Conclusions: The VALERGEN-DP vaccine is an effective treatment and profitable against asthma in our population and guarantee its generalization in the Allergy Services of our health system.

487 Safety of Sublingual Immunotherapy with Standardized Vaccines of Domestic Mites
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Background: Allergen-specific immunotherapy consists of administering gradually increasing doses of the allergen, to which the patient is sensitized, aiming at achieving tolerance to it and decreasing clinical symptoms. The sublingual immunotherapy (SLIT) was introduced as an alternative to subcutaneous route. Its use is being increased in the world and in Cuba, using standardized vaccines owing to greater safety. The objective of this study was to determine the safety of sublingual standardized vaccines of 3 domestic mite species (Valergen, Cuba) and its adverse events in allergic patients from the Calisto Garcia University Hospital in Havana, as well as the frequency of its prescription.

Methods: Descriptive and cross sectional study design, which included 130 patients with treatment of SLIT with VALERGEN-DP (Dermatophagoides pteronyssinus), VALERGEN-DS (D. siboney) and VALERGEN-BT (Blomia tropicalis) (BIOCEN, Cuba), who attended the Allergy Service in the period January-September 2010. Age distribution: mean 19.6 years (range 1–75), 40.7% was younger than 18 years.

Results: The multi-allergen vaccine was the type of vaccine most used (63.8%). The most common allergen was D. pteronyssinus followed by B. tropicalis. 71.55% of administered allergens vaccines were in maintenance phase. We found 4 adverse events (3.1% of patients), all local, mild, and not requiring treatment or change of vaccination dosing schedule.

Conclusions: The Valergen vaccines by sublingual route are safe and well tolerated in Cuban allergic patients.

488 The Effect of Specific Immunotherapy on the Clinical Response in Patients with Grass-pollen Induced Rhinoconjunctivitis
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Background: Specific immunotherapy (SIT) has a significant potential in the treatment of allergic rhinitis and allergic conjunctivitis. The aim of the study was to evaluate the effect of specific immunotherapy (SIT) in patients with grass-pollen induced allergic rhinitis and allergic conjunctivitis.

Methods: Twenty-six patients with pollen induced rhinoconjunctivitis and positive history for more than 2 years were included in our study. They had skin prick test of ≥ 5 mm, age range from 18 to 44 years and all underwent conjunctiva provocation tests before and after 1 year of SIT. Clinical severity score of nasal and conjunctiva symptoms during the season was assessed by 4-point arbitrary rating scale from 0 to 3. Conjunctiva provocations were performed out of the season until allergic symptoms occurred, achieving the allergen threshold dose (ATD).

Results: After 1 year of SIT, we have noticed reduction of clinical symptoms present in allergic conjunctivitis: burning, itching, lacrimation and hyperemia (P < 0.05). We have found also reduction in clinical symptoms of allergic rhinitis: secretion, irritation, itching and nasal blockade (P < 0.01). The patients tolerated significantly higher allergen doses in provocation tests after 1 year of SIT, reaching new ATD.

Conclusions: SIT reduces the clinical symptoms of allergic rhinoconjunctivitis and modifies the inflammatory response after specific allergen challenge.

IMMUNOTHERAPY TRAINING

490 Immunotherapy (IT) Training in Canada: Perspectives of Fellows-in-training on the First Immunotherapy Training Manual
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