

ASCIA 2015 CONFERENCE

26th Annual Conference of the Australasian Society
of Clinical Immunology and Allergy
Adelaide Convention Centre | 9-12 September 2015

PROGRAM BOOK

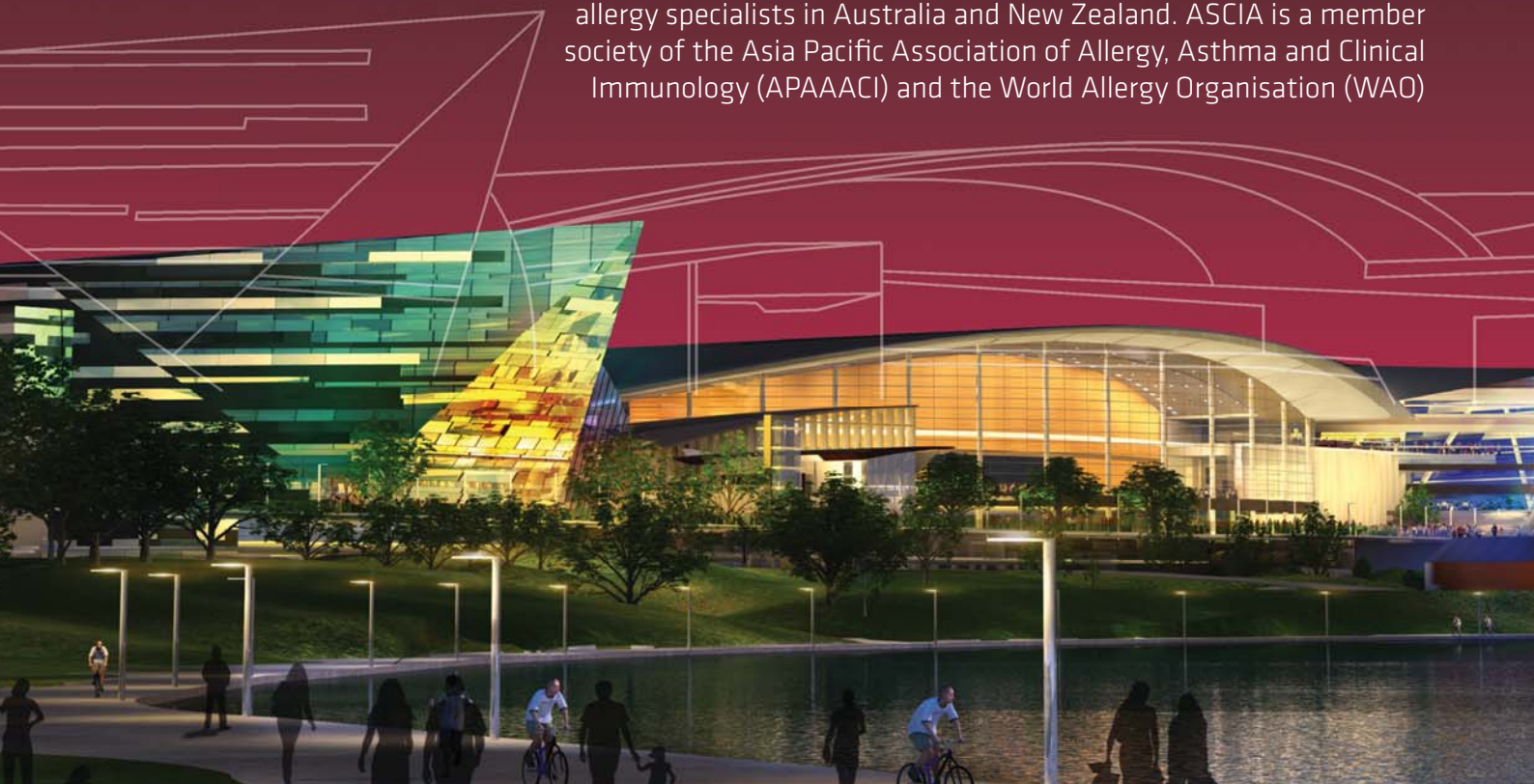
www.ascia2015.com

ascia

australasian society of clinical immunology and allergy

www.allergy.org.au

ASCIA is the peak professional body of clinical immunology and allergy specialists in Australia and New Zealand. ASCIA is a member society of the Asia Pacific Association of Allergy, Asthma and Clinical Immunology (APAAACI) and the World Allergy Organisation (WAO)



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Please note that the ASCIA 2015 conference program is not influenced by its sponsors or exhibitors.

