Important changes to
Allergy Testing at
Dorevitch Pathology
You may have noticed some changes to standard allergen-specific IgE (sIgE) testing panels and reporting in the last few months. Over the next few weeks we will be introducing further changes which will enable us to continue to provide the same high level of allergy testing service on the best available testing system, the Phadia ImmunoCAP®.

Interpretation of allergen-specific IgE tests

Allergy is not an all-or-nothing phenomenon, and the development of an allergic response starts with initial sensitisation, at very low levels of sIgE. Later, as the level of sIgE increases, the patient may progress from asymptomatic sensitisation to presentation with clinical symptoms, e.g. symptoms of food allergy such as urticaria or anaphylaxis, or symptoms of inhalant allergy such as rhinoconjunctivitis or asthma.

In clinical practice, 0.35 kUA/L has commonly been used as a cut-off for allergen-specific IgE to separate positive from negative results. Nevertheless, a positive allergen-specific IgE test (which indicates detection of allergen-specific IgE) does not necessarily indicate clinical allergy. In general, low sIgE antibody levels indicate a low probability of clinical disease, whereas high antibody levels to an allergen show good correlation with clinical disease. Clinical history is the best indicator of possible allergy. A positive allergen specific IgE is used together with the clinical history to support and confirm the diagnosis of clinical allergy.
Changes to standard allergy testing panels.

For requests that state “RAST test” or “allergy test” without stipulating specific allergens of interest, we will run a standard panel of tests that covers the common allergens (Australian grass and weed pollens, and house dust mite) which are relevant to the most common allergic disorders (asthma, allergic rhinitis). We encourage clinicians to specify allergens of interest when ordering allergy tests. This change took effect in May 2013. If there is a clinical suspicion of allergy to an allergen(s) that has not been tested, serum will be held for 7 days in the event that add-on testing for additional allergen specific IgE is required.

Bulk billing of allergy testing.

Medicare-compliant tests will be bulk-billed. If requests contain more allergens than are covered by the allowance under Medicare (i.e. more than 4 allergens or allergen mixes per request or more than 4 episodes of allergy testing within a period of 12 months), patients will be subject to an out-of-pocket charge as summarised below (Table 1).

Table 1: Gap payment scenarios for allergy testing at Dorevitch Pathology.

<table>
<thead>
<tr>
<th>SCENARIO</th>
<th>GAP PAYMENT</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt; 4 allergens or mixes/episode</td>
<td>$40.00 per episode</td>
<td>Non-specialist referrals only</td>
</tr>
<tr>
<td>&gt; 4 episodes/12 months</td>
<td>$60.00 per episode</td>
<td></td>
</tr>
<tr>
<td>Recombinant or component allergens</td>
<td>$40.00 per episode</td>
<td></td>
</tr>
</tbody>
</table>
Introduction of molecular allergy testing.

Dorevitch Pathology is now offering a broad array of molecular allergy tests. Component-resolved diagnosis, based on well-characterised individual allergen molecules, is a major advance in allergy diagnosis, allowing prediction of the nature and severity of allergic reactions, and symptoms due to allergen cross-reactivity. These specialised recombinant and component allergens are unfortunately expensive, so in order to provide a comprehensive repertoire of these useful tests, out-of-pocket charges will be introduced for each allergen requested. Examples of these allergens are listed in Table 2.

Table 2: Recombinant and component allergens subject to out-of-pocket charges ($40 per allergen)

<table>
<thead>
<tr>
<th>CODE</th>
<th>NAME</th>
<th>COMMON REQUEST TERM</th>
</tr>
</thead>
<tbody>
<tr>
<td>f232</td>
<td>Egg (nGal d 2, Ovalbumin)</td>
<td>ovalbumin</td>
</tr>
<tr>
<td>f233</td>
<td>Egg (nGal d 1, Ovomucoid)</td>
<td>ovomucoid</td>
</tr>
<tr>
<td>f76</td>
<td>Milk (nBos d 4, α-lactalbumin)</td>
<td>lactalbumin</td>
</tr>
<tr>
<td>f77</td>
<td>Milk (nBos d 5 B-lactoglobulin)</td>
<td>lactoglobulin</td>
</tr>
<tr>
<td>f423</td>
<td>Peanut (rAra h 2)</td>
<td>Ara h 2</td>
</tr>
<tr>
<td>f416</td>
<td>Wheat (rTri a 19, Omega-5 Gliadin)</td>
<td>omega 5 gliadin</td>
</tr>
</tbody>
</table>
Allergen - Specific IgE (sIgE) Available.

