Comparison of Component Resolved Diagnosis (CRD) with skin prick test in respiratory allergy [36 cases] and Significance of CRD in Anaphylaxis [8 cases] & Chronic Urticaria with/without Angioedema [16 cases]

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Objective

In 36 cases of respiratory allergy, we examined the qualitative concordance between SPT and slgE as measured on the CRD (ALEX2) platform for the following allergen components: Der p 1, Der p 2 & Der p 23 (Dermatophagoides pteronyssinus) Dermatophagoides farinae (Der f 1 and Der f 2), Cynodon dactylon, Artemisia vulgaris, Alternaria alternata, Aspergillus fumigatus, Cladosporium herbarium.

(Comparison of kappa coefficient and p-value test for CRD Vs SPT)

(Correlation; r = 0 to 0.25 indicates poor or no correlation; r = 0.26 to 0.50 indicates fair correlation; r = 0.51 to 0.75 indicates good correlation and r = 0.71 to 1.0 indicates excellent or perfect correlation.)

- b) In 8 cases of anaphylaxis, CRD was performed. SPT is indicated only after 6 weeks of anaphylaxis, hence it could not be done.
- c) In 16 cases of Chronic spontaneous urticaria with/without angioedema, CRD was performed to detect species-specific and cross reactive allergen.

Demographic Characteristics of the Patients

SI. No		Parameter		n=60
	1	Age (yr, mean±SD)		34.08 ± 16.49
	2	Gender, n		
			Male	39
			Female	21
	3	Diagnosis, n		
			a) Respiratory allergy [AR+AA]	36
			b) Anaphylaxis	8
			c) CSU w/s angioedema	16

Material and Methods

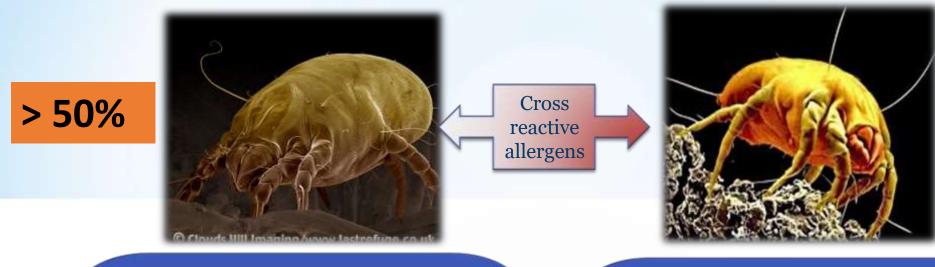
CRD

- The different allergens and components coupled onto the ALEX chip [117-Allergen Extract / 178- Components] were incubated with 0.5 mL of 1:5 diluted serum under shaking condition. Notably, the serum diluent contains a Cross-Reactive Carbohydrate Determinants (CCD) inhibitor.
- After incubation for 2 h, the chips are extensively washed, and anti-human IgE detection antibody (labeled with alkaline phosphatase) is added and incubated for 30 min.
- Following another cycle of extensive washing, the **enzyme-substrate** is added, and after a few minutes, the reaction is complete. The membranes are dried, and the intensity of the color reaction for each allergen spot is measured by a Charge Coupled Device (CCD) camera. The Raptor software digitalizes the images and prepares a report that lists the allergens and **components and their score in kUA/L.**

SPTs

Were performed with a **commercial standardized extract** panel (Stallergenes, Greer) which included Dermatophagoides pteronyssinus, Dermatophagoides farinae, Cynodon dactylon, Artemisia vulgaris, Alternaria alternata, Aspergillus fumigatus, Cladosporium. Alternaria was also included for being a very frequent co-sensitisation in pollen patients of the studied area. Histamine (10 mg/ml) was used as positive control and saline solution as negative control. Any ≥4 mm mean wheal diameter was considered positive.

