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Dear Dr. Abdulrahman S. Al-Frayh,

This is to inform you that your abstract "HUMAN SENSITIZATION TO PROSOPIS JUILIFLORA ANTIGEN IN SAUDI ARABIA" has been accepted by the Congress.

The status of your presentation is as follows:
Type of Presentation (Free Paper Sessions): Oral
Abstract Number: 3P-F1-07
Date of Presentation (Display Date if Poster): 09/13 PM, 2001

For your information, some of the Congress policies regarding scientific arrangements are:
1. For each oral presentation (Free Paper Sessions), eight minutes will be given;
2. A single slide projector will be available in each room, but not LCD projector nor overhead projector;
3. Slide preview procedures will be given in the Program Book which will be available at on-site Registration;
4. Poster size: 1.2 m (H) x 0.9 m (W);
5. An abstract number with the two letters NF in it is an oral presentation for the 2nd International Congress on Pediatric Nursing (2nd ICPN).

We look forward to welcoming you here in Beijing.

Yours sincerely,

Wu XiRui
Chair
Scientific Program Committee

Liu Zhi
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2nd International Congress on Pediatric Nursing (2nd ICPN)
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HUMAN SENSITIZATION TO PROSOPI S JULIFLORA ANTIGEN IN SAUDI ARABIA

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Objective s: Allergenicity to Prosopis juliflora pollen antigen has been reported from only a few countries, including the US, South Africa, India and Kuwait. In some parts of Saudi Arabia, species of Prosopis have been introduced by the millions as roadside ornamentation. There appear to be four flowering seasons during which pollen grains float in all directions. However, the role of Prosopis pollen as the sensitizing and/or triggering agent of allergic asthma and/or rhinitis in the Kingdom has never been evaluated.

Method s: A total of 473 allergic patients suffering from bronchial asthma in four different geographical regions (Abha, Qassim, Hofuf and Giza n), and attending allergy clinics and chest disease centers of university and Ministry of Health hospitals in the region were tested for immediate hypersensitivity reaction to Prosopis juliflora allergens. Airborne pollen grains at one center were also studied for one full year, using volumetric sampling techniques.

Result s: 76.1% patients in Qassim, 37.5% in Giza n, 29% in Abha and 11% in Hofuf reacted positively to Prosopis antigen. Multiple sensitivities to other pollen antigens were detected in all patients. The level of airborne Prosopis pollen detected in Giza n exceeded 90 grains m⁻³ of air.

Conclusion: In view of the documented evidence of Prosopis-involved allergenicity, the role of Prosopis pollen as a sensitizing factor in Saudi Arabia has been confirmed. However, the cause of elicitation of symptoms in many multiple sensitive patients, together with the question of cross-reactivities, needs thorough and detailed investigation. In vitro confirmation of all positive results is also required to incriminate Prosopis as one of the major allergens in parts of Saudi Arabia.