EAACI's Presidential Message: Reaching out to Society

New projects:
The Allergy Observatory and Allergy Registries

Biologics for immune-mediated disorders

EAACI-WAO Congress 2013 – Excellence in Global Allergy and Asthma Science
EAACI FOOD ALLERGY AND ANAPHYLAXIS

Guidelines

Chapters
Anaphylaxis
Food Allergy Diagnosis and Management
Prevention of Food Allergy
Food Allergy Quality of life
Managing patients with food allergy in the community
Reaching out to society

EAACI has been very successful in almost all the activities that we have undertaken. Through our events with high educational value, position papers and other reference texts, top scientific journals, and high level evaluation and accreditation procedures, we have managed to develop a top-level international platform which brings people together and organizes activities with the intention of understanding and combating allergic and immunological diseases.

But are we successful in alleviating the pain and improving the quality of life of our patients? There is no doubt we are – many studies and testimonies demonstrate the effectiveness of our treatments and management approaches, both in theory and in real life – but we achieve it only to some extent. There is still a lot of suffering out there associated with allergic diseases which we remain incapable of influencing, whether as a result of undiagnosed cases, or lack of access to treatment in less privileged populations, or due to the (not at all negligible) proportion of non-responders to treatment. We still have a long way to go to optimize our treatments, and even further to reach the sought after prize of prevention!

The next question is obvious: what we can do, in addition to our current dedication to research and clinical practice, that can really make a difference to the lives of the millions of people with allergies, as well as to the lives of those who have not yet, but will eventually, suffer from the disease? There are obviously many actions that could be taken: intensification of research and optimization of clinical practice will remain priorities for years to come. However, what I think could equally make a radical difference is advocacy and outreach.

Society thinks that allergy is a trivial condition, a sort of charming disturbance, used in films and literature to shift the plot but very rarely, if ever, referred to as something that can cause any real grief, such as other ‘real’ diseases. Both you and I, however, know that this is only partly true. Among our patients, one in ten or one in twenty, depending on the work setting, has their life driven not by themselves, their hopes or inspirations but by their severe asthma, food allergy or eczema. Equally, we cannot neglect the millions of mild sufferers, who use huge amounts of resources, while missing school or work, and who are hampered by a condition that is most frequently manageable.

We have a responsibility to highlight these facts, as widely as possible. Allergy is a ‘new’ condition, the result of our changing world and life-style, and not expected to disappear in the near future. National programs, such as the Finnish Allergy Program, demonstrate the benefits of being proactive. If it is not possible to cure, we need to make all efforts to control.

Actively talking to society about allergy is one of the main goals of my Presidency. A number of related activities are designed to maximize the transmission of the message: The Allergy Public Rhetoric Observatory, a unique mechanism monitoring public rhetoric about allergy and intervening when necessary, is one of these, in addition to a public health campaign and lobbying activities aimed at decision makers. The dedication and determination of our expanding EAACI membership, including patient organizations, primary care practitioners, veterinary doctors and more, to transmit the message, is the key to the next EAACI success!
In 2013, the Queen Elizabeth Prize for Engineering was awarded to five engineers who helped create the internet and the World Wide Web. Sir Tim Berners-Lee was amongst them. Without “the man behind the World Wide Web” there probably wouldn’t be Google, Twitter or even the EAACI website! While being honoured during the London 2012 Olympic Games opening ceremony, he tweeted “This is for everyone”. And indeed, the advent of the Internet has profoundly changed the concept of community, by eliminating all communication limitations.

In June, during its annual Congress, EAACI celebrated the Week of World Allergy Science. 7700 delegates from 110 countries were connected by a wide array of topics ranging from curiosity-quenching medical advice to cutting-edge science. The EAACI Food Allergy and Anaphylaxis Guidelines and The Global Atlas of Asthma, launched during the Congress, address global unmet needs due to gaps in current scientific knowledge and in patient care, and due to global social determinants of health. The EAACI-WAO Allergy and Asthma Congress reinforced EAACI’s global scientific leadership in Allergy and Clinical Immunology and proved once more that the EAACI community has no geographical or specialty limitation. With more than 8000 members from 121 countries and embracing patient organizations, primary care practitioners, veterinary doctors and allied health professionals, the EAACI is a thriving organization with a top level “Sense of Community Index”, offering its members global citizenship and an international outreach programme.

But first-class science needs to be translated into improved patient care. Under the leadership of Nikolaos G. Papadopoulos, the EAACI is launching a very ambitious strategic program aiming to reach out to society and actively talk about allergy as one of the major diseases of our times, which influences the lives of millions of people around the World. Upcoming projects, such as EAACI becoming a primary provider of allergic disease management guidelines, the Allergy Public Rhetoric Observatory, or the EAACI platform for disease registries, promote EAACI as the primary voice in allergy science, research, education and advocacy on allergy.

Please remember that the EAACI is your community. Each and every member makes the Academy what it is today, so don’t be afraid to get involved and share. Bring your questions, knowledge and experience. Whether you are a leading scientist or just starting out on your training, a clinician or researcher, a healthcare professional or patient, regardless of the specialty or the corner of the world you come from, the EAACI is for everyone who wishes to alleviate the allergy burden.

Ioana Agache
EAACI Newsletter Editor
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1. Tell us about yourself, please
I was born in Amsterdam in the fifties and therefore belong to what is often called the baby-boom generation. I have always lived in the Amsterdam area except for one year as a child living in India. This encounter with poverty and a completely different culture has had a lasting impact on my way of viewing the world. I have always been drawn towards biosciences but started studying history before ending up in my current field of Molecular Allergology. Since 2009, I have been a full professor in Molecular and Translational Allergology at the Academic Medical Center of the University of Amsterdam. My main fields of interest are related to answering the following questions: what makes an allergen an allergen and how is the process of sensitization to allergens regulated and influenced by environment, infections, lifestyle and diet? To contribute to finding the answers to these questions, my group is involved in studies on the molecular structure and function of allergen molecules, in large epidemiological surveys around the world and, more recently, in mouse model studies. Translational work centres around applying allergen molecules and derivatives to innovative diagnostic tests and immunotherapeutic strategies.

2. What is your experience with EAACI and with organising meetings?
I have been going to EAACI meetings for around two decades, without interruption. I have seen them grow from around 3000 attendees to the current 7500–8000. The quality of science has grown in parallel, making the Annual Congress now undoubtedly the leading event in the world. I was involved in the organization of the 2004 EAACI Annual Congress in Amsterdam and co-organised (with Johannes Ring) the 2008 CIA meeting in Curacao. As Vice-President Congresses, I am looking forward to contributing to the success of the forthcoming Annual Congresses and Focused Meetings.

3. What are your objectives as Vice-President Congresses?
My primary objective as Vice-President Congresses is, of course, to make sure that our Annual Congresses remain the world’s leading scientific events in our specialty, reaching out more and more to the entire world. In addition to that, I want to make sure that the Focused Meetings provide a forum for those who want to concentrate on more specific areas, allowing close interaction in a scientific and friendly atmosphere. Focused Meetings should complement our Annual Congresses by providing more in depth information in specific areas, attracting attendees who might otherwise not go to our Annual Congresses. In the EAACI Congresses, it is absolutely essential to provide promising young scientists in the JMA a platform that allows them to present themselves, learn from key opinion leaders in the field, and thus develop into the new generation of opinion leaders and EAACI leadership.

