Abstracts
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pressaceae family in the Mediterranean area. Commer-
cially available Cs extracts for in vivo diagnosis exert a "low cutaneous response" in patients with high sensitivity to Cypress pollen. We used a previ-
ously characterised in-house prepared extract of Ca
pollen to study 713 patients complaining respiratory symptoms suspected to be allergic in nature and
heavily exposed to Cupressaceae pollens. SPT were performed with a panel of respiratory allergens, with
in-house Ca and with a commercial Cs extract (DHS.
Bayropharm, Italy). Results reported a prevalence of
25.9% of Cypress hypersensitivity using Cs, being
class [+] reactions present in half of the Cs SPT.
Prevalence of Ca-positive SPT was 38%, being 90%
of the cutaneous response of class [++] and 56% of
class [+++]. Using Ca, thirty-five patients were diag-
nosed as having a mono-specific Cypress allergy, while,
using Cs, only 25 were detected, being one of them
CaSPT only to Cs. A 50% increase of patients with
cypress hypereosensitivity was recorded using the inhouse
Ca extract confirming the under estimation of this
winter pollenosis. A low cutaneous reactivity was
confirmed using Cs in in vivo testing.

P-0573
ALLERGY TO CYPRESS POLLEN IN ROME
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The significance of this study is the evaluation of
clinical importance of the allergic sensitisation to
cypress pollen in Rome area. In fact, the last 30 years,
in Europe, has been observed an increasing frequency
of allergic sensitisation to these allergens.

We have studied in our allergological centre, from
March 1992 to December 1994, 460 pollinoa patients
of both sexes, ranging in age from 4 to 78
years, with a history of rhinitis and/or asthma all the
patients were selected by anamnestic and clinical
examination, Skin Prick Test (SPT) and specific
serum IgE determination (RAST). Among all the
patients with skin positiveness for one or more pollen
allergens, we found 49 subjects (10.6%) sensitised to
cypress pollen, alone (7) or in association (42) with
other pollen allergens. These data have been con-
vinced by means of RAST. Concerning the clinical
significance of pollen cypress sensitisation, in pa-
tients with monosensitisation, we have observed a
predominance of rhinitis and conjunctivitis while in
other patients, the association of nasal and bronchial
symptomatology is the most common manifestation.

P-0574
ALLERGENICITY TO PROSOPIS JULIFLORA
POLLEN IN SAUDI ARABIA
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Prosopis trees were introduced to Saudi Arabia as
ornamental plant. Now there are about a million trees of
Prosopis with 5-7 different species including one or
two native ones on the road verges in different cities
as well as in the desert, with reportedly 4 flowering
seasons. Sporadic pollen counts were recorded from
different regions using Burkard volumetric traps.
To analyse the allergenicity of Prosopis pollen, 250
children suffering from bronchial asthma in 4 different
geographical regions were skin prick tested using an
extract of Prosopis juliflora (Meridian Biomedical
w/v 1:20). Sixty six patients were tested in an agricul-
tural setting, with the highest numbers of Prosopis
trees in the region, of which 51 (77.3%) were found
to be positive. 156 patients were tested in a mountainous
region, of which 33 (18.5%) showed positive reaction
to this pollen. Similarly in two other regions with
mixed vegetation, 23 patients were tested, of which
27.3% (n=11) and 8% (n=12) reacted positive. The
study, though in progress, indicates the possible role
of Prosopis trees in the sensitization and development
of allergy in paediatric patients in the Kingdom of
Saudi Arabia.

P-0575
IN VITRO STUDIES ON AN EVENTUAL CROSS
REACTIVITY BETWEEN POLLENS OF LOMIUM
PERENNE AND PINUS RADIATA
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Pine pollen, sp. Pinus radiata (PR), is a possible
cause of pollinosis in Northern Spain, where it has a
wide distribution and massive pollen seasonal counts.
Recently, some authors have reported an evidence for
cross-reactivity of PR pollen with rye-grass (LP), thus
supporting the theory of a lack of true allergenicity for
PR pollen. Since many of our pine-allergic patients
are also sensitised to grass pollens, a laboratory study
about this eventual cross-reactivity has been carried
out in 10 of our patients.

Material and methods: Sera from 10 patients was
obtained; 3 allergic only to PR, 5 allergic both to PR
and LP, and 2 allergic only to LP. a) SDS-PAGE
IgE-immunoblotting was performed with each of the
10 sera and extracts from PR and LP, respectively. b)
RAST inhibition studies were carried out using PR