

The classical symptoms involve the respiratory tract:

- Rhinosinusitis
- Nasal and sinus polyps
- Bronchial asthma

Salicylates sometimes only trigger symptoms in the presence of underlying true allergies, a type of synergistic phenomenon.

The skin and gastrointestinal tract may also be affected by salicylate intolerance. This can lead to symptoms like urticaria, colitis or diarrhoea.

Symptoms of salicylates intolerance

Symptom	Frequency
Nasal polyps	5 - 30%
Bronchial asthma	10%
Polyps with asthma	20 - 30%
Rhinitis	5 - 10 %
Chronic intestinal inflammation	2 - 7%

Diagnosis

A history to determine a link between salicylate contact and the occurrence of symptoms is of primary importance. Sometimes a link can be established between asthma, swelling of the nasal mucous membranes and gastrointestinal symptoms with salicylate intake. Polyps in the nose and nasal sinuses grow slowly, however a diagnostic clue is the rapid and repeated recurrence after surgery to remove the polyps. The gold standard is the exposure or provocation test to salicylates. However this can only confirm rapid reactions to salicylates, such as asthma.

The Link to Histamine and Amines

People who are salicylate intolerant are also likely to develop an amine sensitivity or histamine intolerance. Histamine and amines occur naturally in a variety of foods. Some of the symptoms of amine intolerance are similar to salicylate intolerance. In fact around 70% of foods that are high in salicylate are also high in amines.

A comprehensive assessment and a supervised food elimination can bring effective relief.

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Taking the guesswork out of diagnosis