4. Tradition or innovation: what will you choose when organising future EAACI meetings?
It is important for EAACI to stay in touch with innovations that could improve the quality of forthcoming meetings. The JMA plays an important role in educating us old guys about new developments. Having said that, it is important to have a consistent quality based on formats and techniques that have proven to be efficient and effective, even if they could be thought of as traditional. New audiovisual and IT options have to be considered but, at the same time, they need to be introduced carefully, whilst also sticking to a solid budgeting regime. One of the important issues that I want to pursue during my Vice-Presidency is an investigation of how novel formats could support building top quality Congress programs more effectively. The selection of speakers should become even more focused on scientific and communication quality than it already is, moving ever further away from the temptation to invite “the usual suspects” over and over again.

5. What challenges do you foresee?
The major challenges for the Congresses will be to keep their funding solid and sound. Our sponsors and the EAACI need each other and will have to creatively adapt to a changing world in which regulatory demands are increasing. The EAACI will have to interact closely with national and international authorities and with its main sponsors to adapt to new legislation, finding new ways to optimally accommodate the needs of its sponsors and, above all, of its attendees. We need to find ways to build trust with the authorities and, at the same time, continue to provide the friendly scientific atmosphere that optimally facilitates networking and collaboration. This is what makes EAACI Congresses so successful!
Peter W. Hellings  
-EAACI Treasurer

1. Tell us about yourself, please
   I am Professor in Otorhinolaryngology at the University Hospitals of Leuven, Belgium, and perform part-time research in the field of upper airway immunology and part-time clinical work at the rhinology clinic of the University Hospitals of Leuven. Out of recognition for the outstanding profile of EAACI and in view of my affinity for EAACI, I accepted the task of becoming the Treasurer of EAACI, after having served the Academy as Chair of the ENT section from 2011 to 2013.

2. What is your experience with EAACI?
   Since the beginning of my PhD fellowship in 1997, I have been an enthusiastic member of EAACI, which I considered to be the best platform for sharing the most recent scientific and clinical data in the field of allergology and immunology. In view of the good mixture of lectures on basic and clinical science, the high-standard of invited speakers, the opportunities for junior members to join and speak at annual Congresses and Focused Meetings, and the general atmosphere of friendship and collegiality, I have not missed one single annual meeting since 1997 as they represent a source of inspiration for my clinical and scientific work. As a consequence, my PhD fellows are warmly encouraged to attend the annual Congress and Focused Meetings, as doing so opens their view on the scientific and clinical evolutions in the field, hence stimulating them in their doctoral work.

3. What are your objectives as EAACI Treasurer?
   The main objective of the Treasurer of a large Academy like EAACI is to ensure a good financial balance without sacrifice of the quality of the annual Congresses and Focused Meetings, and without sacrificing support of the younger generation of researchers and clinicians via the Allergy Schools and Fellowship programs. Everyone will understand that this is an ambitious goal that can only be reached properly trained, and by giving them opportunity to exchange ideas and establish collaborations through EAACI. All these noble actions, proposed by EAACI for 2013–2015, require an allocated budget. It will be the major challenge of the current team of the Board of Officers to guarantee the future of the EAACI, via investment in the future of our members.

4. Please give us an overview of EAACI finances
   EAACI had a healthy and transparent financial state at the time the previous Treasurer, Antonella Muraro, handed over the position to me in Milan this year. EAACI is investing almost 50% of its resources on education, including Congress organization, task forces, scientific communication, education, Allergy Schools and external strategic activities. EAACI’s income is generated via different channels: membership, communication, sponsorship and Congresses. It is obvious that the duty of the Treasurer and the whole Executive Committee is to ensure a positive balance at the end of each year, in order to ensure the continuation of EAACI’s educational projects.

5. What challenges do you foresee?
   EAACI’s Strategic Program for 2013–2015 is ambitious and aims at strengthening the position of EAACI within the field of Allergology and Immunology in Europe and beyond. The major challenge will be to continue to grow in the field, despite dynamic changes in the regulations on Congress participation and organization. Growth in the field can only be achieved by continuous efforts to provide members with true benefits for their daily practice via different educational platforms for members, by offering junior members the possibility to be properly trained, and by giving them opportunity to exchange ideas and establish collaborations through EAACI. All these noble actions, proposed by EAACI for 2013–2015, require an allocated budget. It will be the major challenge of the current team of the Board of Officers to guarantee the future of the EAACI, via investment in the future of our members.

EAACI EVENTS

September 2013
19–21 September 2013 – Allergy School on Allergic Reactions to Drugs: From Phenotype to Genotype, Málaga, Spain

October 2013
7–11 October 2013 – The place of “omics” in the diagnostic lab: Update on A & CI Laboratory Methods Allergy School, Greifswald, Germany
17–19 October 2013 – Pediatric Allergy and Asthma Meeting (PAAM), Athens, Greece

November 2013
1–3 November 2013 – EAACI Fellowships: Applications open
1–3 November 2013 – EAACI Newsletter

December 2013
5–7 December 2013 – International Symposium on Molecular Allergology (ISMA), Vienna, Austria
EAACI member fee invoices are sent out

January 2014
31 January 2014 – EAACI Fellowships: Applications close
2–4 February 2014 – Winter School

February 2014
1 February – EAACI/UEMS Knowledge Examination: Applications open
9–12 February – Drug Allergy Hypersensitivity Meeting (DHM), Bern, Switzerland

March 2014
Research Methods Allergy School, Newcastle, UK (tbc)

April 2014
1 April – EAACI/UEMS Knowledge Examination: Applications Close
9–12 April – Drug Allergy Hypersensitivity Meeting (DHM), Bern, Switzerland

June 2014
6 June – EAACI Exam
7–11 June – EAACI Congress 2014, Copenhagen, Denmark

This calendar is intended to inform EAACI members about the Academy’s most important dates. Note that some final dates may vary slightly as a number of planned EAACI events are not confirmed at the time of printing.
New EAACI Executive Committee

The new EAACI Executive Committee was formally approved at the General Assembly in Milan on June 24. A total of 28 members were voted onto the Committee and they now form the core group of leadership for the next two years.

