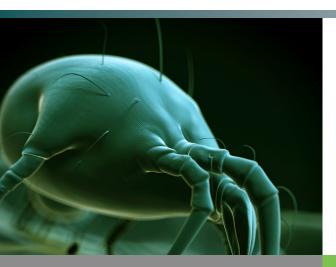
# **AIT Bulletin**

A BI-MONTHLY NEWSLETTER







#### **CLINICAL SPOTLIGHT**

#### **Hunter Hoover, MD** Charlotte, NC

As an otolaryngologist, I am indebted to the Allergy and Immunology community. My practice has over 50 ENT providers who all follow the same protocols regarding inhalant allergy testing and immunotherapy. My endeavour has been to make certain that those protocols conform to the standards established in the general allergy community. The AAAAI immunotherapy practice parameters have been critical in ensuring that we provide effective dosing. The information I have gathered from national experts such as Linda Cox as well as my local colleagues at Carolina Asthma and Allergy Center has been invaluable. The scientific advisors at ALK have generously shared their expertise and guided me along the way. All of our patients benefit from this collaboration.

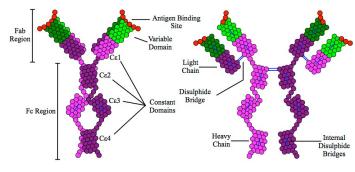
#### **AIT FROM ALK**

#### The IgE Blocking Activity Induced by Dermatophagoides pteronyssinus Subcutaneous **Immunotherapy Does Not** Correlate with Specific IgA but with IgG4 in both Serum and Saliva

He Y, Liu J, Zhao D, Zhang S, Hao G, Sun Y, et al.

he role of salivary-specific IgG4 and IgA in subcutaneous immunotherapy (SCIT) is not well defined. This study aimed to investigate the change of IgG4 and IgA in both serum and saliva and their correlations with IgE-blocking factors (IgE-BF) during SCIT.

During this study, 307 patients with Dermatophagoides pteronyssinum (DP) allergic rhinitis and/or asthma were recruited in China. Out of that total, 286 patients received DP-SCIT (monotherapy) for one year and 21 patients received only symptomatic treatment at the control group.



During the DP-SCIT, the allergen-specific IgG4 in both saliva and serum increased and correlated significantly, the correlation becomes stronger over the treatment time. There was no correlation between DP IgE-BF and Der p 2-specific IgA in serum or saliva. The control group did not exhibit significant changes in any antibody level measured. The IgE-blocking activity induced by DP-SCIT treatment correlated with specific IgG4 and not IgA. The IgG4 in saliva correlates with serum IgG4 and can be an alternative immunological marker beyond one year of SCIT treatment.

Click to read full study

He Y, Liu J, Zhao D, Zhang S, Hao G, Sun Y, et al. The IgE Blocking Activity Induced by Dermatophagoides pteronyssinus Subcutaneous Immunotherapy Does Not Correlate with Specific IgA but with IgG4 in both Serum and Saliva. Int Arch Allergy Clin Immunol. 2021;1-14. doi: 10.1159/000517152 https:// upload.wikimedia.org/wikipedia/commons/9/9d/lgE.jpg





by The Physicians Foundation examining how the coronavirus pandemic affected the nation's physicians, 8 of 10 physicians were impacted as a result of COVID 19. Furthermore, 32% experienced a reduction in staff and 18% switched to primary telemedicine practice.

Click to read full study ▼

Physicians Foundation. 2021 Survey of America's Physicians COVID-19 Impact Edition: A Year Later. https://physiciansfoundation.org/wp-content/ uploads/2021/08/2021-Survey-Of-Americas-Physicians-Covid-19-Impact-Edition-A-Year-Later.pdf. Accessed October 26, 2021.

## WHAT'S NEW IN RESEARCH?

### Japanese Cedar Pollen Sublingual **Immunotherapy Tablets**

K, Okamoto Y. J Allergy Clin Immunol Pract. 2021. Japanese cedar (JC) pollen is the most common

cause of seasonal allergic rhinitis in Japan. Previous reports demonstrated that the JC pollen sublingual immunotherapy (SLIT) provided sustained efficacy in a treatment duration-dependent manner; however, the magnitude and duration of sustained effect after treatment cessation had not been evaluated. Earlier this year, additional data from this five-year study were published that demonstrated JC pollen SLIT administration for approximately 18 months also provided long-term benefits after treatment cessation, but that three years of treatment provides the more robust sustained effect. More durable treatment effects of JC pollen SLIT are obtained after three years compared with 18 months of continuous administration at an optimal dose. Click to read full study 💜

Y. Disease-Modifying Effect of Japanese Cedar Pollen Sublingual

Immunotherapy Tablets. J Allergy Clin Immunol Pract. 2021. doi: 10.1016/j.jaip.2021.06.060.

ALK? Let us know:

### RECENT EVENT HIGHLIGHTS

**U.S. Events** Webinar Wednesdays

in North America October 20, 2021 -Natalija Novak, MD (Germany) November 10, 2021 -

Mohamad M. Shamji, MD (UK)





Webinar Wednesday, October 20, 2021

#### **UPCOMING ALK EVENTS ▼CLICK HERE** for ALK Virtual Programs Calendar



\*Bookmark this page in your browser to stay up to date on new events being added!



"Allergy AfterHours", features allergists from around the world discussing hot topics surrounding allergy immunotherapy, penicillin allergies, practice management and much more. CLICK HERE TO TUNE IN!

**Episodes:** 



in Clinical Practice The Evolving Landscape of Clinical

**Evidence-based Allergen Immunotherapy** 



**Effective Dosing in Allergy Immunotherapy** 



What AIT Practice is Like in Japan

**Practice and Side Gigs** 



with guests Yoshitaka Okamoto, MD & Hendrik Nolte, MD, PhD **Safety Considerations in** 



Allergen Immunotherapy with guest David Bernstein, MD

**Current Research in Allergen** Immunotherapy in Europe

Stay tuned for upcoming events and podcast episodes!

Do you have a suggestion for a future ALK Medical Affairs event? Let us know!

**⋠** ⊠ MedicalAffairs@alk.net

## **Disease-Modifying Effect of**

# Yonekura S, Gotoh M, Kaneko S, Maekawa Y, Okubo

Yonekura S, Gotoh M, Kaneko S, Maekawa Y, Okubo K, Okamoto

What gaps in research would you like to share with

@US\_ALK #ALKMedAffairs

ALLERGY NEWS AROUND THE GLOBE

#### The Revenge of Unintended Consequences of Anaphylaxis-Risk Overdiagnosis: How

#### Far We Have Come and How Far We Have to Go Abrams E, Greenhawt M, Alqurashi W, Singer A, Shaker M. An international authorship recently published a

Rostrum that addresses the benefits and risks of past

anaphylaxis management approaches and the necessity to critically approach future risk mitigation in anaphylaxis prevention. They write, "Overdiagnosis of anaphylaxis risk is an underappreciated aspect of anaphylaxis prevention. Whereas the benefits of anaphylaxis risk prevention are well known, potential harms resulting from preemptive approaches to mitigate anaphylaxis-risk are not insignificant. Still, great progress has been made in recent years to avoid the unintended consequences of anaphylaxis-risk overdiagnosis."

Go. J Allergy Clin Immunol Prac. 2021;9(11):3911-3917. https://doi. org/10.1016/j.jaip.2021.05.038.

Click to read full study ▼

Abrams E, Greenhawt M, Alqurashi W, Singer A, Shaker M. The Revenge of Unintended Consequences of Anaphylaxis-Risk Overdiagnosis: How Far We Have Come and How Far We Have to