Welcome ASCIA 2015

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On behalf of the Australasian Society of Clinical Immunology and Allergy (ASCIA), I look forward to welcoming you to the ASCIA 2015 Annual Conference in Adelaide. The excellent program provides an international standard of continuing professional development for ASCIA members and other health professionals. Presentations by international and local speakers will cover a wide range of topics in the areas of allergic diseases, immunodeficiencies and autoimmunity, highlighting some exciting recent developments.

Innovations to the program in 2015 include the addition of the Autoimmunity Update and a Satellite Symposium on Food, Allergy and Nutrition, in addition to the Conference and the Allergy & Immunology Update for Nurses, Dietitians and other health professionals. Although these additional meetings make it a very busy week, we believe that it is an important role of ASCIA to provide opportunities to update knowledge for all health professionals working in the areas of allergy and clinical immunology.

Dr Melanie Wong
ASCIA President

We look forward to your participation in the ASCIA 2015 Annual Conference at the Adelaide Convention Centre from Wednesday 9th to Friday 11th September.

The conference will include presentations from the following international speakers:

- Professor Kirsten Beyer
- Professor John Harley
- Professor Gideon Lack
- Professor Luigi Notarangelo

In addition there are more than 70 speakers and chairs from Australasia participating in this conference and we expect approximately 400 delegates to attend the conference.

The ASCIA 2015 conference will be held in conjunction with the following meetings:

- **Food, Allergy and Nutrition Symposium 2015** hosted by the Centre for Food and Allergy Research (CFAR) and the Centre for Research Excellence (CRE) in Foods for Future Australians on **Tuesday 8 September 2015**
- **ASCIA 2015 Autoimmunity Update** for Advanced Trainees and Consultants on **Saturday 12 September**
- **ASCIA 2015 Allergy and Immunology Update** for Nurses, Dietitians and other health professionals on **Saturday 12 September**

We trust that you will also take the opportunity to enjoy your visit to Adelaide whilst participating in the conference.

Dr William Smith and Dr Anthony Smith
ASCIA 2015 Conference Chairs

On behalf of the Organising Committee

Dr Tatjana Banovic, Dr Damien Chan, Prof Robert Hedde, Dr Pravin Hissaria, Dr Tiffany Hughes, Dr Frank Kette, Merryn Netting, Dr Patrick Quinn, Deryn Thompson.

Information (A-Z)

Abstracts

Abstracts are published in the online Internal Medicine Journal for:

- ASCIA 2015 Annual Conference posters (displayed from 9-11 September)
- ASCIA 2015 Clinical Grand Rounds oral presentations (open to advanced trainees only)

Attendance Certificates

A certificate of attendance is provided to all delegates and are included in the registration envelope, together with a receipt for the registration payment.

Awards and Travel Scholarships

A limited number of travel scholarships of \$500 each are awarded to advanced trainees and medical students.

Awards of \$1,000 each for selected posters and clinical grand rounds will be presented at the end of the conference. These will be listed on the ASCIA website after the conference.

Disclaimers

In the event of industrial disruption or a natural disaster the meeting organisers cannot be held responsible for any losses incurred by delegates. The program is correct at the time of printing; however the organisers reserve the right to alter the program if necessary.

Dress Code

The dress code is smart casual throughout the conference and cocktail for the Gala Dinner.

Exhibition

We encourage delegates to visit the ASCIA 2015 exhibition stands throughout the meeting.

All lunches and tea breaks will be served in the exhibition areas.

Secretariat - registration, abstract submission, website



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Secretariat - sponsorship, exhibition, program



australasian society of clinical immunology and allergy

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Smoke Free Policy

It is the policy that the ASCIA 2015 conference is smoke-free, including all related social functions.

Social Program

ASCIA 2015 Welcome Function

Wednesday 9 September, 17.30 to 18.30

Adelaide Convention Centre, Foyer F

ASCIA 2015 Gala Dinner

Thursday 10 September, 18.30 to 23.00

Adelaide Oval, Ian McLachlan Room

ASCIA 2015 Closing Function (including award presentations)

Friday 11 September, 17.30-18.30

Adelaide Convention Centre, Foyer F

Special Requirements

Please provide details of any special diet, special needs or disability assistance required when you register.