Meet the 2013–2015 EAACI Executive Committee

**EAACI President**
Nikolaos G. Papadopoulos
Greece

**EAACI Secretary General**
Antonella Muraro
Italy

**EAACI Treasurer**
Peter Hellings
Belgium

**EAACI Vice-President Communications & Membership**
Ioana Agache
Romania

**EAACI Vice-President Education & Specialty**
Pascal Demoly
France

**EAACI Vice-President Congresses**
Ronald Van Ree
The Netherlands

**EAACI Past President**
Cezmi A. Akdis
Switzerland

**Section Chairs**
Asthma Section Chairperson
Leif Björner
Sweden

Dermatology Section Chairperson
Carsten Bindslev-Jensen
Denmark

ENT Section Chairperson
Cemal Cingi
Turkey

Immunology Section Chairperson
Carsten Schmidt-Weber
Germany

Pediatric Section Chairperson
Susanne Lau
Germany

JMA Chairperson
Alexandra Santos
Portugal

**Interest Group Representatives**
Moisés Calderón
United Kingdom

Karin Hoffmann-Sommergruber
Austria

**Members at Large**
Lars K. Poulsen
Denmark

Tomás Chivato
Spain

Thomas Werfel
Germany

Beatrice M. Bilò
Italy

Graham Roberts
United Kingdom

Musa Khaitov
Russia

**CME Committee Chair**
Fulvio Braido
Italy

**Specialty Committee Chair**
Jan De Monchy
The Netherlands

**Ethics Committee**
Jacques Gayraud
France

**Exam Committee Chair**
Peter Schmid-Grendelmeier
Switzerland

**SPC Coordinator**
Marek Jutel
Poland

**Website Coordinating Editor**
Chrysanthi Skevaki
Greece

**Executive Director**
Michael Walker
Switzerland
EAACI launches a new communication tool: The Allergy Public Rhetoric Observatory

Communication is valuable; however, the message delivered should be correct. In a world dominated by interactive media social outlets, knowledge dissemination is no longer confined to medicine and science, and a significant shift towards non-medical opinion contributors can be observed. There is a need to balance the “newsworthy” stories with their scientific content.

By examining how rhetorical judgment and invention are articulated by the general public a higher participatory and responsible citizenry can be fostered, while keeping intact the scientific value of the information.

With allergy affecting the lives of close to 1 billion people worldwide, the online rhetoric on allergy has been increasing in intensity and widening in audience reach, but is unfortunately flooded by non-scientific elements that confuse or misinform and eventually disenfranchise patients and their relatives. The need to re-empower patients and help them defend their health by establishing the scientific truth about allergy becomes ever so salient.

As part of the new Strategic Program for 2013–2015, an Allergy Public Rhetoric Observatory has been initiated as a pathway of connectivity between the EAACI’s experts, media and the general public. The main goals are to promote EAACI as the primary voice of allergy science, to provide best practice tools and resources, and to protect the general public from knowledge dilution and misinformation.

As a communication tool, the Allergy Observatory is a contextual, creative and audience-centered endeavour, which aims to earn understanding and support, manage information by which people form their opinion, influence behaviour, increase awareness and general interest on allergic diseases and shape a strong EAACI image in the eyes of the public.

The Allergy Observatory will consistently monitor the allergy-related public domain, flag false or inadequate information and respond in a timely fashion with structured and accurate data, giving particular focus to matching the right messages with the right content through the right channels. With the aim of capturing all high-impact rhetoric channels, the Allergy Observatory will move beyond the scientific domain to online social outlets that register massive readership and engagement – be it websites, discussion forums or social media platforms, where allergy is canvassed as part of the public’s every day concerns.

The first phase has already been completed and the Allergy Observatory is now well on track to achieve full development. Stay tuned for upcoming news.

Nikolaos G. Papadopoulos
Ioana Agache
Physicians, payers and patients all want evidence of the results of medical products, therapies and services in large and diverse populations, and in situations that represent real-world conditions.

In a world of limited resources and patients with a myriad of risk factors and health conditions, stakeholders need to determine which services are safer and more effective under a variety of real-world scenarios and in the populations that they serve. Disease or patient registries are collections of secondary data related to patients with a specific diagnosis, condition or procedure. Patient registries can provide EAACI, as well as the health community, with invaluable data about the natural history of a disease under standard care practices. These data can then be used for education, advocacy and support guideline development.

There has been increased enthusiasm from EAACI Interest Groups in obtaining patient-related information in survey format. In the last couple of years, a number of projects related to registries have been developed in parallel. At the core of this activity, the newly formed Epidemiology Interest Group proposed a Task Force (A-REG) with the aim of evaluating the feasibility and setup of the necessary infrastructure for EAACI to be able to coordinate and implement patient registries. In the context of this activity, collaboration with an EU Public Health project (PARENT; see: www.patientregistries.eu) was set-up. PARENT has the aim of supporting the development, governance and cross-border use of registries, harmonizing definitions and developing a registry of registries.

A-REG has performed a systematic evaluation of the literature, as well as a survey amongst EAACI members, in order to identify and describe the allergy-related registries currently active in Europe.

In parallel, with these developments, the Immunotherapy Interest Group set up a Task Force to conduct the first prospective European Survey on Systemic Adverse Reactions due to Allergen Immunotherapy (AIT) (EASSI), using MedDRA’s (Medical Dictionary for Regulatory Activities) harmonized terminology, as there is currently no European report on clinically relevant systemic reactions due to the regular use of subcutaneous (SCIT) and sublingual (SLIT) AIT outside clinical trials.

A multicentre, observational, real-life setting, web-based pilot survey of 12-15 months’ duration was designed and is currently being conducted in France, Germany and Spain. The pilot survey population includes adults and children, both male and female, with IgE mediated pollen and/or house dust mite, alternaria and/or animal dander respiratory allergies who will undergo AIT, either SCIT or SLIT, according to real-life clinical standards of practice.

In parallel to the above activities, the Balkan network, a network that was active within EAACI some years ago, started discussions to be reactivated. After email interaction, the first meeting of the renewed network took place in Milan. The group developed a plan to use the experience and tools generated by A-REG and EASSI in order to setup an Immunotherapy Registry, expanding the survey format of EASSI into a longitudinal registry, with the vision of using the data for immunotherapy adverse event surveillance.

The integration of parallel activities and the synergy of the groups involved is a perfect example of the functionality of the EAACI as a platform promoting collaboration and scientific exchange, to address patient and public health issues.

Registries can be used for surveillance but also for real-life research; the new EU Public Health Program considers them as key tools for evaluating and monitoring dynamic disease states and treatments in a cost-effective way. Setting the framework for development and harmonization of allergy-related registries is part of EAACI’s strategic program for 2013-2015, already in progress.

Moisés Calderón
Nikolaos G. Papadopoulos
The Finnish Society of Allergology and Immunology was established on 18 January 1846, by a group of physicians with a special interest in allergology. The first chairman of the society was Dr. Zaida Eriksson-Lihr, who later became one of the founders and chief physician of the Allergy Hospital in Helsinki. The Allergy Hospital was one of the first hospitals in the world specializing in allergology.

Today, more than 400 physicians and other experts of allergology have joined the Finnish Society of Allergology and Immunology. The members include pulmonary specialists, ENT-specialists, pediatricians, dermatologists, chemists, biochemists, biologists and engineers. The society board consists of seven members who meet five to six times a year. The main aim of the society is to promote high-quality allergology related education and research in Finland, by organizing meetings twice yearly with a scientific program and dinner, and by awarding research grants each year to members of the society. In addition, the society provides statements to officials, e.g. ministries of the government, when needed. The Finnish Society of Allergology and Immunology is a member society of EAACI and WAO, and has representatives in UEMS. The society also takes part in the activities of the Nordic association of allergology (NFA), and will organize the next NFA scientific symposium in August 2014 in Tuohilampi, Finland.