Cross reactive group of allergens



Dermatophagoides pteronyssinus

Dermatophagoides farinae

Male size-250 um

Female size-350 um

Weight- 3.1 ug

Lifetime: 60-120 days

Reproduction: about 100 eggs per female

Allergen nomenclature: Der p

Male size-310um

Female size-390 um

Weight- 3.4 ug

Lifetime: 100-120 days

Reproduction: about 30-60 eggs per female

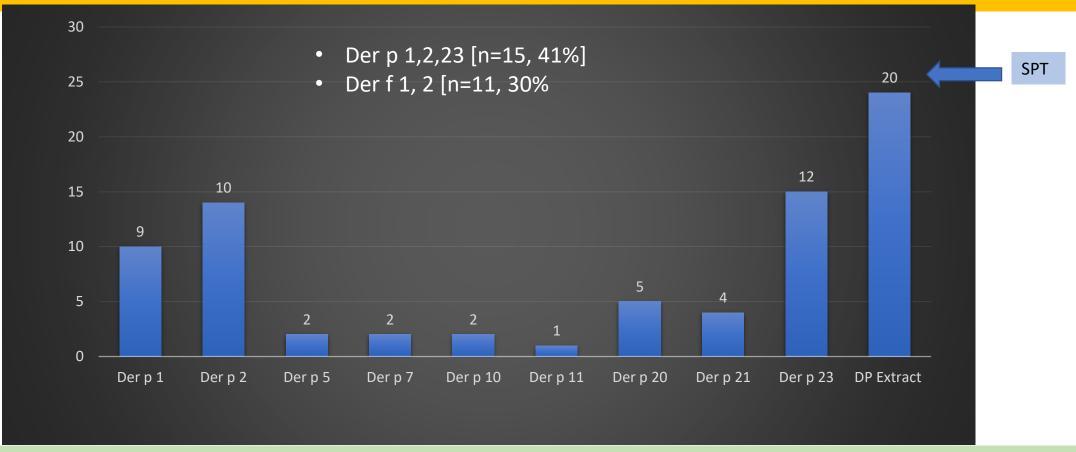
Allergen nomenclature: Der f

House Dust Mites

Total Sample = 36

			CRD Vs SPT Correlation Test							
Total Sample = 36	CRD	SPT	Kappa Test	Kappa Interpretation	p value	Correlation Interpretation				
Dermatophagoides pteronyssinus	15 (41%)	20 (55%)	K = 0.291 /	Slight Agreement	p< 0.0958	Not Significant				
Der p 1	9 (25%)									
Der p 2	10 (27%)									
Der p 23	12 (33%)									
Dermatophagoides farinae	11 (30%)	20 (55%)	K = 0.103	No Agreement	p< 0.481	Not Significant				
Der f 1	8 (22%)									
Der f 2	11 (30%)									

Dust Mites Allergy



The poor agreement percentage between the two methods is because of different source of preparation and different methods of testing for allergenic components and extracts.

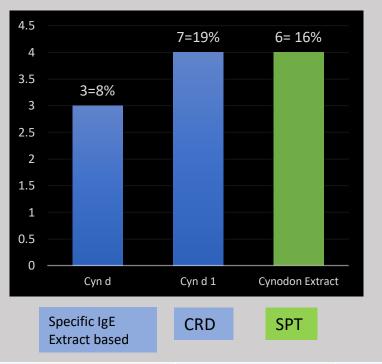
- > SPT positive, CRD positive with Der p 1 & 2- AIT INDICATED
- > SPT positive, CRD negative with Der p 1 & 2- AIT NOT INDICATED

Respiratory Allergy

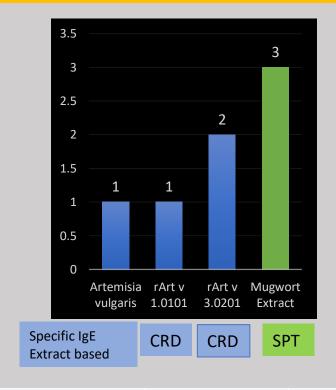
Pollen Allergy	CRD	SPT	Kappa Test	Kappa Interpretat ion	p value	Correlation Interpretati on
Cynodon dactylon	7 (19%)	6 (16%)	K = 0.531	Moderate Agreement	p< 0.0076	Significant
Artemisia vulgaris	3 (8%)	3 (8%)	K = 0.273	Slight Agreement	p< 0.235	Not Significant
Mould Allergy						
Alternaria alternata	5 (13%)	6 (16%)	K = 0.464	Moderate Agreement	p< 0.0243	Significant
Aspergillus fumigatus	5 (13%)	2 (5%)	Kappa= 0	No Agreement	p<1	Not Significant
Cladosporium herbarium	4 (11%)	1 (2%)	K= 0.372	Fair Agreement	p<0.111	Not Significant



