

Recombinant Food Allergens

Food allergies are abnormal immunological responses to a particular food or food component, usually a naturally occuring protein. Two types of abnormal immunological responses can occur - immediate hypersensitivity reactions and delayed hypersensitivity reactions, and both occur upon ingestion of specific foods.

The detection of specific IgE has been incorporated into current guidelines for the identification of allergy inducing agents (Boyce et al. 2010; Soares-Weiser et al. 2014) and has been significantly improved by the availability of recombinant allergens. This molecular allergy diagnosis or component resolved diagnosis (CRD) allows for the detection of specific and cross-reactive IgE antibodies (Canonica et al. 2013; van Gasse et al. 2015; Werfel et al. 2015). Research shows that the potential of an allergen to trigger an IgE response, as well as cross reactivity is connected to its structure. IgE antibodies bind to certain epitopes on individual allergen components that can be grouped into a few relevant protein families like heat resistant storage proteins, lipid transfer proteins and PR-10 proteins (Renz et al. 2010).

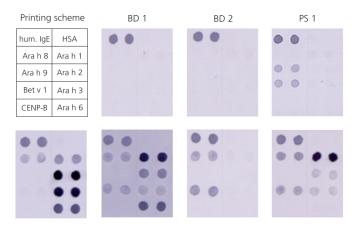


Figure: Immunodot analyses of blood donors (BD 1-2) and samples from patients allergic to peanut (PS 1-3, 5) or birch pollen (PS 4). The presence of IgE antibodies was determined by spotting duplicates of DIARECT's recombinant allergens Ara h 1.0101, Ara h 2.0201, Ara h 3.0101, Ara h 6.0101, Ara h 8.0101 and Ara h 9.0101 on nitrocellulose membrane. Positive (human IgE) and negative controls (HSA, CENP-B) were spotted in the top and bottom line.

In peanut, two related allergens, Ara h 2 and Ara h 6, both conglutin storage proteins, account for the majority of the IgE immune response and are considered the main elicitors of anaphylaxis. Food and pollen usually comprise more than one allergenic component that may share various degrees of identity and might induce cross-sensitivity due to cross specific IgE antibodies (Turnbull *et al.* 2015; Werfel *et al.* 2015). A high percentage of patients allergic to birch pollen have been reported to also be allergic to soybean.

Besides IgE antibodies against Bet v 1, a major birch allergen, IgE antibodies to Gly m 4, a major soybean allergen and belonging to the same protein family as Bet v 1, were also detected in the sera of these patients (Berkner *et al.* 2009; Mittag *et al.* 2004; Werfel *et al.* 2015).

In 2009, Holzhauser *et al.* described another soybean allergen, Gly m 5. When analyzing patient sera, the authors found IgE antibodies against Gly m 5 preferentially in those sera from patients that suffer from anaphylaxis upon exposure to soybean. IgE antibodies against Gly m 4, however, appeared to be present preferentially in the serum of patients suffering only from mild symptoms. DIARECT's recombinant allergens are produced in either *E. coli* or the baculovirus/insect cell expression system.

Ordering Information			
52500 52501	Ara h 1.0101		0.1 mg 1.0 mg
50100 50101	Ara h 2.0201		0.1 mg 1.0 mg
52600 52601	Ara h 3.0101	NEW:	0.1 mg 1.0 mg
51900 51901	Ara h 6.0101		0.1 mg 1.0 mg
52700 52701	Ara h 8.0101	NEW!	0.1 mg 1.0 mg
52000 52001	Ara h 9.0101		0.1 mg 1.0 mg
51800 51801	Cor a 1.0401		0.1 mg 1.0 mg
50500 50501	Gly m 4.0101		0.1 mg 1.0 mg
50600 50601	Gly m 5.0101	and AT O	0.1 mg 1.0 mg
52800 52801	Mal d 1.0108	NEW!	0.1 mg 1.0 mg

References:

Berkner et al. (2009) Bioscience Report 29: 183-192
Boyce et al. (2010) Journal Allergy Clinical Immunology 126: 1-58
Canonica et al. (2013) World Allergy Organization Journal 6: 17
Holzhauser et al. (2009) J. Allergy Clinical Immunology 132: 452-458
Mittag et al. (2004) J. Allergy Clinical Immunology 113: 148-154
Renz et al. (2010) Allergo Journal 19: 110-128
Soares-Weiser et al. (2014) Allergy 69: 76-86
Turnbull et al. (2015) Alimentary Pharmacology Therapeutics 41: 3–25
van Gasse et al. (2015) Clinica Chimica Acta 444: 54-61
Werfel et al. (2015) Allergy 70: 1079-1090

In some countries the use of certain allergens in diagnostic tests may be protected by patents. DIARECT is not responsible for the determination of these issues and suggests clarification prior to use.

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