Interpreting ImmunoCAP respiratory allergen results

Results you can trust

When to order ImmunoCAP specific IGE blood test

• Rhinitis – Order Respiratory Allergy Profile
  – **Target:** Patients with allergy symptoms¹-⁴
    (eg, nasal congestion, rhinorrhea, increased secretions)
  – **Objective:** Helps rule in or rule out allergy to guide treatment or referral

• Asthma – Order Respiratory Allergy Profile
  – **Target:** Patients with persistent asthma on daily medication¹
  – **Objective:** Helps rule in or rule out allergy and identify triggers to target exposure reduction

• Common childhood diseases – Order Childhood Allergy Profile
  (eczema, GI distress, recurrent acute otitis media)
  – **Target:** All patients with severe, acute or recurring symptoms or those needing persistent treatment¹
  – **Objective:** Helps rule in or rule out allergy to guide treatment or referral

Managing patients with allergy-like symptoms

ImmunoCAP® Specific IGE blood test provides clinicians with an accurate and convenient method of helping to rule in or rule out allergy in patients with common allergy-like symptoms. Allergy profiles provide the ability to accurately identify and quantify specific common allergen sensitivities in patients with confirmed allergy

5. NIH. *Guidelines for the Diagnosis and Management of Asthma,* 2007. NIH publications 09-4051.

See reverse side for individualized therapy options.
Interpreting ImmunoCAP respiratory allergen results

Quantitative results:
What they mean

<table>
<thead>
<tr>
<th>Specific IgE</th>
<th>0.35-100 kU/L</th>
<th>elevated test result (indicates sensitization)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total IgE</td>
<td>0-100 kU/L</td>
<td>normal test result (range varies with age and laboratory)</td>
</tr>
<tr>
<td></td>
<td>&gt;100 kU/L</td>
<td>elevated test result</td>
</tr>
</tbody>
</table>

NOTE: Although total IgE alone is not diagnostic for allergies, total IgE is sometimes helpful when included with specific IgE profiles.

- Knowing the positive results for allergens or allergen categories allows for targeted exposure reduction
- Diagnosis of allergy is made when elevated specific IgE test results, clinical history, and physical examination correlate with symptoms

NOTE: Patients with a family history of allergy should be considered to be more likely to develop allergic disease.
In these patients, total allergic load should be considered, even if only a few allergens seem relevant.

The results are positive:
What do I do now?

- Make a plan
  - Rank positive results in order from high to low IgE measurements. Consider reducing exposure to allergen(s) with the highest IgE level(s) first
  - Focus on indoor triggers first, since these may be easier to control
  - With multiple positive results, reduce exposure to the trigger showing highest IgE levels for 4 weeks. If symptoms improve, continue therapy. If not, continue to avoid the first allergen and instruct patient to avoid next most likely contributor to symptoms

- Educate the patient by reviewing test results and stressing the need to follow the entire treatment plan (target exposure reduction and drug therapy, etc.)

- Counsel for targeted exposure reduction based on the patient’s documented sensitivities. Use the patient information sheet provided by your Phadia representative

- Consider referral to an appropriate specialist

*Even at very low levels of specific IgE, there is still the possibility of clinical symptoms.


Test code: Speak to your sales professional on the availability of various panels

Specimens Collection Criteria: One 5 mL gold-top SST. (Min: 4 mL SST) Minimum Volume: 0.5 mL serum

NOTE: Twenty individual allergen assays or allergen screens can be performed on one 5 mL SST. Each allergen assay requires 100 mcL of serum.

For information or questions, please contact Customer Service at 800-551-0488 or Gabriel Maine, Ph.D. at 248-898-9008.