

# 117 Saturday/Sunday Poster Sessions

## International Suites (Acapulco, Toronto & Hong Kong)

- P132 Pulmonary Vasculitis Presenting as Atypical Asthma.**  
L.M. Chamorthy, MD\*; M. dela Morena, MD;  
A. Lacson, MD; G. Cawkwell, MD; and R.A. Good, MD,  
St. Petersburg, FL.
- P133 The Relationship of Aeroallergens Sensitization to Asthma Severity.**  
M.T. Hernandez-Venegas, MD\*; B. Morfin-Maciel, MD;  
G. Lopez-Perez, MD; and J. Huerta-Lopez, MD,  
Mexico City.
- P134 Living with Asthma.**  
L. Handelman, MD\*; M. Rich, MD; C. Frazer, MD;  
E. Perrin, MD; and L. Schneider, MD, Boston, MA.
- P135 Compliance with NAEPP Guidelines. Allergists vs Pediatricians.**  
E. Yousef, MD\* and S.J. McGeady, MD, Philadelphia, PA.
- P136 Asthma Prevalence and Current State of Asthma Among School Children in Border City.**  
S. Ting, MD\*; M.A. Leiner, MBA; M.M. Logvinoff, MD;  
and G.A. Handal, MD, El Paso, TX.
- P137 Improving Cost Effectiveness by Use of Asthma Outcomes Tools.**  
A.T. Luskin, MD\* and D.A. Bukstein, MD, Madison, WI.
- P138 Epidemiology of Bronchial Asthma in Eight Different Regions of Saudi Arabia.**  
A.R. Al-Frayh, MD\*; S.M. Hasnain, PhD;  
M.O. Gad El-Rab, MD; and S.T. Al-Sedairy, PhD,  
Riyadh, Saudi Arabia.
- P139 A Cost-Effectiveness Analysis of Peak Flow Based Asthma Education and Action Plans.**  
M.L. de Asis, MD\*, West Nyack, NY.
- P140 A Comparison of Two Asthma Education Interventions for Chicago Public Elementary School Personnel.**  
P.K. Musto, RN\*, Chicago, IL.
- Upon completion of this session, participants should be able to: P102) determine consulting of screening for EIA longitudinally; P103) explain the association between bronchial hyperresponsiveness and the pathogenesis of aspirin-induced asthma and discuss alternative pharmacologic effect of 14-membered macrolides besides the antibacterial effect; P104) consider the role of dermatomycosis in cases of recalcitrant corticosteroid-dependent intrinsic asthma in patients with immediate hypersensitivity reaction to fungal agents, and that appropriate treatment of the dermatomycosis may significantly ameliorate their asthma; P105) determine the prevalence of atopy and asthma in different ages to understand better and to prevent the development of disease; P106) analyze hospital admissions for asthma during the last few years in western Europe; P107) identify the most common causes of chronic cough in Iranian children; discuss the role of predisposing factors in diagnosis and treatment of chronic cough; and consider the special diagnostic tests to rule out different causes of chronic cough; P108) discuss the evidence regarding the lack of interaction between zafirlukast and theophylline; P109) discuss the importance of flow rates in the proper and effective delivery of asthma medications through dry-powder inhalers, specifically the new Asmanex Twisthaler™; P110) discuss the difference in hypothalamic pituitary adrenal axis suppression between fluticasone propionate and mometasone furoate when administered by inhaler; P111) discuss low systemic bioavailability of mometasone furoate following administration by inhaler P112) discuss how mometasone furoate provides greater improvement in pulmonary function measures than budesonide; P113) discuss the efficacy and safety of once-daily versus twice-daily mometasone furoate therapy in the treatment of mild to moderate asthma; P114) discuss the efficacy of long-term mometasone furoate therapy in reducing oral corticosteroid requirements in patients with severe asthma; P115) assess the long-term safety and tolerability of budesonide inhalation suspension as determined in these 3 open-label 52-week extension studies of infants and young children with persistent asthma; P116) explain that the addition of montelukast, an oral leukotriene modifier, to a low dose inhaled corticosteroid is as effective and may be a safer alternative in controlling symptomatic persistent asthma as compared to doubling the dose of inhaled corticosteroids; P117) discuss how mometasone furoate is highly efficacious when administered once-daily in patients with moderate asthma who require treatment with inhaled corticosteroids; P118) discuss the patient's perceptions about the potential side effects of inhaled corticosteroids and discuss the need for continuing patient education; P119) determine the effect, if any, of inhaled corticosteroids on growth and weight velocity; P120) recognize the role the allergist plays in improving outcomes and quality of life in patients with moderate to severe asthma; P121) describe that once-daily administration of budesonide inhalation powder via Turbuhaler is safe and well tolerated in adult asthmatic patients who may have been previously treated with inhaled corticosteroids; P122) discuss the effects of nebulized budesonide on infants and young children with asthma, as indicated by symptom-free days and utilization of asthma-related medications and health care services; P123) realize that health related quality of life is an important issue when evaluating the efficacy of asthma therapy; P124) evaluate the efficacy and safety of a new albuterol propellant for effective therapy of pediatric patients with asthma; P125) explain the importance of gathering objective feedback information to monitor and modify asthma educational programs and recognize the limitations and benefits of using a telemarketing service for gathering data; P126) describe the complexities involved in improving compliance of asthmatic children; P127) explain how to educate and counsel pharmacists on how to improve asthma care; P128) identify differences in asthma care provided by allergists-immunologists vs primary care physicians and discuss the value of further educating primary care



