Science in Brief



The Future of Specific Immunotherapy in Europe

Allergens are MEDICINAL PRODUCTS

Medicinal products REQUIRE MARKETING AUTHORISATION

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What Spanish allergists think about the AIT REGULATORY PROCEDURE







According to the Spanish Agency of Drugs there will be 3 quality LEVELS:

- 1. Final Product
- 2. Bulk
- NPP (Named Patient Products)



Methods

- An e-survey was launched in order to collect the opinion from spanish allergists in 4 main aspects:
 - Final Product
 - Mixtures
 - Evidence
 - Miscellaneous
- ▶ 74 AIT experts were invited, 56 (74%) fulfilled the questionnaire





sociedad española de alergología e inmunología clínica

▶ State what is the relevance (according to the prevalence of allergy) of each allergen for its registry as "final product" for AIT:

- Scale:
 - High
 - Moderate
 - Mild
 - None



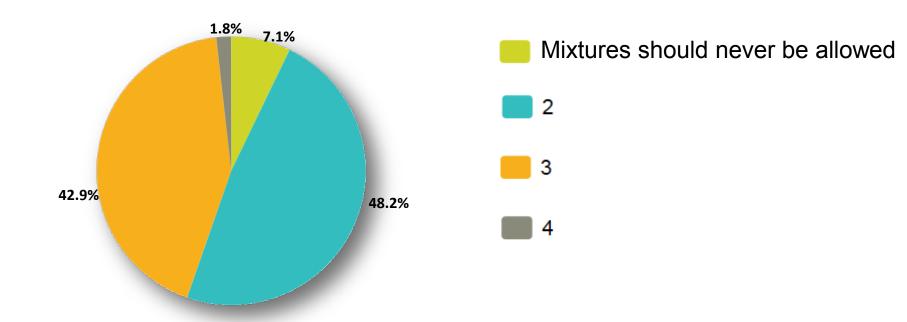
Percentage of doctors considering allergens of High or High+moderate relevance:

ALLERGEN	HIGH relevance	HIGH + MODERATE
Dermatophagoides pteronyssinus	89.3%	94.7%
Phleum pratense	85.7%	96.4%
Grass mixture	82.1%	98.2%
Olea europea	83.9%	92.8%
Alternaria alternata	80.4%	94.7%
Cat dander	72.3%	90.2%
Dog dander	60.7%	87.5%
Dermatophagoides farinae	55.4%	87.5%
Parietaria spp	51.8%	76.8%
Horse dander		71.4%
Cupressus arizonica		96.4%
Platanus acerifolia		83.9%
Salsola kali		76.8%
Lepidoglyphus destructor		60.7%

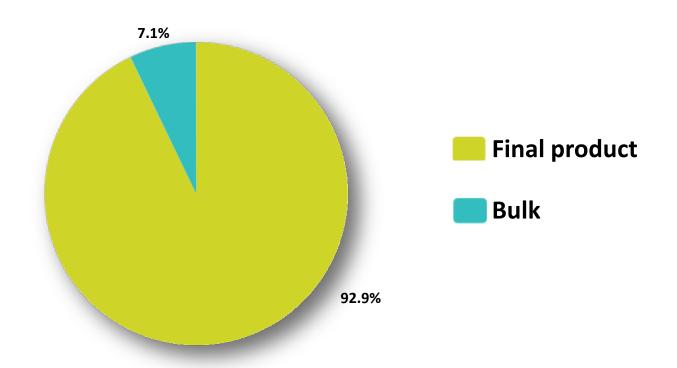




▶ What is the **maximum** number of different **allergens** that should be **allowed to mix** in the same vaccine?

