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Title: Allergic bronchopulmonary aspergillosis (ABPA) prevalence in adult cystic fibrosis (CF) patients. Usefulness of recombinant Aspergillus fumigatus IgE (rAsp f) in diagnosis and monitoring treatment

Dr. Cristina 13930 Navarro cristina.navarro.soriano@gmail.com MD [1], Dr. MaAndreína 13956 Perez mariandrenini@hotmail.com MD [2], Dr. Dolores 13957 Hernandez hernandez_dol@gva.es MD [2], Dr. Emilio 13958 Ansotegui eansotegui@telefonica.net MD [1], Dr. Monica 13959 Cebrian cebrian_mon@gva.es [1], Dr. Javier 13960 Peman peman_jav@gva.es MD [1] and Dr. Amparo 13962 Sole sole_amp@gva.es MD [1]. [1] Lung Transplant and Cystic Fbrosis Unit, Hospital Universitario y Politecnico La Fe, Valencia, Spain, 46026 and [2] Allergy Service, Hospital Universitario y Politecnico La Fe, Valencia, Spain, 46026 .

Body: The prevalence of ABPA in CF is variable (6-15%). Currently, the role of rAsp f in ABPA diagnosis and treatment monitoring is unknown. Patients. Serial determinations of serum specific IgE against recombinant AF antigens were analysed yearly during 5 years in 157 adult CF patients. 19 patients fulfilled serologic criteria for ABPA, but only 9 suffered from respiratory symptoms, lung infiltrates or lung function deterioration. Results. 9 of 157 CF patients (3 women), prevalence 6%, mean age 22 (16-33) years, BMI mean 21 (20-22). In 8/9 Delta F508 mutation was found. At time of diagnosis, 4 patients showed AF colonization, 8 had Pseudomonas aeruginosa (PA). In all patients, total IgE was higher than 500 UI/ml, and AF specific IgE was positive. Titrations for rAsp f varied, with highest titrations for rAsp f 1 and rAsp f 2. Two cases with the most torpid progress showed high titers for rAsp f 3. Lung function's distribution (FEV1) was similar in all cases. All patients were treated with systemic corticosteroids (3 weeks and gradually reducing the dose after 3-6 months), and itraconazole/voriconazole. There were two relapses after two years, which started with respiratory symptoms. Conclusion. In CF patients, compatible symptoms as wheezing dyspnea and functional-radiological deterioration suggest ABPA diagnosis. During treatment, only total and AF specific IgE titers, as well as lung function, served for monitoring. In our daily practice, specific AF component IgE titration does not provide diagnostic nor prognostic advantages, and neither does conventional sputum culture.