

Evolution of skin tests and specific IgE values of venom immunotherapy in daily clinical practice



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RATIONALE

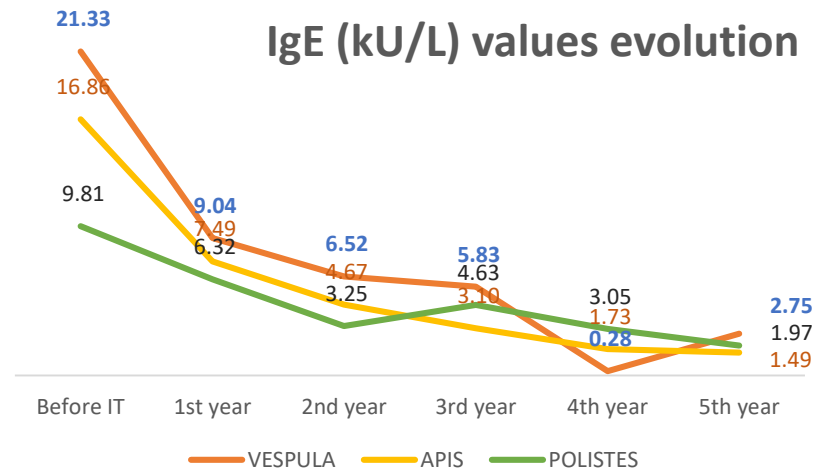
We aim to assess the evolution of hymenoptera venom specific IgE values and intradermal skin tests to the culprit venom of a group of patients treated with venom immunotherapy throughout the duration of the treatment. Every patient received the same rush build-up protocol and maintenance protocol with 100 mcg dose every 1-2 months.

METHODS

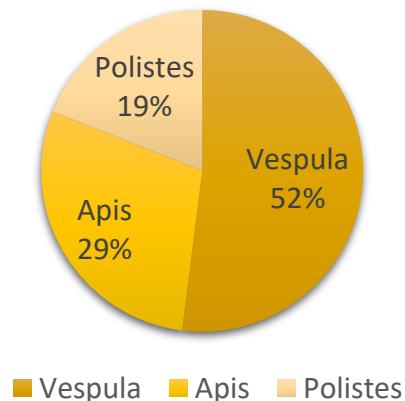
We performed a retrospective study including clinical records from 2000-2016 of patients who were treated in our center with venom immunotherapy. **We recruited 58 patients** who received immunotherapy for at least 5 years, taking into account the following aspects: the extract administered, degree of severity of the original sting, annual specific IgE values and intradermal tests (considering the lowest concentration as the positive result) to the culprit venom.

RESULTS

Apis stings produced a more severe original reaction with regards to Polistes and Vespula respectively. The most frequent received venom immunotherapy was Vespula (52% of our patients), followed by Apis (29%), and Polistes (19%). **Average specific IgE values decreased for every hymenoptera venom after receiving immunotherapy for five years (decrease of 74% for Vespula IgE, 74% for Apis IgE and 65% for Polistes IgE).** The mode value for intradermal skin tests changed from being positive at a concentration of 0.001 to 0.1 mcg/ml after five years of immunotherapy for all the patients included in this study.



Immunotherapy received



CONCLUSIONS

It is important to evaluate our patients annually by means of specific IgE and skin tests in order to decide about the management of every patient.