The following allergen-specific IgE tests are readily available. Note: sIgE to allergen mixes are available – clearly state components of mix to ensure the correct test is performed.

Additional tests for single allergens and allergen mixes are also available - please contact Special Chemistry on (03) 9244 0326 Mon-Fri 8am-4pm for further information or contact the clinical allergist to discuss. Medicare rebate only covers the cost of three to four standard sIgE tests (excludes component sIgE tests) per request.

**DRUGS**  
Amoxicilloyl  
Ampicilloyl  
Cefaclor  
Chlorhexidine  
Gelatin bovine  
Morphine  
Penicilloyl G*  
Pholcodeine  
Suxamethonium

**MITES**  
Blomia tropicalis  
D. Farinae  
D. ptéronyssinus  
Glycyphagus domesticus (Storage mite)  
Dust mix (Hollister-Stier labs, D. ptéronyssinus, D. farinae, cockroach)

**ANIMALS**  
Cat epithelium & dander  
Dog dander  
Guinea Pig  
Horse dander  
Mouse epithelium  
Mouse Urine  
Proteins  
Rabbit epithelium  
Animal mix (Danders: cat, horse, cow, dog)

**FOODS**  
Abalone  
Almond  
Asparagus  
Avocado  
Banana  
Barley  
Beef  
Blue mussel  
Buckwheat  
Cashew  
Chicken  
Clam  
Clave  
Crab  
Crayfish  
Egg white  
Fish (cod)  
Goat’s milk  
Hazelnut  
Kiwi  
Lentil  
Lobster  
Lupin  
Macadamia  
Mackerel  
Maize, corn  
Milk (Cow’s milk)  
Mutton  
Oat  
Octopus  
Oyster  
Peach  
Peanut  
Pecan  
Pine nut  
Pistachio  
Pork  
Potato  
Pumpkin  
Quinoa  
rAra h 2 Peanut  
Red Snapper  
Rice  
Rye  
Salmon  
Sardine  
Scallop  
Sesame seed  
Sheep milk  
Shrimp  
Soya bean  
Squid  
Sweet potato  
Trout  
Tuna  
Turkey Meat  
Walnut  
Wheat  
White fish  
Yeast  
Cereal mix (wheat, oat, maize, sesame seed, buckwheat)  
Citrus mix  
(orange, lemon, grapefruit, mandarin)  
Meat mix  
(pork, beef, chicken)  
*Nut mix 1  
(peanut, hazel, brazil, almond, coconut)  
*Nut mix 2  
(pecan, cashew, pistachio, walnut)  
Seafood mix  
(cod fish, shrimp, blue mussel, tuna, salmon)  
Staple food mix  
(egg white, milk, fish, wheat, peanut, soybean)

*This detects sIgE against the major determinant Benzyl penicilloyl. sIgE to minor determinants not available.
INSECTS
Cockroach
European Paper Wasp
Honey bee
Yellow jacket (European or common)

MISCELLANEOUS
Anasakis
Latex
rHev b 5 Latex

MOULDS
Alternaria alternata
Aspergillus fumigatus
Cladosporium herbarum
Mould mix 1
( penicillium chrysogenum,
Cladosporium herbarum, Aspergillus fumigatus, Alternaria alternata )

GRASSES
Bahia grass
Bermuda grass (Couch) Rye grass
Timothy grass
Aust pollen mix (bermuda, rye, bahia, common ragweed, plantain, lamb's quarters)
Grass mix
(bermuda, rye, timothy, kentucky, johnson, bahia )

TREES
Acacia
Aus pine (Casuarina eq.)
Cedar
Cypress
Eucalyptus
European Ash
Maple leaf sycamore, London Plane
Melaleuca Cajeput-tree
Olive
Pine
Privet
Silver birch
White Pine
Willow
Tree mix 1
(Box-elder, Common silver birch, oak, walnut, Elm)
Tree mix 2
(Box-elder, oak, Elm, Cottonwood, Pecan/Hickory)
Aust tree mix
(Olive, Eucalyptus, Acacia, willow, white pine, melaleuca)

WEEDS
Common Ragweed
Plantain
Weed mix (common ragweed, mugwort, plantain, lamb's quarters, saltwort)

List correct as of July 2015

For any further enquiries regarding these changes, please contact:

Dr Mimi Tang
Immunopathologist, Clinical Immunologist and Allergist, (03) 9244 0326