Travel

Regular services to Adelaide are available from capital cities throughout Australia and New Zealand. Flights need to be directly booked with airlines or via travel agents. A taxi from the Airport to the Adelaide Convention Centre will take approximately 20 minutes.

Program Summary

ASCIA2015

Tuesday 8 September	Wednesday 9 September	Thursday 10 September	Friday 11 September	Saturday 12 September	Saturday 12 September
Food, Allergy and Nutrition Symposium <i>Rooms L2 & L3</i>	Day 1 <i>Hall L</i>	Day 2 <i>Hall L</i>	Day 3 <i>Hall L</i>	Autoimmunity Update <i>Hall F</i>	Allergy and Immunology Update <i>Rooms L2 & L3</i>
Welcome and introductions	Registration Breakfast Session: JSAC Forum for Supervisors and Trainees	Breakfast Session: National Allergy Strategy	Breakfast Session: Anaphylaxis Training for Schools and Childcare Update		Breakfast Meetings: ASCIA Nurse and Dietitian committees
The role of eczema in the development of food allergy – a target for prevention?	Reproductive and Developmental Immunology Plenary	Basten Oration Immunodeficiency Plenary	Autoimmunity and Genetics Plenary	Session 1: SLE Overview and Update Sjogren's Syndrome Overview and Update	Symposium Immunology 101; Effective Communication for Therapeutic Relationships
Morning Tea					
Preventing allergy: sun, bugs and food Hot publications in food allergy research	Food Allergy Plenary	Bone Marrow Transplantation in Immunology Plenary	Viruses in Autoimmunity and Immunodeficiency Plenary	Session 2: Early Inflammatory Arthritis/ Rheumatoid Arthritis Scleroderma Hereditary autoinflammatory syndromes	Session 1: Biologics; Innovation and Bright Ideas Workshop Session 2: Diagnosis and Management of Feeding Disorders in Children with Food Allergies
Lunch					
Panel discussion: LEAP and implications for clinical practice Hot publications in nutrition research	Oral Immunotherapy Symposium	Diagnostics Symposium	Autoimmunity Symposium	Session 3: Neuronal Autoimmune Disease Autoimmunity and Immunodeficiency Vasculitis Update	Session 3: Research and Publishing; ACI Nurses and the Future Frontier Session 4: Food Allergy Update; Working as a Country or Sole Dietitian Workshop
Afternoon Tea					
The role of fatty acid supply in allergy prevention The Australian food allergy epidemic – what are the drivers? Panel discussion: time for an allergy prevention trial testing an integrated food and nutrition strategy?	Clinical Grand Rounds	ASCIA AGM ASCIA Update Poster Rounds	Poster Rounds Quiz	Session 4: B-cell Depletion Therapy Tolerance Therapy in Autoimmune Disease	
	Welcome Function Convention Centre	Gala Dinner Adelaide Oval	Closing Function Convention Centre		

Food, Allergy and Nutrition Symposium Program

Tuesday 8 September 2015 Rooms L2 & L3

Hosted by:



07.15-08.45	Registration
09.00-09.30	Welcome and introductions Prof Katie Allen, Director, CRE: Centre for Food & Allergy Research, Melbourne Prof Maria Makrides, Director, CRE in Foods for Future Australians, Adelaide
09.30-10.30	The role of eczema in the development of food allergy: a target for prevention? Prof Kirsten Beyer, University Hospital Charité, Berlin
10.30-11.00	Morning Tea
11.00-12.00	Preventing allergy: sun, bugs and food Prof Gideon Lack, Professor of Paediatric Allergy, King's College, London
12.00-12.35	Hot publications in food allergy research (7 micro presentations)
12.35-13.30	Lunch
13.30-14.30	Panel discussion: LEAP and implications for clinical practice Chair: Prof Katie Allen, Centre for Food & Allergy Research Panellists: Prof Gideon Lack (King's College, UK), Prof Mimi Tang (MCRI), A/Prof Richard Loh (ASCI), Maria Said (A&AA), Dr Brynn Wainstein (NSW Govt), Prof Dianne Campbell (USyd), Merryn Netting (Uni Adelaide)
14.30-15.00	Hot publications in nutrition research (6 micro presentations)
15.00-15.20	Afternoon tea
15.20-15.50	The role of fatty acid supply in allergy prevention Karen Best, CRE in Foods for Future Australians
15.50-16.15	The Australian food allergy epidemic – what are the drivers? Prof Katie Allen, Centre for Food & Allergy Research (CFAR)
16.15-17.15	Panel discussion: Time for an allergy prevention trial testing an integrated food and nutrition strategy? Chair: Prof Maria Makrides, Centre for Research Excellence: Foods for Future Australians Panellists: Prof Susan Prescott (Telethon Kids), Prof Kirsten Beyer (Charite, Berlin), A/Prof Debbie Palmer (UWA), Prof Dianne Campbell (USyd), Prof Mimi Tang (MCRI).
17.15-17.30	Wrap up: Prof Katie Allen and Prof Maria Makrides