Anna Pelkonen
Sanna Poikonen
Arja Viinanen
Paula Virkkula

Members of the board of the Finnish Society of Allergology and Immunology in 2013
The International Collaboration in Asthma, Allergy and Immunology (iCAALL)

The International Collaboration in Asthma, Allergy and Immunology (iCAALL) was formed by the European Academy of Allergology and Clinical Immunology (EAACI), the American Academy of Allergy Asthma and Immunology (AAAAI), the American College of Allergy Asthma and Immunology (ACAAI) and the World Allergy Organization (WAO) approximately 2 years ago. The mission of iCAALL is to globally increase awareness and communicate information about allergies, asthma, and immunologic diseases. Its target population is specialists, general practitioners, and other health care professionals with the aim to provide information for the general public, patients and policymakers around the world. The four organizations expect that this concerted effort will result in more competent care for patients by health care professionals and increased allocation of resources for research and patient care. So far iCAALL has developed 5 consensus articles and 7 more are planned in the pipeline. iCAALL was chaired by Prof. Dennis Ledford, Past President AAAAI, during the last 2 years, whilst I was elected by the four organizations as the new chair at the last steering committee meeting. It will be a great honour and pleasure for me to chair the iCAALL over the next two years and I look forward to an efficient collaboration between the four organizations.

Cezmi A. Akdis
Chair iCAALL, Past President EAACI

The International Consensus (ICON) on Drug Allergy launched in Milan, 25 June 2013

At last year’s meeting, iCAAL members decided to issue an International CONsensus (ICON) on drug allergy. Drug allergies are immunologically mediated drug hypersensitivity reactions (DHRs). These reactions are typically unpredictable; they can be life-threatening and require or prolong hospitalization, and can entail changes in therapeutic prescriptions. Both under-diagnosis (due to under-reporting) and over-diagnosis (due to the over-use of the term “allergy”) are common. A definite diagnosis of such reactions is required in order to institute adequate treatment and proper preventive measures. Misclassification based solely on the DHR history will have consequences for individual treatment choices, can lead to the use of more expensive or less effective drugs, and can be more detrimental for the patient than a complete drug allergy work up.

Several guidelines and/or consensus documents on general or specific drug class induced DHRs are available to support the medical decision process. The use in the ICON document of common systematic approaches for diagnosis and management of DHRs can considerably improve outcomes, and thus should be disseminated and implemented. The purpose of the ICON is to highlight the key messages common to many of the existing guidelines, while critically reviewing and commenting on any differences and deficiencies of evidence, thus providing a concise reference frame for the diagnosis and management of DHRs.

After 6 months of intensive work by a group of 13 authors from the four academic societies, 85 internationally recognized experts in the field of DHRs were invited to comment on the consensus document. The ICON was officially launched during the EAACI-WAO congress in Milan, in a session which covered its key messages, what it brings to the management of DHRs, and what the unmet needs in drug allergy raised by the ICON initiative are. The ICON now needs final approval by the governing bodies of the participating organizations, before publication and dissemination.

Pascal Demoly
EAACI Vice-President Education and Speciality

The International Consensus (ICON) on Pediatric Asthma

A summary of the Pediatric Asthma ICON was produced and offered to delegates of the EAACI-WAO Congress in Milan. The summary is in the context of the ICON dissemination plan, which will subsequently involve translation of the summary into various languages and its evaluation through a survey, which will assess the visibility and usefulness of the document to its target audience.

Nikolaos G. Papadopoulos
EAACI President

EAACI-WAO Congress 2013 – A story of excellence in Allergy Science and International cooperation

From 22-26 June in Milan, Italy, 7,700 delegates gathered for the Allergy event of 2013. A wide variety of Postgraduate Courses, the Primary Care Program, Nurses Program, the Italian National Program and the Patient Organisation Workshop ran alongside over 340 scientific sessions and a record number of 2145 abstracts. The innovative academic programme offered unprecedented access to brilliant minds and discoveries in allergic diseases and asthma together with knowledge and connections you need to practice at the forefront of science and medicine. Global Allergy was the theme of the Congress with delegates from 110 countries and 425 internationally renowned speakers supporting the EAACI outreach to international cooperation, networking and knowledge sharing. Up-to-date evidence-based reviews and original research of high quality blended well with educational initiatives and sessions aimed to increase awareness on allergic diseases among policy-makers and the general public. The overwhelming enthusiasm and energy of the JMA sessions deserves a special mention, since investment in young researchers is the top priority of EAACI. I would like to close by thanking the Scientific Program Committee, with members from both EAACI and WAO, who worked hard to create an outstanding scientific and educational program.

Marek Jutel
EAACI Scientific Programme Coordinator
Successful launch of EAACI Global Atlas of Asthma in Milan

Asthma is a major public health problem affecting the lives of several hundred million people around the world, with an increasing prevalence in developing countries. Governments and the general public face huge direct and indirect costs, with major effects on macroeconomics due to health-care costs, loss of productivity and the absenteeism of patients. Unfortunately, a high number of unmet needs are still to be resolved due to gaps in current scientific knowledge in pathophysiology and in patient care, and as a result of the global social determinants of health.

To tackle this huge global health problem, EAACI decided to develop the Global Atlas of Asthma. With this Atlas, our aims were: to gather evidence to call attention to the burden of asthma, to warrant its inclusion as a main concern in national health strategies; to demonstrate its priority as an issue for research; to describe risk factors for asthma; to evaluate the best ways to prevent and control it; to provide guidance on how to overcome barriers; and to alert political bodies to the issue of asthma to ensure a global management approach.

The Global Atlas of Asthma has been developed as an essential reference source for multi-sectoral use. With 59 chapters written by 80 contributing authors, and containing 147 illustrations and 46 tables, the Atlas will also be a comprehensive educational tool and desktop reference for medical students, allied health workers, primary care physicians, the medical industry, policy makers, patient organizations and specialists dealing with asthma and other comorbid diseases.

Cezmi A. Akdis
Ioana Agache
Editors of the Global Atlas of Asthma

General Assembly

The General Assembly is the governing body of the Academy, to which all EAACI members are invited and where they can gain information on EAACI activities, voice their opinion, ask questions and take part in decisions.

The EAACI 2013 General Assembly took place on Monday 24 June 2013 at the Annual Congress and was well attended by the EAACI membership. The EAACI Board of Officers reported on 2012 initiatives as well as on the overall status of the organization. The scientific excellence of the Annual Congresses as well as of the Focused Meetings and Allergy Schools has prompted a steady increase in membership, which has now reached 8,000. The diversity and high scientific level of EAACI publications, such as Allergy, Pediatric Allergy and Immunology and Clinical Translational Allergy, continue to attract different targets in the allergy field among health professionals and other stakeholders. Other projects, such as the Global Atlas of Asthma, now provide yet another avenue for increasing knowledge of allergic clinical manifestations, in parallel with EAACI’s continuous investment in Junior members’ education and empowerment.

Community outreach was a mainstay of the 2012 Food Allergy and Anaphylaxis Campaign, which aimed to raise awareness of food allergic patients’ daily lives. A key pillar of the Campaign was the delivery of the Food Allergy and Anaphylaxis Guidelines, with the aim of harmonizing practices across all European countries and implementing up-to-date knowledge of the everyday management of food allergy and allergic emergencies.

The Treasurer reported a healthy turnover for the previous year and the continuing safe state of finances of EAACI, with close attention to global financial downturn.

