# **AIT Bulletin**

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A QUARTERLY NEWSLETTER



## **CLINICAL SPOTLIGHT**

### Bob Geng, MD San Diego, CA

I am a board-certified Allergist/Immunologist serving as faculty at the University of California San Diego in both the Departments of Pediatrics and Medicine, and boardcertified in Internal Medicine and Clinical Pharmacology. I currently serve as the President of the San Diego Allergy Society and am a member of the Editorial Board of IG Living magazine. I am actively involved in clinical and translational research in allergic inflammatory disorders as well as immunodeficiency. I serve as the Allergy/ Immunology Director of the Multidisciplinary Atopic Dermatitis Program as well as the Co-Director of the Asthma Allergy Foundation of America sponsored Severe Asthma Program at Rady Children's Hospital. My academic interest focuses on the intersection between the two sides of our specialty bridging clinical immunology with allergy bringing together all elements of our field.

**AIT FROM ALK** 

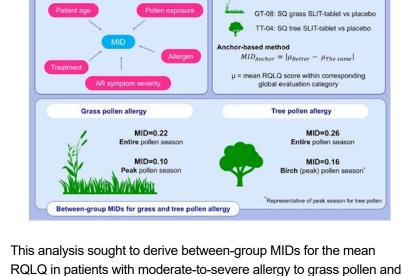
# **Determining the minimal** important differences in the **RQLQ** score with grass and tree allergy immunotherapy versus placebo in adults with moderateto-severe allergy

Blaiss M, Gronskyte Juhl R, Siew L, Hammerby E, Devillier P.

The Rhinoconjunctivitis Quality of Life Questionnaire (RQLQ) is

considered the most used instrument to measure health-related quality of life in allergic rhinitis clinical trials. The smallest degree of improvement considered clinically relevant, or the minimally important difference (MID), is used to help interpret RQLQ findings. Due to the

variety of factors influencing allergic rhinitis treatment (i.e., disease severity, pollen exposure, patient age, treatment type), a single MID cannot be used across all allergic rhinitis clinical trials. MIDs derived from clinical trial data



in a separate analysis, to tree pollen. Four phase 3 clinical trials of sublingual immunotherapy were selected for analysis. An MID was calculated for the entire and peak pollen seasons for grass and tree pollens. Birch was selected as the representative tree pollen due to its prevalence and potential for cross-reactivity. For grass pollen, between-group MIDs were 0.22 for the entire pollen season and 0.10 for peak pollen season. For tree season, between-group MIDs were 0.26 for the tree pollen season and 0.16 for peak birch season. The authors noted these MIDs were calculated post-hoc and would be representative of the trial populations evaluated. Read the full study Blaiss MS, Gronskyte Juhl R, Siew LQC, Hammerby E, Devillier P. Determining

2022;77(6):1843-1851. doi: 10.1111/all.15207.

the minimal important differences in the RQLQ score with grass and tree allergy

immunotherapy versus placebo in adults with moderate-to-severe allergy. Allergy.

# Children with Allergic Rhinoconjunctivitis

**INVESTIGATOR INSIGHTS** 

Hear from Dr. Bernstein on the key findings from his publication "Efficacy and Safety of Ragweed SLIT-

Dr. David Bernstein Discusses Ragweed SLIT-Tablets in

Tablet in Children with Allergic Rhinoconjunctivitis in a Randomized, Placebo-Controlled Trial" including exploratory endpoint findings that prompt new research.





### of peanut allergy, and its association with asthma in later-life: Population-

based birth cohort study

### Murray C, et al. Using an unselected, population-based prospective birth cohort (n= 959; confirmed peanut allergy=30), the authors investigated early life-predictors of peanut allergy and associations with comorbid conditions such as asthma.

Peanut allergy was found to be associated with multiple

IgE sensitizations and early onset persistent eczema

Kotsapas C, Nicolaou N, Haider S, Kerry G, Turner P,

Early-life predictors and risk factors

and wheeze. Surprisingly, filaggrin (FLG) mutations were significantly associated with peanut allergy in children without eczema. Finally, peanut-allergic children were more likely to have asthma, but among those with asthma, peanut allergy was not associated with more severe asthma. The authors conclude their findings propose a strong association between peanut allergy and development of atopic disease.