International Keynote Speakers

Professor Kirsten Beyer, University Hospital Charité, Berlin

Professor Gideon Lack, Professor of Paediatric Allergy, King's College, London

For information about these speakers see page 14.

Other speakers and chairs include some of the following investigators at Centres for Research Excellence, funded by NHMRC:

Centre for Food and Allergy Research (CFAR)

Chief Investigators:

- Professor Katie Allen
- Professor Anne-Louise Ponsonby
- Winthrop Professor Susan Prescott
- Professor Mimi Tang
- Professor Shyamali Dharmage
- Associate Professor Lyle Gurrin
- Professor Dianne Campbell

Associate Investigators:

- Associate Professor Mike Gold
- Dr Ralf Heine
- Associate Professor Richard Loh
- Associate Professor Andreas Lopata
- Professor Maria Makrides
- Dr Raymond Mullins
- Dr Jane Peake
- Professor Pete Smith
- Dr Brynn Wainstein
- Dr Melanie Wong

Centre for Research Excellence (CRE) in Foods for Future Australians

Chief Investigators:

- Professor Maria Makrides
- Professor Robert Gibson
- Professor Philip Ryan
- Dr Shao Zhou
- Professor Jodie Dodd
- Dr Andrew McPhee
- Dr Wendy Umberger
- Dr Carmel Collins
- A/Professor Irmeli Penttila

Associate Investigators:

- Mr Enzo Ranieri
- Professor Linda Tapsel
- Dr Manny Noakes
- Dr Rosemary Stanton

Conference Day 1 Program

Wednesday 9 September 2015 **Hall L**

07.15-08.45	Registration	
07.45-08.45	BREAKFAST SESSION: JSAC FORUM FOR SUPERVISORS AND TRAINEES Chairs: Dr Tiffany Hughes, Dr Melanie Wong, Dr Jan Sinclair	
08.50-09.00	Welcome from ASCIA President and ASCIA 2015 Chairs Dr Melanie Wong, Dr William Smith, Dr Anthony Smith.	
09.00-10.30	REPRODUCTIVE AND DEVELOPMENTAL IMMUNOLOGY PLENARY Chairs: Merryn Netting, A/Prof Richard Loh	
09.00-09.45	How the maternal immune response determines pregnancy outcome and offspring health	Prof Sarah Robertson
09.45-10.30	Fish, fats, birth outcomes and childhood allergies: are they really all related?	Prof Maria Makrides
10.30-11.00	Morning Tea	
11.00-12.30	FOOD ALLERGY PLENARY Chairs: Dr Patrick Quinn, Prof Katie Allen	
11.00-11.45	Development and prevention of food allergy	Prof Kirsten Beyer
11.45-12.30	LEAP trial and basophil activation test (BAT) for food allergy	Prof Gideon Lack
12.30-13.30	Lunch	
13.30-15.00	ORAL IMMUNOTHERAPY SYMPOSIUM Chairs: A/Prof Mike Gold, Prof Mimi Tang	
13.30-14.00	Specific immunotherapy in food allergy	Prof Kirsten Beyer
14.00-14.20	CAKE study	Merryn Netting
14.20-14.40	Application of BAT for food allergy in an Australian setting	Dr Michael O'Sullivan
14.40-15.00	Biphasic oral immunotherapy for the treatment of peanut allergy	Dr Billy Tao
15.00-15.30	Afternoon Tea	
15.30-17.30	CLINICAL GRAND ROUNDS (16 presentations by advanced trainees - see page 7) Chairs: Dr Tiffany Hughes, A/Prof David Fulcher	
17.30-18.30	WELCOME FUNCTION Adelaide Convention Centre, Foyer F	