Cynodon dactylon



Artemesia vulgaris



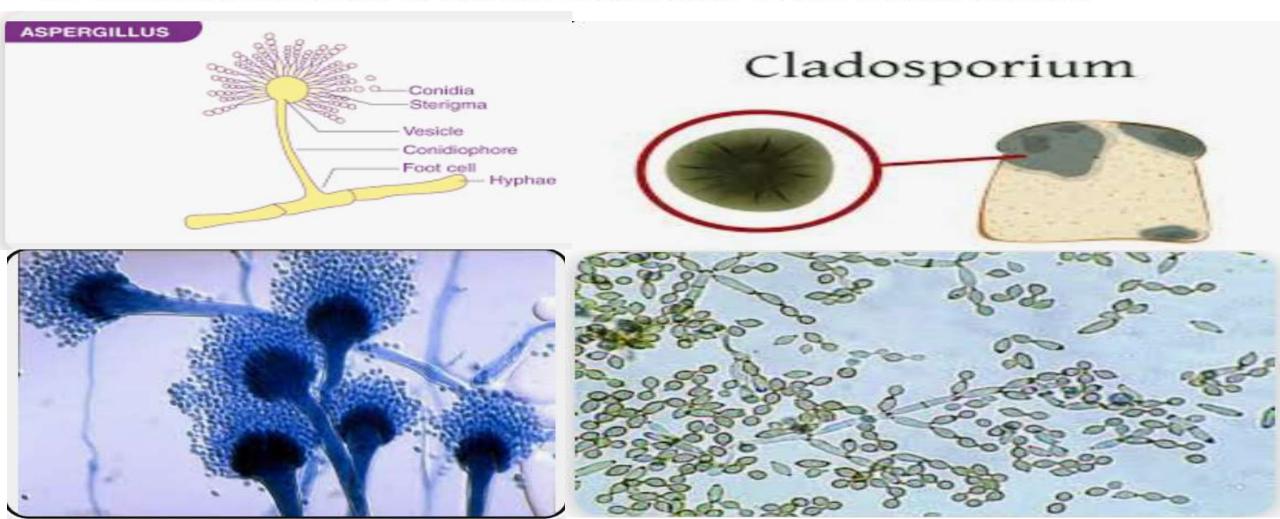
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Alternaria alternata





A. Alternaria alternata spores B. Broken Alternaria spore adjacent to an intact spore



Correlation co-efficient significant for Alternaria alternata- moderate Agreement

Test

K = 0.464

K = 0.372

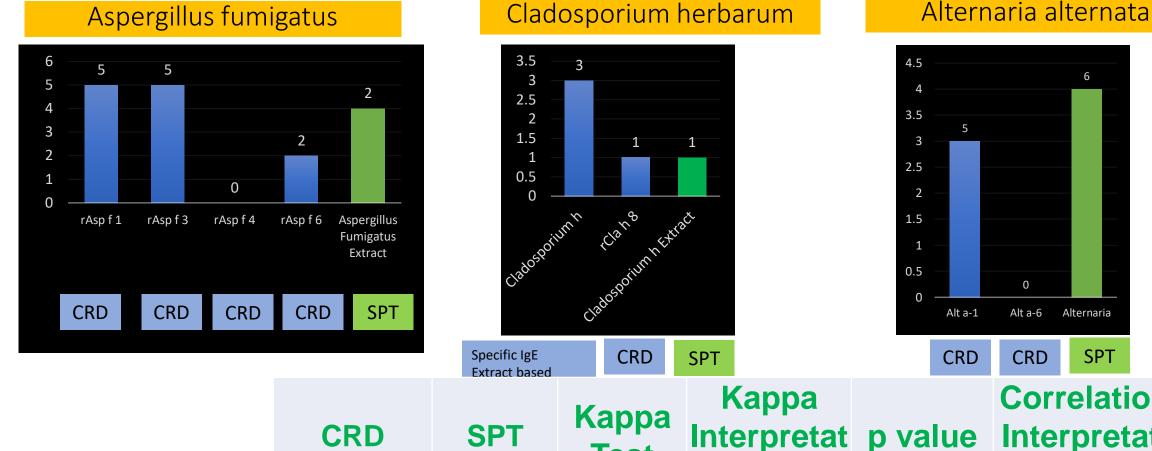
ion **Moderate**

Agreement

Fair

Agreement

Kappa= 0 No Agreement



6 (16%)

2 (5%)

1 (2%)

5 (13%)

5 (13%)

4 (11%)

Alternaria alternata

Aspergillus fumigatus

Cladosporium

herbarium

	1.5 1 0.5 0	Alt a-1	0 Alt a-6	Alternaria				
		CRD	CRD	SPT				
p value			Corr		_			
p< 0.0243			Sig	nifica	nt			
p<1			Not Significant					
р	<0.	111	Not S	ignific	ant			

Why CRD- Anaphylaxis?