President Elect Nikolaos Papadopoulos highlighted his Presidential Strategic Programme, which focuses on the engagement of EAACI members and their feeling of belonging to the organization. Excellence in science, motivation and transparency will continue to constitute the foundations for EAACI’s sustained improvement.

The Assembly also approved the new Executive Committee and new Board of Officers by vote of the EAACI membership. On approval, Prof. Cezmi Akdis handed over the gavel to Prof. Nikolaos Papadopoulos, symbolically marking the start of his Presidency for 2013–2015.

EAACI thanks all its members for participation at the General Assembly and looks forward to seeing them once again in Copenhagen 2014!

Antonella Muraro
EAACI Secretary General

The Public Image of EAACI

The EAACI-WAO Congress 2013 also received much abundant exposure in the media with both national and regional television channel from Italy, RAI, covering the event. Articles covering the highlights of the Congress were also published in numerous national newspapers worldwide and a great number of one-to-one interviews with speakers and the EAACI leadership were set-up, providing a personal service to the industry press attending our events. In terms of media coverage it has been our best event ever with more than 1,000 articles published online so far and many more promised.

Macarena Guillamon
Ioana Agache
EAACI rises to the challenge of promoting allergic diseases as a major health problem at the EU level

A major priority of the 2013–2015 EAACI Strategic Program is to position the EAACI as a trusted and valued source of information and advice for decision makers and officials for all allergy-related issues.

European Union (EU) institutions decide on policy and legislation in areas such as research, environment and public health for over 500 million people in 27 countries. The European Commission is aware of the rising burden of allergies in Europe, in particular in children, and is promoting EU action to help people choose healthier diets and lifestyles, as set out in the Strategy for Europe on nutrition, overweight and obesity-related health issues. However, despite the millions of EU citizens suffering from allergic conditions, the issue has only recently started to be regarded as a major healthcare problem.

Under the new EAACI Strategic Program, a comprehensive strategy in collaboration with various stakeholders will be developed, with the aim of placing allergy higher up on the EU agenda in the research, medical education and public health domains. As a first step, an EU Brainstorming Workshop was organized during the EAACI-WAO Congress in Milan, aiming to bring together all the relevant stakeholders: EAACI, patients’ organizations (EFA), other networks such as GA²LEN and MEDALL, UEMS, and industry representatives. The workshop proved an excellent opportunity for all the participants to discuss the current European regulatory framework, to assess current challenges, and to share best practice and initiatives from across Europe.

The following action key-points were agreed upon:

- A harmonized and effective message should be developed, addressing the sensitivities of EU legislators.
- Patients should be asked and actively involved in all EU initiatives.

- A persistent presence in Brussels and collaboration between the different stakeholders is needed.
- EAACI welcomes the participation of all key partners, responsible authorities and stakeholders in a collaborative network aiming to:
  - expand the existing programs/tools and explore innovative solutions to develop a comprehensive EU strategy;
  - reinforce the role of best allergy practice, education and prevention in a structured management strategy;
  - empower people to overcome allergic diseases effectively;
  - promote successful public policy measures and research projects to tackle allergic conditions; and
  - increase allergy’s profile on the EU political agenda.

Victòria Cardona

Nikolaos G. Papadopoulos
Ioana Agache
Food Allergy and Anaphylaxis Campaign

Patients react to the same allergens in different ways and this difference affects the clinical response to specific allergy immunotherapy (SIT). The benefit of SIT seems to be higher at the earliest stages of the sensitisation process, so SIT should be prescribed as soon as possible if it is indicated.

On 23 June 2013, at the EAACI-WAO World Allergy Congress, the EAACI Food Allergy and Anaphylaxis Guidelines were introduced to the EAACI membership in a packed session room. The Guidelines are the fruit of over two years of hard work, involving more than 100 scientists from an EAACI multidisciplinary team including Patient Organizations, nurses, dieticians and food technologists, and an independent Panel of Experts from all over the world.

As highlighted by the presenters (Antonella Muraro, Aziz Sheikh and Karla Soares-Weiser), the Guidelines represent systematically-developed statements to assist practitioner and patient decisions about appropriate health care for specific clinical circumstances, and can be used to assess the appropriateness of specific health care decisions, services and outcomes. Prof. Sheikh and Prof. Soares-Weiser described the proper methodological approach to ensure the best translation from available knowledge to clinical practice, and the process undertaken for the EAACI Guidelines. Prof. Muraro pointed out the needs for education at primary care level, the difficulties in recognizing the symptoms of food allergy and anaphylaxis, the lack of standardized treatment throughout Europe, as well as the need to raise awareness at a political level. In the context of the Guidelines therefore, there will be primary users (such as practitioners, patients and families, and health care institutions) but also secondary users (such as fee payers, health benefit plans and policy makers) as well as additional users (such as educators, patients’ organizations and legislators). The Guidelines will be a valuable tool for the health care community and for the community at large, and their implementation will help ensure a reduction in the variation of practices together with the optimization of health service use, quality of care and risk management, ultimately impacting resource allocation and providing better returns for allergy care costs.

Antonella Muraro
Chair of the Food Allergy and Anaphylaxis Project
EAACI Secretary General

Patient Organization Workshop

The annual Patient Organization Workshop at the EAACI-WAO World Allergy Congress 2013 was focused on the theme of the Food Allergy and Anaphylaxis Public Campaign. Prof. Cezmi Akdis (EAACI Past President) and Prof. Nikolaos Papadopoulos (EAACI President) welcomed delegates, underlining the strength of a partnership between health professionals and patient organizations in advocating for allergy sufferers. Prof. Krzysztof Maruszewski (Director of the European Commission’s Joint Research Centre–Institute for Health and Consumer Protection) highlighted the strong commitment of the EU Commission in promoting research in the field of food allergy, whilst Prof. Basil Mathioudakis (Head of Unit, DG Sanco: Nutrition, food composition and information) pointed out the pending issues regarding thresholds. The themes of the socio-economic cost of food allergies, as well as reimbursement issues, were described in depth by Prof. Helen Smith (UK) providing the European perspective, Prof. Gary Gross giving the US one, and Prof. Richard Loh reporting from Australia.

With the increasing prevalence of food allergies in Europe as well as in the US, Prof. Ruchi Gupta (US) and Prof. Lynne Frewer (UK) evaluated the real economic cost associated with food allergy. In a recent study, Gupta estimated that food allergy costs the average family with one allergic child $724 per year. These costs were directly linked to hospitalizations, doctors’ visits, emergency room treatments, doctor consultancies, therapies and pharmacies. Although Prof. Gupta was successful in being able to estimate the “real” costs, she pointed out that the “social” costs, including the loss of working days for parents who lose productivity due to hospitalizations and medical visits for children, are more difficult to quantify. Many families also have one parent who works part-time or who has to renounce work opportunities in order to ensure their children are properly cared for.

The issue of thresholds was addressed at a session presenting the results of a unique consumer survey which had been distributed in more than 17 countries world-wide to obtain a global perspective on the issue. With almost 10,000 respondents, the survey showed that people have a very poor understanding of what thresholds are, as well as their reluctance to use products that could have trace amounts of an allergen. Representatives from prominent nutritional industries, European agencies (such as the European Food Information Council), Food Drink Europe, as well as the patient community all provided a wide forum on several un-tackled issues for stakeholders.

