Peanut Allergen component testing

Discover the connection

Whole Allergens and Allergen Components help you diagnose allergy, allowing you to prepare a more comprehensive management plan.
Knowing which protein your patient is sensitized to can help you develop a management plan.\textsuperscript{1,2,8-10}

A specific IgE blood test that detects sensitization to the whole peanut is the first step in discovering the likelihood of a systemic reaction and the necessary precautions that may be prescribed.

**Management Considerations**

Oral food challenge (OFC) with a specialist may be recommended. High likelihood that patient may pass OFC.

- If patient passes an OFC:
  - Foods prepared with or around peanuts may be consumed
  - Patient not restricted to peanut-free zones
  - Choose peanut-free zones for patient’s safety
  - Consider prescribing epinephrine auto-injector
  - Family, colleagues, and teachers should be made aware of allergy and have a plan

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<tr>
<th>Ara h 8 f 352</th>
<th>Ara h 9 f 427</th>
<th>Ara h 1, 2, 3 f 422, f 423, f 424</th>
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As in all diagnostic testing, any diagnosis or treatment plan must be made by the physician based on test results, individual patient history, the physician’s knowledge of the patient, and the physician’s clinical judgement.

**Characteristics of Individual Proteins**

- **Peanut f 13**
  - High levels of peanut IgE can predict the likelihood of peanut sensitivity, but may not be solely predictive of reactions or allergic response\textsuperscript{1}

- **Ara h 8 f 352**
  - Lower risk of systemic reaction\textsuperscript{1}
  - Risk of mild, localized symptoms, such as itching/tingling of the lips, mouth, and oropharynx\textsuperscript{2}
  - Cross-reactive with pollens (e.g., birch)\textsuperscript{2}

- **Ara h 9 f 427**
  - Variable risk of systemic reaction including anaphylaxis\textsuperscript{4}
  - Often accompanied by sensitization to other peanut proteins\textsuperscript{5}
  - Cross-reactive with fruits with pits (e.g., peaches)\textsuperscript{4}

- **Ara h 1, 2, 3 f 422, f 423, f 424**
  - Higher risk of systemic reaction including anaphylaxis\textsuperscript{6,7}
  - Sensitization to Ara h 2 is nearly always associated with clinical peanut allergy\textsuperscript{7}

- **Peanut f 13**
  - High levels of peanut IgE can predict the likelihood of peanut sensitivity, but may not be solely predictive of reactions or allergic response\textsuperscript{1}

77.6\% of patients sensitized to peanut may not be at risk for a systemic reaction.\textsuperscript{1}
With Peanut Allergen Component test results, you have more of the information necessary for proper diagnosis, allowing you to evaluate your patient’s potential risk of systemic reaction, and develop a more comprehensive management plan.

• ASSESS risk for systemic allergic reactions
• DIFFERENTIATE between clinical peanut allergy and cross-reactivity
• ADDRESS parental anxiety

Discover the connection
Optimize management to help:

References

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