

Make a precise assessment

ImmunoCAP Allergen Components help you differentiate between primary allergies and cross-reactivity

Make a substantiated decision

A better differentiation helps you give relevant advice and define the optimal treatment

Make a difference

More informed management helps you improve the patient's well-being and quality of life

References: 1. Sicherer S. Current reviews of allergy and clinical immunology. J Allergy Clin Immunol. 2001: 108(6): 881 – 890. 2. Robotham J et al. Ana o 3, an important cashew nut (Anacardium occidentale L.) allergen of the 2S albumin family. J Allergy Clin Immunol. 2005; 115(6): 1284 – 90. 3. http://www.allergen.org. Allergen nomenclature, approved by the World Health Organization and International Union of Immunological Species (WHO/IUIS) Allergen Nomenclature Subcommittee. 4. Roux K et al. Tree nut allergens. Int Arch Allergy Immunology 2003; 131: 234 – 244. **5.** Sastre J. Molecular diagnosis in allergy. Clinical and exp. allergy 2010; 40: 1442 – 1460. **6.** Masthoff L et al. Sensitization to Cor a 9 and Cor a 14 is highly specific for a severe hazelnut allergy in Dutch children and adults. J Allergy Clin Immunol. 2013 (In press). **7.** Pastorello E. et al. Sensitization to the major allergen of Brazil nut is correlated with the clinical expression of allergy. J Allergy Clin Immunol. 1998; 102(6): 1021 – 1027. 8. Maloney J et al. The use of serum-specific IgE measurements for the diagnosis of peanut, tree nut and seed allergy. J Allergy Clin Immunol. 2008; 122(1): 145 – 151. 9. Hasegawa M et al. Clinical features of four cases with cashew nut allergy and cross-reactivity between cashew nut and pistachio. Allergol Int. 2011 Dec; 60(4): 425 – 32. 10. Clark A et al. Cashew nut causes more severe reactions than peanut: case-matched comparison in 141 children. Allergy 2007; 62(8): 913 – 6. 11. de Silva I et al. Allergy. Paediatric anaphylaxis: a 5 year retrospective review. Allergy 2008 Aug; 63(8): 1071 - 6. 12. Davoren M et al. Cashew nut allergy is associated with a high risk of anaphylaxis. Arch Dis Child 2005; 90(10): 1084 - 5. 13. Vetander M et al. Anaphylaxis and reactions to foods in children-a population-based case study of emergency department visits. Clin Exp Allergy 2012 Apr; 42(4): 568 - 77. 14. Noorbakhsh R et al. Pistachio allergy - prevalence and in vitro cross-reactivity with other nuts. Allergol Int. 2011 Dec; 60(4): 425 - 32. 15. Wang F et al. Ana o 2, a major cashew (Anacardium occidentale L.) nut allergen of the legumin family. Int Arch Allergy Immunol. 2003 Sep; 132(1): 27 – 39.

© 2013 Thermo Fisher Scientific Inc. All rights reserved. All trademarks are the property of Thermo Fisher Scientific Inc. and its subsidiaries Manufacturer; Phadia AB, Uppsala Sweden