Antonella Muraro
Chair of the Food Allergy and Anaphylaxis Project
EAACI Secretary General
Primary Care Symposium

The inaugural Primary Care Symposium was a great success. The day started with a talk by Dermot Ryan on self monitoring in asthma, followed by Osman Yusuf’s session on an update on the Global Alliance against Respiratory Diseases (GARD). Contributions from The Netherlands included speakers Helen Moed, on rhinitis, and Bertine Flokstra De Blok, on emergency action plans in high risk food allergic patients. Mustafa Erkoçoğlu from Turkey discussed knowledge of primary care workers regarding food allergy, whilst Jennifer Higgs shared experiences of self care behaviours of adolescents with food allergy. Ola Storrø from Norway summarized tests available in primary care, Elisabeth Angier emphasized the importance of history taking, whilst the day was rounded off by Prof. Aziz Sheikh speaking about future training needs.

The sessions were well attended by a multidisciplinary audience generating lively debate with an emphasis on sharing experiences from different countries and supporting each other. Our thanks go to our Chairs, including Mike Thomas, Breda Flood, David Price and Radoslaw Gawlik, who all ensured a lively interchange of questions.

We hope to include a symposium in the middle of the main Congress in years to come to facilitate networking and access but next year’s Symposium will be on the Saturday, with access to practical sessions, as part of the Allergological Bazaar.

The inaugural meeting of the Primary Care IG was also held. Dermot Ryan was elected Chair of the Group, which will be formulating a five-year strategic plan; the Group welcomes suggestions from the wider membership. We plan to work closely with other groups, especially the Patient Organization Committee and Allied Health Group, and plan to map primary care members across Europe via member organizations and wider links.

We are honoured to become the latest addition to the EAACI family.

Dermot Ryan
Elisabeth Angier

EAACI Awards 2013

Each year the EAACI honours European researchers and clinicians who have contributed significantly to the development of innovative diagnostic and therapeutic strategies for the control and prevention of allergic diseases, to the understanding of their pathophysiology and to the strengthening of allergology as a specialty in Europe.

The Academy presented the 2013 EAACI Awards during the Opening Ceremony of the EAACI-WAO Congress 2013 in Milan:

- The Charles Blackley Award (2013), for improving the promotion of the specialty, was awarded to Professor François-Bernard Michel.
- The Clemens von Pirquet Award (2013), for improving clinical research, was awarded to Professor Martin K. Church.
- The Daniel Bovet Award (2013), for improving treatment and prevention, was awarded to Professor Claude Molina.
- The Paul Ehrlich Award (2013), for improving experimental research, was awarded to Professor Monique Capron.
The influence of the microbiome on the development of allergy and asthma cannot be underestimated, with promising studies underway to answer key developmental questions.

Many factors and events occurring within the initial period of life can set the stage for later developments. This ‘vulnerable period’ begins in utero and extends to the first years of life. Beginning in utero, the maternal environment is important, with decreased microbial stimulation leading to impaired immune regulation and the subsequent risk of development of allergic sensitization. A reduced diversity in specific microbial phyla has been shown in children who later develop sensitizations. In an attempt to increase microbial diversity, pre- and post-natal probiotic supplementation was suggested to be protective against the development of allergy and eczema.

It has been noted that the increased incidence of allergy coincides with a reduction in dietary fibre. Fibre content modulates the microbial balance, affecting the levels of short chain fatty acids which are involved in the resolution of allergic inflammation.

The importance of microbiota in the airways and gut was investigated in murine models. The absence of microbiota in infancy leads to an exaggerated inflammatory response, which is absent when natural microbial colonisation is present. The allergic inflammatory response can be reduced by pulmonary bacterial supplementation.

The nature of the host-microbial interaction may be important for the development and maintenance of lung diseases, with asthma and COPD showing low microbial diversity. Severe asthmatics have reduced microbial diversity but an increased microbial load, in contrast to mild asthmatics who showed levels comparable to healthy controls.

Key papers cited:

Jenmalm MC et al., 2013 Clin Exp Allergy
Hilty M et al., 2010, PLoS ONE
Nembrini C et al., 2011, Thorax
Herbst T. et al., 2011 AJRCCM
Serena O’Neil
University of Gothenburg
Krefting Research Centre

**Biomarkers in allergy and asthma**

Biomarkers are ideally non-invasive, reproducible, disease relevant and cost effective, and have clinical applications for screening, diagnosis, prognosis and disease monitoring.

Several biomarkers, predominantly those guiding treatment, were reviewed in the Plenary Session by W. Canonica, M. Amagai and Robert Lemanske. FeNO, eosinophils, periositin and specific IgE, FeNO and sputum eosinophils are currently limited in their ability to guide therapy, with only modest differences observed in exacerbation frequency. Non-invasive measurements of serum, periositin, blood eosinophils and FeNO have the potential to predict Th2 inflammation and response to inhaled steroids. Sensitization to allergens in early life is known to be an important risk factor for the development of asthma. The Asthma Outcomes Workshop recommended the measurement of specific IgE as a core requirement in clinical research studies.

The skin is a possible route of sensitization, and barrier defects of the skin may result in enhanced allergen and pathogen entry. Mutations in the filaggrin gene, which encodes a protein crucial for epidermal stability, are a risk factor for atopic dermatitis and patients with such mutations have an increased risk of asthma. Filaggrin and its products may be associated with antiviral and antibacterial defence, peanut allergy and vitamin D metabolism.

The applicability of omics to asthma research was exemplified by pathway changes observed in the bronchial wall of responders to anti-IgE treatment. The increased application of omics to the fields of allergy and asthma may result in biomarkers to further assist disease management.

Key papers cited:

Hanania NA et al., 2013, Am J Respir Crit Care Med.
Riccio AM et al., 2012, Int J Immunopathol Pharmacol
Jia G et al., 2012, J Allergy Clin Immunol

Serena O’Neil
University of Gothenburg
Krefting Research Centre

**Handouts and CME**

- Did you attend the EAACI-WAO Congress 2013 in Milan? Even if you didn’t, have a look at the photos taken during the event. There are pictures from many symposia, workshops and business meetings and receptions available.

- Additionally, you can catch up on any presentations you missed by visiting the EAACI handouts website at www.eaacihandouts.net. It is a great resource and there are Powerpoint documents available to download freely.

- You should have already received your CME certificate; however, if it is yet to arrive, please contact info@eaaci.org
The 6th EAACI/UEMS Knowledge Exam for Allergology and Clinical Immunology took place on 22 June during the EAACI-WAO Congress 2013 in Milan. A record-breaking 50 participants took the exam, which also reflected the increasing acceptance of the exam amongst National Societies. As well as 42 candidates from Europe, this year also saw several candidates from further afield, including Australia, Chile, India, Israel, Kuwait, the Philippines, the United Arab Emirates, USA and Zimbabwe. Perfectly prepared by the local organizers and the EAACI HQ staff (led by Jeanette Kobler and Michael Walker), each candidate had to answer 120 multiple choice questions covering a wide range of allergology (about two-thirds of the questions), as well as basic and clinical immunology, within 3 hours. All candidates will receive a detailed summary of their tests and, if successful, a valued EAACI/UEMS certificate.

