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STRATIFICATION OF PATIENTS WITH PRIMARY IMMUNODEFICIENCY DISEASES: RELEVANCE TO ETIOLOGY AND THERAPY

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umoral immunodeficiencies are the commonest category of primary immunodeficiency disease and are characterized by variable degrees of recurrent infection, malignancy, allergy, and autoimmunity, ranging from almost absence of all serum immunoglobulin classes and also B cells to selective antibody deficiency and normal serum immunoglobulin. The 2017 international union of immunodeficiency societies (IUIS) classification differentiates between nine subgroups. Stratifying the patients based on clinical and blood biomarkers is needed to improve patients' care. Retrospective data analysis was done for 48 cases (different immunodeficiency disorders) followed in adult allergy and immunology unit, Hamad Medical Corporation over the last ten years. 27 cases with humoral immunodeficiency analyzed for IUIS classification, the inflammatory markers, the age of maturation at presentation, and associated micronutrients levels. Vitamin D was low in most of the cases. CRP was not statistically significant, but the mean and median is observationally higher in patients with bronchiectasis. CRP mean in bronchiectasis, other complications (arthritis, malignancy, and allergy) and no complications cases are 58±63.2, 9.3±6.12 and 5 and median= 21 (3.3-167), 6 (5-19) and 5 respectively (P=0.075). Age of presentation to health service is not an indicator of the presence of multiple comorbidity or severe outcome. Patients presented with pediatric age group have more incidence of bronchiectasis. Gender and smoking are not associated with increased rate of complications in this cohort (P>0.05). The current IUIS classification is limited regarding the continuity of care, despite being fundamental in the diagnosis and classifying the diseases. Long-term continuous evaluation and monitoring are needed in the care of patients with primary immunodeficiency for any evolving complications, and the guidelines in this area are scanty. Meaningful stratification may lead to better understanding of the etiology of the diseases, as well as help tailor effective therapy.

Biography

Al-Nesf MA has completed her MD from Sultan Qaboos University, Sultanate of Oman in 1999 and Arab Board of Medical Specialization in 2005 in Medicine. She finished speciality training in Pulmonary Medicine and in the Allergy and Clinical Immunology fellowships from 2005-2009. She is the Head of Allergy and Immunology Section, Hamad Medical Corporation, Qatar since 2016. Currently, she is advancing her academic career by studying the degree of Cellular and Molecular Medicine (MSc) (R) in the Faculty of Biomedical Science at the University of Bristol, UK. She has published more than six papers in reputed journals and multiple abstracts.

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