Clinical Grand Rounds Program

ASCI 2015

Wednesday 9 September 2015: 15.30-17.30

No.	First Name	Last Name	Presentation Title	Theme
CGR1	Elizabeth	Klinken	A CASE OF CATAMENIAL ANAPHYLAXIS	Allergy
CGR2	Annaliese	Blincoe	COMPLEX IMMUNE COMPLEXES	Immunodeficiency
CGR3	Abigail	Cheung	STAT1 DEFICIENCY PRESENTING WITH HYPERINFLAMMATION	Immunodeficiency
CGR4	Gerard	Chu	"A CURE WOULD BE NICE" - THROWING MUD AT ADULT CGD	Immunodeficiency
CGR5	Caroline	Foreman	IMMUNE OVER AND UNDER ACTIVITY IN THE SAME PATIENT	Immunodeficiency
CGR6	Leigh	Mackey	MORE THAN JUST ASPLENIA	Immunodeficiency
CGR7	Birgit	Marchand	SCLEROSING CHOLANGITIS IN DOCK 8 DEFICIENCY	Immunodeficiency
CGR8	Claire	Nickolls	MAKE SURE YOU MAKE THE DIAGNOSIS!	Immunodeficiency
CGR9	Phillippa	Pucar	A CASE OF MONOGENIC IMMUNE DEFICIENCY AND AUTOIMMUNITY	Immunodeficiency
CGR10	Sarah	Sasson	IN GOOD CONSCIENCE	Immunodeficiency
CGR11	Bella	Shadur	FROM MOUTH ULCER TO HAEMATOPOIETIC STEM CELL TRANSPLANT	Immunodeficiency
CGR12	Jocelyn	Jiang	A BIT OF FAT AND PROTEIN	Other Immune Diseases
CGR13	Narinder	Kaur	INDESTRUCTIBLE ...	Other Immune Diseases
CGR14	Thanh-Thao (Adriana)	Le	MICROMANAGING A MACRO PROBLEM	Other Immune Diseases
CGR15	Alberto	Pinzon-Charry	NMDA-R ENCEPHALITIS PRESENTING AS ACUTE PSYCHOSIS IN A CHILD WITH HUMAN IMMUNODEFICIENCY VIRUS - COINCIDENCE OR CORRELATION?	Other Immune Diseases
CGR16	Grace	Thompson	A CASE OF EPSTEIN BAR VIRUS DRIVEN HAEMOPHAGOCYtic LYMPHOHISTIOCYTOSIS SUCCESSFULLY TREATED WITH RITUXIMAB	Other Immune Diseases

Each of the 16 CGR presentations listed above will be allocated a total time of 7.5 minutes, comprising: 4 minutes for the presentation (8 powerpoint slides maximum); and 3.5 minutes for questions and discussion.

Conference Day 2 Program

Thursday 10 September 2015 **Hall L**

07.30-09.00	Registration	
07.45-08.45	BREAKFAST SESSION: NATIONAL ALLERGY STRATEGY (including light breakfast) Chair: Dr Melanie Wong	A/Prof Richard Loh
09.00-10.00	BASTEN ORATION Chair: Dr William Smith Insect venom allergy – important lessons from local oddities	Prof Robert Heddle
10.00-10.40	IMMUNODEFICIENCY PLENARY Chairs: Dr Damien Chan, Dr Jovanka King	
10.00-10.40	Newborn screening for severe T cell lymphopenia: what did we learn?	Prof Luigi Notarangelo
10.40-11.00	Morning Tea	
11.00-12.30	BONE MARROW TRANSPLANTATION IN IMMUNOLOGY PLENARY Chairs: Dr Tatjana Banovic, Dr Joanne Smart	
11.00-11.45	Transplantation and gene therapy for immunodeficiency	Prof Luigi Notarangelo
11.45-12.30	Transplantation and GVHD	Prof Geoff Hill
12.30-13.30	Lunch	
13.30-15.00	DIAGNOSTICS SYMPOSIUM Chairs: Dr Andrew McLean-Tooke, Dr Brynn Wainstein	
13.30-14.00	PID in adults: not just CVID	Prof Luigi Notarangelo
14.00-14.30	Improved diagnostics in food allergy	Prof Kirsten Beyer
14.30-15.00	Forensic allergy diagnosis	Prof Robert Heddle
15.00-15.30	Afternoon Tea	
15.00-16.00	ASCIA AGM AND ASCIA UPDATE	Dr Melanie Wong
16.00-17.00	POSTER ROUNDS – ALLERGY Chairs: Prof Connie Katelaris, Dr Jan Sinclair	
18.30 -22.30	GALA DINNER Adelaide Oval Stadium, Ian McLachlan Room Dinner Speaker- Dr Tim Cooper AM	