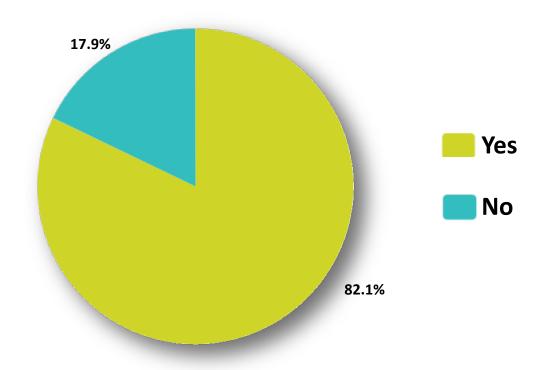


What would you prefer to use in your practice: bulk or final product AIT?





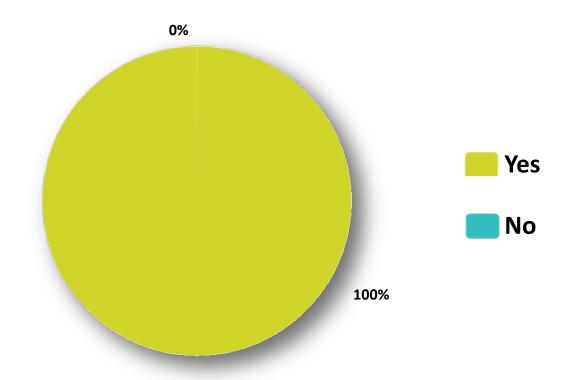
Is it **better** to register **mixtures** as **Final Product than** creating individual **mixtures** from **bulk** products?:







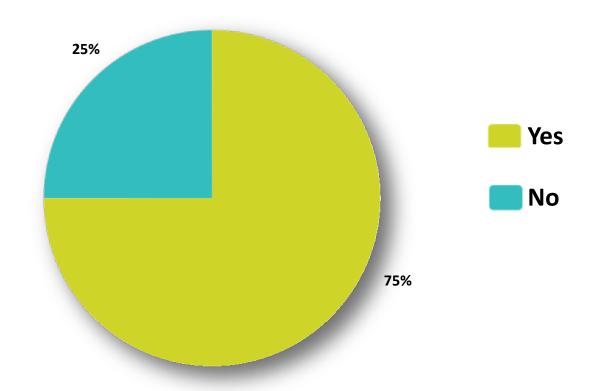
▶ Efficacy of each specific allergen used in AIT must ALWAYS be evidenced:







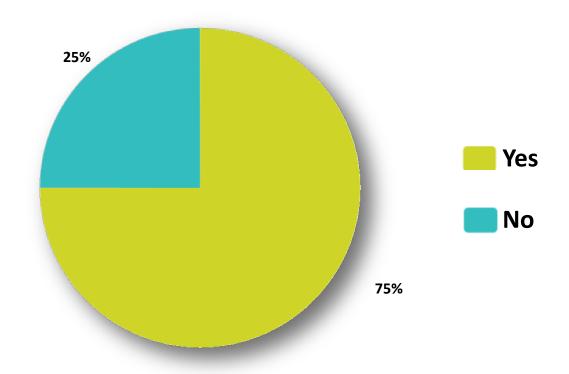
▶ The regulatory agencies should limit the NUMBER of allergens to be included in a mixture







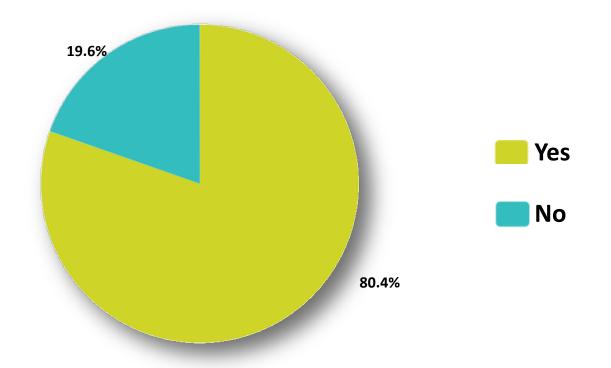
▶ The regulatory agencies should limit the TYPE of allergens to be included in a mixture







Do you consider that "Named patient products" should be allowed?







▶ I think it's good "named patient products" are allowed ONLY for low prevalence allergens (ie: flour)