- (A) Disease-eliciting components
- (B) Epipen/Inj Adrenaline



Protein family	nBos d 8	nGal d 1	Tri a 14,	Tri a 19	Act d 10	Act d 2	Jug r 4	Gly m 6	Ses I 1	nMac i 2s Albumin
Milk (Casein)	1	patient with a mily.	history of a	naphylaxis t	to milk, had	a severe sei	nsitization to	o Bos d 8 be	longing to t	he casein
Egg (Ovomucoid)		1 In	1 case of s	severe egg	allergy, st	rong sensi	tization to	Gal d 1 (o	vomucoid)	
Lipid Transfer Protein (LTP)			1		1					
Wheat (Omega-5-gliadin)				-3	ri a 19 sensit vith 3 patien					patients,
Thaumatin like peptide (TLP)						4				
Storage protein (11 S Globulin)							1	1		
Storage protein (2 S Albumin)									1	1

In these 8 cases, 4 patients displayed broad sensitization to storage proteins from different nuts & seeds. This protein family is a high-risk marker and is indicative of systemic reactions.

Why CRD?

Chronic urticaria with/without angioedema [16 cases]

Allergen	Antigen 5	Arginine kinase	Beta Expensin	Tropomyosin	Cysteine Protease	NPC2	Pectin Methylesterase	Peritophin	Unknown	
Pol d 5 (paper wasp venom)	2		•	Retter ch	aracterizes n	atient's (sensitization na	ttern		
Ves v 5 (wasp venom)	1			 Better characterizes patient's sensitization pattern Determines the presence of cross-reactivity between 						
Der p 20 (American HDM)		3			•	ice of ci	OSS-TEACTIVITY D	etween		
Pen m 2 (Shrimp)	Markers of co-sensitiz	f cross-reactivity ation	•	•	allergens Primary sensitization with house dust mite and cross-					
Bla g 9 (German cockroach)		2		reactivity	or co-sensiti	zation w	ith other allerg	ens.		
Cyn d 1, Lol p 1 & Phl p 1 (Grass pollen)			1							
Ani s 3, Blo t 10, derp 10, Per a 7,Pen m 1 (mix)				1						
Der p1	Markers of	f primary sensiti	zation		3					
Der f 1					3					
Der p 2						4				
Der f 2						4				
Gly d 2						3				
Lep d 2						3				
Sal k 1							2			
Der p 23	Markers of	f cross-reactivity	/ co-sensitiza	tion				5		
Dorn 20									2	

Respiratory allergy - Markers of primary sensitization.

CRD is a reliable new method for AIT

- Der p 1, Der f 1- Cysteine protein
 Der p 2, Der f 2- NPC 2 protein
 Specific IgE positive in 60-90%. Progressive asthma severity
- Der p 23- Peritrophine-like-protein. 75% of HDM. Asthma development
- Cynodon dactylon (Cyn d 1)
- Artemesia vulgaris (Art v 1)
- Alternaria alternata (Alt a 1)- Specific IgE positive in 80-90%
- Aspergillus fumigatus (Asp f 2/ 4/ 6-ABPA, Asp f 1- Asthma)
- Cladosporium herbarum (Cla h 8): cross-reactive minor allergen

Food Allergy- Markers of primary sensitization CRD is a reliable new method

- Milk (Casein)
- Egg (Ovomucoid)
- Lipid Transfer Protein (LTP)
- •Wheat (Omega-5-gliadin)
- Thaumatin like peptide (TLP)
- Storage protein (11 S Globulin)
- Storage protein (2 S Albumin)

Questions

➤ Can CRD-based Specific IgE sensitization in relation to clinical history solve most of the limitations of extract-bases specific IgE and SPT? - YES

Can CRD-based specific IgE for food-allergen sensitization by-pass or replace OFC and predict severe systemic reactions?- YES / NO

Can CRD-based specific IgE improve the selection of allergens for AIT in polysensitized patients - YES / NO

Acknowledgement

This power point presentation is a collaborative effort with <u>ALEX²</u> - <u>Allergy</u>, <u>Xplorer</u>, Tosoh India Pvt Ltd.

 Special thanks to Dr. Manoj Kumar Singh, Scientific Manager -Product Development for data analysis.



Thanks

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