Conference Day 3 Program

ASCIA2015

Friday 11 September 2015 Hall L

07.30-09.00	Registration	
07.45-08.45	BREAKFAST SESSION: ANAPHYLAXIS TRAINING FOR SCHOOLS AND CHILDCARE UPDATE (including light breakfast) Chair: A/Prof Mike Gold, Prof Dianne Campbell	
09.00-10.30	AUTOIMMUNITY AND GENETICS PLENARY Chairs: Prof Tom Gordon, Prof Matthew Cook	
09.00-09.45	Genetics of systemic lupus erythematosus (SLE) and Sjögren's syndrome (SS)	Prof John Harley
09.45-10.30	Personalised autoimmunity	Prof Carola Vinuesa
10.30-11.00	Morning Tea	
11.00-12.30	VIRUSES IN AUTOIMMUNITY AND IMMUNODEFICIENCY PLENARY Chairs: Dr Anthony Smith, Dr Katrina Randall	
11.00-11.45	A role for Epstein-Barr virus (EBV) in the evolution of SLE	Prof John Harley
11.45-12.30	A novel pervasive defect of immunity with increased susceptibility to invasive viral infections	Prof Luigi Notarangelo
12.30-13.30	Lunch	
13.30-15.00	AUTOIMMUNITY SYMPOSIUM Chairs: Dr Tiffany Hughes, Dr David Gillis	
13.30-14.00	Public clonotypes in autoimmunity	Prof Tom Gordon
14.00-14.30	Biosimilars in autoimmune and autoinflammatory disease	Dr Pravin Hissaria
14.30-15.00	Cell-based therapy in autoimmune disease	Prof Toby Coates
15.00-15.30	Afternoon Tea	
15.30-16.30	POSTER ROUNDS – ALLERGY, IMMUNODEFICIENCY, OTHER IMMUNE DISEASES Chairs: Dr Pravin Hissaria, Dr Paul Gray	
16.30-17.30	Quiz Chairs: Dr Tiffany Hughes, Dr Jovanka King, Dr Anthony Smith	
17.30-18.30	Closing Function Adelaide Convention Centre, Foyer F	

Allergy and Immunology Update Program

Saturday 12 September 2015 Rooms L2 & L3

07.30-09.00	Registration	
07.45-08.45	CONCURRENT BREAKFAST MEETINGS (including light breakfast):	
	ASCIA Nurses committee meeting	Chair: Val Noble
	ASCIA Dietitians committee meeting	Chair: Ingrid Roche
09.00-10.30	SYMPOSIUM	
	Chairs: Deryn Thompson, Merryn Netting	
09.00-09.05	Welcome and introduction	Deryn Thompson, Merryn Netting
09.05-09.45	Immunology 101	Dr Tiffany Hughes
09.45-10.30	Effective communication for therapeutic relationships	Clara Tait
10.30-11.00	Morning Tea	
11.00-12.30	CONCURRENT SESSION 1: BIOLOGICS; INNOVATION AND BRIGHT IDEAS	
	Chairs: Pam Hudson, Anna Thomson	
11.00-12.00	BIOLOGICS	
11.00-11.40	Biologics	Dr Pravin Hissaria
11.40-11.50	Biologics	Aida Ahmadi
11.50-12.00	Questions	
12.00-12.30	INNOVATION AND BRIGHT IDEAS WORKSHOP	
	Nurse delegates are invited to submit bright ideas from adult or paediatric immunology and allergy nursing to present in 5 minutes (+ 5 minute questions) during this workshop.	
11.00-12.30	CONCURRENT SESSION 2: MORE THAN JUST PICKY AND FUSSY - FEEDING DISORDERS IN CHILDREN WITH FOOD ALLERGIES	
	Chairs: Kathy Beck, Ingrid Roche	
11.00-11.40	Feeding disorders in children with food allergy- a dietitians perspective	Emma Landorf
11.40- 12.20	Working with children with feeding disorders- A speech pathology perspective	Emily Lively
12.20-12.30	Panel discussion	Emma Landorf, Emily Lively
12.30-13.30	Lunch	
13.30-15.00	CONCURRENT SESSION 3: RESEARCH AND PUBLISHING; ALLERGY AND CLINICAL IMMUNOLOGY (ACI) NURSES AND THE FUTURE FRONTIER	
	Chairs: Sacha Palmer, Di Edwards	
13.30-14.10	Research and Publishing - No longer the invisible nurse	A/Prof Kay Price