@US\_ALK #ALKMedAffairsNA

Birch-naive, oak-allergic subjects'

ALLERGY NEWS AROUND THE GLOBE

Ramirez R, Jacobs R, Andrews C. The authors of this small study (n=24), conducted in an

environmental chamber

response to birch pollen in an

environmental exposure chamber, sought to examine symptomatic response to birch pollen challenge in adult subjects (aged 20-58 years) who are oak allergic and birch sensitive, but not naturally exposed to birch pollen. Study subjects with oak allergy responded symptomatically to birch pollen in the exposure chamber, with more than half

those with some endemic exposure. Read the full study Ramirez RM, Jacobs RL, Andrews CP. Birch-naive, oak-allergic subjects' response to birch pollen in an environmental chamber. Allergy Asthma Proc. 2022;43(2):116-123. doi: 10.2500/aap.2022.43.210097.

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of these subjects never residing in a birch-pollen endemic area. The authors hypothesize these subjects became sensitized to birch by exposure to oak pollen. Individuals

with no endemic exposure to birch responded similarly to



ebinar ednesdays in North America **Webinar Wednesdays in North America AUGUST: Petra Zieglmayer, MD (Austria)** August 17 - 5:00pm EST

#ALKNAWebinarWednesday

**NOVEMBER:** Connie Katelaris, PhD (Australia) November 16 - 7:00pm EST

**Botany Walks with** 

Tricia Sowers, PhD

**SEPTEMBER:** Jeeve Kanagalingam, MD (Singapore)

September 14 – 7:00pm EST

October 19 - 7:00pm EST

**OCTOBER:** Remi Gagnon, MD (Canada)

**Upcoming Botany Walks:** 

September 9-11

(NAPAAC) – September 21-22

If your institution is interested in hosting a botany walk, please email 

McGill University, Montreal Botanical Garden (Quebec) -September 9 (in partnership with Aerobiology RL) Tulane University/Louisiana State University, New Orleans (Louisiana) - September 16 Thomas Jefferson University/Nemours Children's Health (Pennsylvania) - September 21

Botany Walks are an excellent opportunity

environment. ALK has partnered with Tricia

Sowers, PhD to engage with Allergists and

ENTs for this unique educational program.

to see common allergens in their natural

**Connect with ALK Medical Affairs North America at** upcoming conferences:

Eastern Virginia Medical School/Children's Hospital of The

University of Virginia (Virginia) - September 30

King's Daughters (Virginia) – October 14

Medical Science Liaison Society Annual Conference -September 6-8 Long Island Asthma and Allergy Society (LIAAS) -

American Academy of Otolarngygology- Head and Neck Surgery Annual Meeting – September 10-14

North American Pediatric Allergy and Asthma Congress

American Academy of Otolaryngic Allergy Annual Meeting -

Canadian Society of Allergy and Clinical Immunology (CSACI) – September 23-25 Michigan ENT Society Meeting – October 19

(ACAAI) Annual Meeting - November 10-14 RECENT EVENT HIGHLIGHTS

American College of Allergy, Asthma and Immunology

An ALK-sponsored symposium was held during the Congress titled "Evolution in science – revolution in paediatric care of respiratory allergy." Professor Graham Roberts, Chair, was joined by speakers Dr. Priya Bansal, Professor Douglas Mack and Dr. David Caimmi, who discussed topics in

evidence-based allergy immunotherapy. Additionally, our team led a round-table expert discussion with Dr. Moises Calderon.

The European Academy of Allergy and Clinical Immunology (EAACI) Hybrid Congress



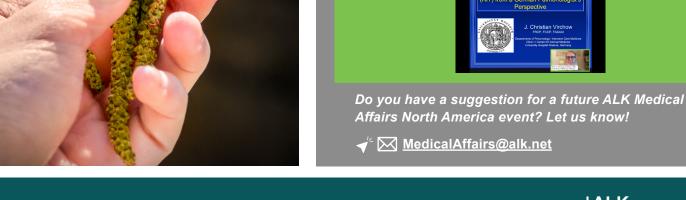


Practical challenges in oral

immunotherapy – beyond Guidelines

BALANCING THE SURGICAL AND MEDICAL MANAGEMENT OF ALLERGIC RHINITIS





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