# *Program Guide*

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# ANNALS OF ALLERGY, ASTHMA, & IMMUNOLOGY

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## Editorial

The Spectrum of Anaphylaxis James T Li, MD, PhD

## Review Article

Role of Staphylococcal Superantigens in Atopic Dermatitis: from Colonization to Inflammation Mehmet Oktay Taskapan, MD and Prem Kumar, MD

## Clinical Allergy-Immunology Rounds

Two Contrasting Cases of Anaphylaxis Seen Simultaneously Robert A Sikora, MD; Kimberly Ricaurte DO; Anne M Ditto MD; and Roy Patterson, MD

## Original Articles

Comparison of the Burkard and Allergenco MK-3 Volumetric Collectors Jay Portnoy, MD; Julie Landuyt, BA; Freddy Pacheco, MS; Susan Flappan, IHIT; Stephen Simon, PhD; and Charles Barnes, PhD

Distribution of Primary Immunodeficiency Diseases Diagnosed in a Pediatric Tertiary Hospital Felipe C Javier, III, MD; Cleveland M Moore, MD; and Ricardo U Sorensen, MD

Carpet Properties that Affect the Retention of Cat Allergen Roger D Lewis, PhD, CIH and Patrick N Broyesse, PhD, CIH

Cord Blood IgE: Its Determinants and Prediction of Development of Asthma and Other Allergic Disorders at 12 Months A Kaan, H Dimich-Ward, J Manfreda, A Becker, W Watson, A Ferguson, H Chan, and M Chan-Yeung

Oral Iron Cutaneous Adverse Reaction and Successful Desensitization Nancy Ortega, MD; Rodolfo Castillo; Carlos Blanco, PhD; Maria Alvarez, PhD; and Teresa Carillo

Comparison of Outdoor Allergenic Particles and Allergen Levels Charles Barnes, PhD, BS; Keith Schreiber, MS; Freddy Pacheco, MS; Julie Landuyt, BS; Frank Hu, DVM; and Jay Portnoy, MD

A Cost-Benefit Analysis Using a Willingness-to-Pay Questionnaire of Intranasal Budesonide for Seasonal Allergic Rhinitis Paul K Keith, MD; Jennifer Haddon, MSc; Stephen Birch, DPhil; and the Rhinocort Study Group

Sparfloxacin for the Treatment of Acute Bacterial Maxillary Sinusitis Documented by Sinus Puncture Norman Garrison, MD; Sheldon Spector, MD; Daniel Buffington, PharmD; Chester Stafford, MD; Kimberly Granito, BS; Hao Zhang, PhD; and George H Talbot, MD

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**P138 EPIDEMIOLOGY OF BRONCHIAL ASTHMA IN EIGHT DIFFERENT REGIONS OF SAUDI ARABIA.**  
A.R. Al-Frayh,\*MD; S.M. Hasnain,\*\*PhD, M.O. Gad El Rab,MD\*, Z. Shakoor,MD\*, and S.T. Al-Sedairy,\*\*PhD.  
\*College of Medicine, King Saud University, \*\*King Faisal Specialist Hospital and Research Centre, Riyadh, Saudi Arabia.

Studies on prevalence of bronchial asthma and other allergic diseases in children in different regions of Saudi Arabia has continued since 1987. As such various regions of the Kingdom including Eastern, Western and Central Regions and encompassing different climate and geographical zones have been studied. The studies were conducted using an internationally designed questionnaire (similar to ISAAC) as well as by diagnostic parameters on cross sectional population of children. The results revealed there were regional variation in the prevalence rate of both diagnosed and highly suspected cases. The definite or diagnosed asthma recorded were as follows: Abha (n=485) 13%, Dammam (n=889) 3.7%, Gizan (n=362) 24.3%, Hofouf (n=923) 14.4%, Hail (n=507) 22.9%, Qassim (n=384) 15.1%, Riyadh (n=988) 10.2% and Jeddah (n=531) 10.4%. Addition of highly suspected case put the figure comparatively much higher. Though the number of children participated also varied from region to region, yet the trend shows that Gizan, a coastal region has the highest prevalence of asthma followed by Hail, an agricultural region. Though the reason(s) of this high prevalence and variation is not the subject of this presentation, nevertheless, these may be attributable to the development and change in life style, etc. in the respective region. We can conclude that the Kingdom is one of the countries that have highest prevalence of bronchial asthma in children.