14.10-14.50	<p>ACI Nurses and the Future Frontier ... RN to Specialist to Nurse Practitioner - developing your practice journey.</p> <p>This session will focus on the interesting and varied roles of advanced practice nurses working in allergy and clinical immunology throughout Australasia</p>	<p>Sacha Palmer Noelene Davies Deryn Thompson Janice Capstick Simone Stephens</p>
14.50-15.00	Questions and discussion	
13.30-15.00	<p>CONCURRENT SESSION 4: FOOD ALLERGY UPDATE; WORKING AS A COUNTRY OR SOLE DIETITIAN</p> <p>Chairs: Vicki McWilliam, Laura Ryan</p>	
13.30-14.00	FOOD ALLERGY UPDATE - AN UPDATE OF CURRENT ISSUES:	
13.30-13.40	Maternal diet restriction and breastfeeding	Anna Richards
13.40-13.50	Introduction of solid foods for children at risk of developing allergies	Kathy Beck
13.50-14.00	Formula update	Ingrid Roche
14.00-15.00	<p>WORKING AS A COUNTRY OR SOLE DIETITIAN CASE STUDY BASED WORKSHOP</p> <p>This workshop is aimed at dietitians working in sole positions in the country or private practice. We will discuss common food allergy related conditions, serum specific IgE testing, appropriate dietetic management and when to refer a child with food allergies for further assessment and advice.</p>	<p>Dr Margaret Kummerow Merryn Netting</p>
15.00-15.30	Afternoon Tea	
Meeting closed		

Other meetings for ASCIA 2015 Allergy and Immunology Update delegates

(RSVPs are required when registering)

Nurses Anaphylaxis Simulation, Friday 11 September 2015, 14.00-16.30

University of South Australia, (places limited to first 24 to register)

Dietitians Workshop, Friday 11 September 2015, 14.00-16.30

Room L1A, Adelaide Convention Centre (including afternoon tea)

14.00-15.00 Eosinophilic Eosophagitis (EoE) Update (Barbara Stet, Vicki McWilliam)

15.15-16.30 Resource Workshop

Autoimmunity Update Program

Saturday 12 September 2015 **Hall F**

07.30-09.00	Registration	
09.00-10.30	SESSION 1 Chairs: Dr Anthony Smith, Prof Dominic Mallon	
09.00-9.45	Systemic lupus erythematosus (SLE) overview and update	Prof John Harley
9.45-10.30	Sjogren's syndrome (SS) overview and update	Prof Tom Gordon
10.30-11.00	Morning Tea	
11.00-12.30	SESSION 2 Chairs: Dr Ming-Wei Lin, Dr Kate Nicholls	
11.00-11.30	Early inflammatory arthritis and rheumatoid arthritis	A/Prof Susanna Proudman
11.30-12.00	Scleroderma	A/Prof Jenny Walker
12.00-12.30	Hereditary autoinflammatory syndromes	Prof Dominic Mallon
12.30-13.30	Lunch	
13.30-15.00	SESSION 3 Chairs: Dr Frank Kette, A/Prof Peter Hollingsworth	
13.30-14.00	Neuronal autoimmune disease	A/Prof Tim Kleinig
14.00-14.30	Autoimmunity and immunodeficiency	Dr Melanie Wong
14.30-15.00	Vasculitis update	Dr Tiffany Hughes
15.00-15.30	Afternoon Tea	
15.30-16.30	SESSION 4 Chairs: Dr Pravin Hissaria, Dr William Smith	
15.30-16.00	B-cell depletion therapy	A/Prof Sean Riminton
16.00-16.30	Tolerance therapy in autoimmune disease	Dr David Gillis
Meeting closed		