The exam is formatted according to latest knowledge in test methods and recent UEMS standards, and is analyzed by the Institute for Medical Education (IML), Switzerland. EAACI is also considering new modalities, such as an online version allowing the exam to be taken from distant locations, as well as other possibilities to reflect the different medical backgrounds of participants. In collaboration with JMA and EAACI HQ, example questions will be regularly published to facilitate test preparation. Interest Group and Task Forces will prepare 2 questions on recent guidelines and consensus papers, so that the current state of the art will become an integrated part of the exam. Anyone else willing to contribute is welcome to contact the Exam Committee (education@eaaci.org).

Peter Schmid-Grendelmeier
EAACI/UEMS Exam Committee Chair

Looking to Copenhagen 2014

At the closing ceremony of the successful EAACI-WAO Congress 2013 in Milan, it was time to look forward towards the next Congress. The EAACI Annual Congress will be held in Copenhagen on 7-11 June 2014, and this was marked by the handover of the EAACI flag by the EAACI Past President and President of the EAACI-WAO Congress in Milan Cezmi Akdis and Local Organizing Committee Chair Walter Canonica, who officially presented the flag to the newly elected EAACI President, Nikolaos Papadopoulos and the 2014 Local Organizing Committee Chair, Lars K. Poulsen. The latter gave a brief presentation of Copenhagen as a Congress city, and promised a few new things in the program for Copenhagen.

The theme of the 2014 Congress will be Challenging Dogmas, and besides revisiting many important hypotheses relevant to our specialty, Lars K. Poulsen also promised more discussions similar to the well-known and popular Pro & Con Sessions. Moreover, the postgraduate courses will take on a new format, with more hands-on learning, in the form of an Allergological Bazaar, where both junior members and more seasoned delegates will have the opportunity to train in diagnostic and other techniques, such as skin tests, immunotherapy and the use of adrenalin etc.

The program is already well under way, and after the final meeting of the Scientific Program Committee during the meeting in Milan, the invitations for speakers for plenaries, symposia and workshops will go out during the summer.

Lars K. Poulsen
EAACI 2014 Congress Chair
After two years of preparation, the Athens Pediatric Allergy and Asthma Meeting (PAAM 2013) is now only a couple of months away. Our bi-annual paediatric allergy event will cover the breadth of pediatric allergy and asthma, with an emphasis on clinical aspects. PAAM is aimed at all health care professionals involved in the management of children and teenagers with allergy and asthma. The event programme, which can be found at www.eaaci-paam.com, is currently being finalised – with the allocation of late-breaking abstracts – in order to bring to participants the state-of-the-art in pediatric allergy developments.

We anticipate that this is going to be the largest pediatric allergy event ever! In addition to its educational value, PAAM will be a great opportunity to meet colleagues and network among other professionals. October is a perfect time to take advantage of the warm sunny days in Athens; the city’s city in conjunction with the scientific input will certainly inspire participants to philosophize and get closer to answering their research and clinical questions.

The central meeting location of the Megaron Athens International Conference Centre is convenient for getting out into the city to appreciate its wonderful archaeological sites and great food. It will be a memorable event and we look forward to seeing you there.

Graham Roberts
Nikolaos G. Papadopoulos
PAAM 2013 Chairs

ISMA
Vienna, Austria: 5-7 December 2013

Preparations for ISMA 2013 are now in good shape and near to finalization. The interest groups on Allergy Diagnosis and Food Allergy have worked closely to put together an exciting programme, addressing key issues in allergen identification and their application for both basic and applied science, ranging from molecular mechanisms in allergic diseases to allergen specific diagnosis and novel approaches in immunotherapy.

Sessions will include talks from highly esteemed scientists in the field, with selected oral presentations from young scientists. For detailed information please visit the ISMA 2013 website (www.isma.org). The meeting will be CME accredited and offers travel grants to JMAs who are presenting authors of a submitted abstract. The venue for the event will be the Aula der Wissenschaften, a historical place of Wissenschaften, a historical place of

Karin Hoffmann-Sommergruber
ISMA 2013 Chair

DHM6
Bern, Switzerland: 9-12 April 2014

DHM6 (Drug Hypersensitivity Meeting 6) is the sixth meeting of its kind and returns to Bern, Switzerland, where it all started in 2004. With ca. 400 attendees, DHM6 will be a meeting which will gather together scientists and clinicians interested in drug hypersensitivity (DH), and puts, on one hand, an emphasis on new insights into immunology, genetics, pharmacology and metabolism whilst on the other hand also focusing on the clinical aspects of DH, including clinical phenotypes, in vivo and in vitro test possibilities, adverse reactions to new drugs, cross-reactivity, and the management of adults and children with drug hypersensitivity etc. The biggest event of its kind, with more than 55 speakers coming from many different European, Asian and American countries, DHM6 will have meetings encompassing:

• 6 plenary sessions;
• 12 parallel symposia (6 clinical, 6 basic aspects);
• 12 clinically-oriented breakfast seminars devoted to a specific clinical topic;
• 3 clinical sessions with illustrative cases; and
• ca. 200 poster presentations covering all fields of DH – a poster tour will facilitate access to these data.

If you would like to learn more about DH, if you want to discuss your data and how to approach DH, or if you are working on the immunology or genetics of DH, then DHM6 will be the place to be. Enjoy beautiful Bern, a UNESCO heritage city, and visit the old city or Albert Einstein’s home where he conceived his great ideas which revolutionized physics.

Werner Pichler
DHM 2013 Chair

JMAs
At the EAACI-WAO Congress 2013 in Milan, the JMA programme started even before the opening ceremony with a JMA-dedicated post-graduate course and later with the JMA poster session, chaired by both former and current leaders in the fields of DH – a poster tour will facilitate access to these data. In December, visitors will be able to enjoy a range of pre-Christmas activities which the city will be offering.

Prof. Pascal Demoly talked brilliantly about the JMA-dedicated EAACI educational activities, and 20 prizes (ca. 5,000€) were awarded to JMAs, followed by a memorable JMA social event. Milan was also the occasion to thank all the members of the JMA Working Group for their hard work during the past term, particularly to Enrico Heffler who coordinated the group and maintained such a constructive and friendly atmosphere, and to welcome the new JMA working group, which is hoping to have just as much fun and success!

Alexandra Santos
JMA Chair
The second successful EAACI Skin Allergy Club

The EAACI Skin Allergy Club held its second meeting on 20–21 April 2013 in the hospitable and academic environment of the University Department of Dermatology, Zurich, by kind invitation of Professor Peter Schmid-Grendelmeier. Delegates attended from Armenia, Croatia, Romania, Russia, Switzerland, Ukraine and the United Kingdom. They each presented topics of their choice followed by a round-table discussion covering a wide spectrum of cutaneous allergy, including preventative strategies in atopic dermatitis, the potential application of microarray for diagnostic testing and specific immunotherapy, autoinflammatory syndromes, solar urticaria, autoimmune progesterone dermatitis and vasculitis. The course was moderated by Professors Clive Grattan, Antti Lauerma and Peter Schmid-Grendelmeier, and was funded by a grant from EAACI. This new initiative was a great success and a unique self-directed learning opportunity using a “donut round” interactive approach (both last year and this year), and was aimed at promoting the communication and exchange of experience among young clinicians and researchers working in allergy. Feedback on this EAACI-funded learning initiative was excellent. It was agreed that this model of small group learning could be extended to other clinical areas within EAACI, offering a personal and interactive alternative to other EAACI educational opportunities, such as at Allergy Schools and Focused Meetings.