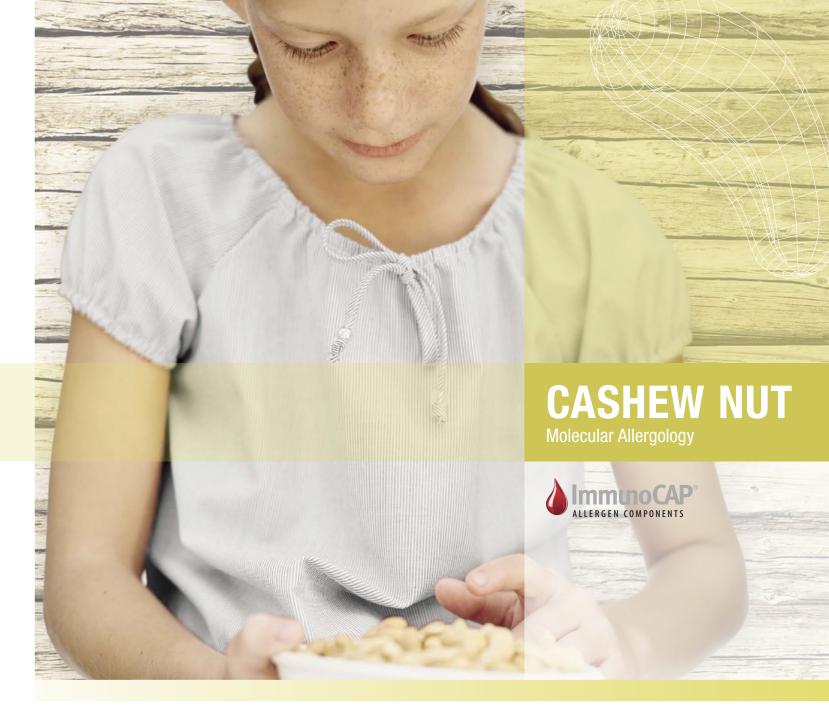
Germany +49 761 47 8050

Head office Sweden +46 18 16 50 00 **Austria** +43 1 270 20 20 Belgium +32 2 749 55 15 Brazil + 55 11 3345 5050 China +86 21 6865 4588 **Czech Republic** +420 220 518 743

 $\textbf{Hong Kong} + 852\ 2885\ 4613$ India +91 11 4610 7555/56 Italy +39 02 64 163 411 **Japan** +81 3 5365 8332 **Denmark** +45 70 23 33 06 Norway +47 21 67 32 80 Finland +358 9 3291 0110 **Portugal** +351 21 423 5350 France +33 1 61 37 34 30 South Africa +27 11 792 6790 **Spain** +34 935 765 800 **Sweden** $+46\ 18\ 16\ 60\ 60$ Switzerland +41 43 343 4050 **Taiwan** +886 2 2516 0925 The Netherlands +31 30 602 37 00

United Kingdom/Ireland +44 1 908 769 110 **USA** +1 800 346 4364 Other countries $+46\ 18\ 16\ 50\ 00$





Improved risk assessment

in cashew nut allergy

- use components for better management of cashew nut allergic patients



Take the diagnosis and management

of cashew nut allergic patients to a whole new level

Identify primary cashew nut sensitization

Diagnosing nut allergy and identifying the trigger allergen(s) is sometimes difficult. Molecular allergy diagnostics can help to identify primary cashew nut (*Anacardium occidentale*) sensitization in nut allergic patients.

- Ana o 3 is a storage protein (2S albumin) and a major cashew nut allergen.^{2,3}
- Sensitization to Ana o 3 indicates a primary cashew nut allergy.²

Improve the risk assessment using allergen components

• Sensitization to 2S albumins, such as Ana o 3, is known to be associated with systemic food reactions.^{2,4–7}

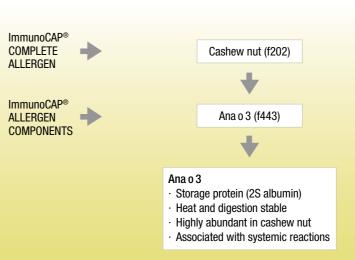
Improve management of cashew nut allergic patients

- Cashew nut allergic patients sensitized to Ana o 3 should avoid raw as well as roasted/heated cashew nuts.^{4,6}
- Cashew nut allergic patients with sensitization to Ana o 3 should also be investigated for allergy to other nuts or seeds, such as pistachio, walnut and peanut, as co-existing allergies may occur.^{1,2,8,9}





Suggested test profile



A positive f202 with negative Ana o 3 results may be explained by sensitization to:

- · Other cashew nut storage proteins or lipid transfer protein (LTP)
- · Cross-reactivity with profilin in pollen. Due to high degree of similarity markers like Bet v 2 or Phl p 12 (profilins) may be used
- · CCD (cross-reacting carbohydrate determinants)

Did you know that?

- Cashew nut allergic patients have high risk of experiencing severe allergic reactions; the risk has been reported to be even higher than for peanut allergic patients (74 % vs. 30 %).^{2,10–13}
- Cashew nut and pistachio are botanically closely related and show extensive cross-reactivity. 2,4,9,14
- Cashew nut allergy is potentially life-threatening, can start early in life and is rarely outgrown. 1,12,15
- Symptoms can be elicited upon first known exposure and the dose is often very low (e.g. smelling, touching without eating). 10,12,15
- Cashew nut allergy is increasing in parallel with increased consumption as it's becoming a popular snack, a common ingredient of oriental and processed foods such as nut "butters", bakery and pesto.^{2,10}