Clive Grattan
Chairperson of the EAACI Dermatology Section

Lilit Hovhannisyan
JMA Representative of EAACI Dermatology Section

“Allergy Diagnosis in and beyond the skin”: report from the Allergy School in Erlangen

The Allergy School was held on 25-28 July 2013 in the town of Erlangen, Germany, home of a renowned University Hospital and brought together 38 participants and 20 speakers from 23 countries.

The scientific program, set up by the EAACI Dermatology Section in collaboration with the Medical Faculty of the University of Erlangen and DGAKI (German Society for Allergy and Clinical Immunology) covered all the topics related to diagnosis of allergic skin diseases, including practical and hands-on workshops.

On the first day, Prof. Clive Grattan lectured on mast cell related diseases, from urticaria to mast cell activation syndromes and systemic mastocytosis. On Friday, presentations focused on diagnostic tests in IgE/histamine mediated disorders, including workshops tackling nasal and conjunctival challenge tests and practical approach to food intolerances and hands-on sessions dedicated to food challenges (with preparation and tasting of blind provocation samples), insect venom testing and sting provocation and component-resolved work-up of a polysensitized food allergic patient. On Saturday, the scientific program continued with T-cell mediated allergic diseases, followed by an inspiring poster session. On Sunday, the last scientific session was about “the others”, the underdiagnosed allergic and non-allergic disease that should never be neglected in differential diagnosis. The meeting closed with a discussion on future perspectives in allergology.

Congratulations to travel grant winners Pavel Kolkhir and Juan Manuel Leyva-Castillo, and to the winners of the poster session prizes for their outstanding presentations, Kathrin Paulus, Paulina Korczynska and Firdaus Hamid.

The social program was not less involving, with a welcome reception at The Orangerie, the City Castle of Erlangen, a guided visit to historic Entla’s beer cellar, with its galleries dug into the hill, and a visit to the museum dedicated to Levi Strauss, in his birthplace.

All of this, and much more, took place during the Allergy School in Erlangen! Sincere thanks to Professor Vera Mahler for organizing this memorable Allergy School, which, in the EAACI’s Allergy Schools tradition, was a unique occasion of learning, discovering and discussing with colleagues from all over the World.

Filippo Fassio
Past and present gather at the EAACI Presidents’ Meeting

The President and President-Elect of our Academy meet once every two years with the Past Presidents in a brainstorming atmosphere to discuss the current status of the EAACI and international developments in the area, to give feedback to the Presidential Program of the President Elect.


On the same occasion, the Presidents had a chance to meet the new EAACI Board of Officers for 2013–2015 to discuss plans for new activities.

Cezmi A. Akdis

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### EAACI sections and interest groups
Biologics for immune-mediated disorders

Biological agents (biologics) have revolutionized the treatment of many immune-mediated disorders, including allergic, inflammatory and autoimmune diseases. Here, we provide a brief overview on biologics that have been used or tested in immune-mediated disorders.

Biologics targeting immunoglobulin E (IgE; such as omalizumab) or T helper (TH) 2 cell cytokines, including interleukin-4 (IL-4), IL-5, and IL-13, have been tested in different allergic disorders. While omalizumab showed some benefit in moderate-to-severe allergic asthma, allergic rhinitis, chronic urticaria, atopic dermatitis, and as adjunct treatment to specific immunotherapy, most of the other biologicals are still being assessed for their efficacy in certain allergic disease subsets.

Anti-IL-1 agents, such as recombinant IL-1 receptor antagonist (IL-1Ra; anakinra) or a monoclonal antibody (mAb) against IL-1β (such as canakinumab) have shown some success in the treatment of urticarial vasculitis, suggesting this disease entity being possibly due to overactive components of the inflammasome. Other rare pathologies seem to fall into a similar category by responding to IL-1-targeted biologicals, including Schnitzler’s syndrome, juvenile idiopathic arthritis and adult-onset Still’s disease, as well as typically the periodic fever syndromes (also known as autoinflammatory syndromes).

Interestingly, Schnitzler’s syndrome, juvenile idiopathic arthritis and adult-onset Still’s disease, but not the periodic fever syndromes, are amenable to tocilizumab treatment, a mAb targeting IL-6Ra. Furthermore, reports published in the last two years have unveiled a role of IL-6 signaling in large vessel vasculitis, by demonstrating efficacy of tocilizumab in the treatment of giant cell arteritis and polymyalgia rheumatica, and Takayasu arteritis. Thus, IL-1β and IL-6 seem to converge for some disorders in a common effector pathway, maybe constituting the activation of certain TH cell subsets, including TH17 cells (Figure 1). Subsequently, TH17 cells secrete cytokines of the IL-17 family, such as IL-17A, IL-17F and IL-22, leading to inflammation and recruitment, via CXCL-8 (IL-8), of neutrophils (Figure 1).

As for the use of IL-17-targeting biologicals (such as secukinumab, ixekizumab, and brodalumab), these agents have shown success mainly in psoriasis, including psoriatic arthritis, rheumatoid arthritis, and anklyosing spondylitis, while certain pathologies, especially Crohn’s disease, did not improve under anti-IL-17 treatment. This situation is somewhat reminiscent of the anti-IL-12/IL-23 mAb ustekinumab, which targets the p40 cytokine subunit common to IL-12 and IL-23. Thus, ustekinumab, which is known for its efficacy in psoriasis, was only beneficial in cases of Crohn’s disease that were refractory to tumor necrosis factor-α (TNF-α) antagonists, while in multiple sclerosis, ustekinumab was not efficacious.

A review of the many applications of TNF-α antagonists and the anti-CD20 mAb rituximab is clearly beyond the scope of this brief overview. However, the recent results on the successful use of belimumab, a mAb targeting B-cell activating factor (also known as BlyS), in autoantibody-positive systemic lupus erythematosus in two randomized, placebo-controlled phase 3 studies merit being mentioned.

Moreover, recent early-phase clinical trials have suggested that yet another class of biologicals, namely the provision of recombinant cytokines, such as IL-2, might favorably influence autoimmune disorders caused by a lack of CD4+ regulatory T (TReg) cells. Thus, the provision of low doses of recombinant IL-2 to patients with hepatitis C virus-associated, cryoglobulinemic vasculitis refractory to anti-viral therapy and/or rituximab treatment led to a significant increase in TReg cells, which was accompanied by a decrease of pathologic cryoglobulin levels, a normalization of C4 complement, and a clinical improvement of vasculitis in most of the patients receiving IL-2. Obviously, these data need to be confirmed in larger clinical trials but they open the way for new approaches to pathologies featuring a lack of TReg cells, including chronic inflammatory, autoimmune and possibly also allergic disorders.

Onur Boyman
Allergy Unit, Department of Dermatology, University Hospital Zurich, Switzerland

François Sperti
Division of Immunology and Allergy, Centre Hospitalier Universitaire Vaudois, Lausanne, Switzerland