International Keynote Speakers

Professor Kirsten Beyer MD

Professor, Department of Pediatric Pneumology and Immunology, University Hospital Charité, Berlin, Germany



Kirsten Beyer qualified as a MD at the Free University in Berlin, Germany, in 1991. She carried out her pediatric training and fellowship at the Humboldt University in Berlin. From 1996-1997 she became a visiting scientist at the Division of Allergy & Clinical Immunology at Johns Hopkins University in Baltimore, USA. From 1997-2003 Dr Beyer worked at the Division of Pediatric Allergy & Immunology at Mount Sinai School of Medicine, New York, where she was appointed as an Assistant Professor of Pediatrics in 2001. In 2003 she returned to Berlin where she is appointed Professor at the University Hospital Charité.

Professor Beyer is a member of numerous national and international organizations. Her research experience spans the spectrum of pediatric allergy with a particular focus on food allergy. Her interests include food allergy prevention, as well as its diagnosis and treatment. She is principle investigator on several national and international studies.

Currently her group is studying the induction of oral tolerance through oral immunotherapy in food allergic children. Another project is investigating the primary prevention of hen's egg allergy through early hen's egg feeding using a randomized placebo-controlled study design.

Professor Beyer started within the EU-funded project EuroPrevall the first European birth cohort of over 12,000 babies with the main focus on food allergy. This cohort will be reinvestigated at school age within the EU-funded project iFAAM (integrated approaches to food allergen and allergy management).

Professor John Harley MD PhD

Professor of Pediatrics and Medicine at Cincinnati Children's Hospital Medical Center and the University of Cincinnati



John B. Harley holds the David Glass Endowed Chair as Professor of Pediatrics and Medicine at Cincinnati Children's Hospital Medical Center and the University of Cincinnati. He serves as the founder and Director of The Center for Autoimmune Genomics and Etiology (CAGE), which now is the academic home to 11 Faculty.

Before going to Cincinnati, Dr. Harley led the lupus genetics effort in Oklahoma for over 25 years. He directed the Lupus Family Registry and Repository (LFRR), a collection of 10,000 lupus patients, family members, and controls with 2 billion genotypes and 500,000 specimen aliquots.

With over 400 publications and work underway, he and his colleagues have identified or confirmed over 50 SLE genetic

associations, providing new mechanistic insight into the pathophysiology of this disorder. They have also developed evidence supporting Epstein-Barr virus as a major component of the environmental origins of lupus. Many of his trainees have become internationally recognized scholars.

Professor Gideon Lack MBBCh FRCPCh

**Professor of Paediatric Allergy, King's College London
Head of the Clinical Academic Paediatric Allergy Service, Guy's & St. Thomas' NHS Foundation Trust**



Gideon Lack is Professor of Paediatric Allergy at King's College London and Head of the Clinical Academic Paediatric Allergy Service at Guy's & St. Thomas' NHS Foundation Trust. He read medicine at Oxford University before training as a Paediatrician in New York, and then specialising in Paediatric and Adult Allergy in Denver, Colorado.

He led the Department of Paediatric Allergy and Immunology at St Mary's Hospital, London for 12 years and became Professor of Paediatric Allergy and Immunology at Imperial College London in 2005. He moved to King's College London at Guy's and St Thomas' NHS Foundation Trust in May 2006.

Professor Lack's research has focused on peanut allergy, and new strategies to prevent peanut and other food allergies through oral tolerance induction. Related to that he is researching strategies to prevent the development of eczema, asthma, and allergic rhinitis (hay fever) in children and adults. His clinical expertise focuses particularly on the diagnosis and management of peanut and other food allergies as well as allergic asthma, anaphylaxis, and desensitising vaccines to treat allergic rhinitis and other allergies.

Professor Lack's travel has been supported by the Centre for Food & Allergy Research (CFAR) www.foodallergyresearch.org.au

Professor Luigi Notarangelo MD

Professor of Pediatrics at the Harvard Medical School, Boston, USA



Dr Notarangelo graduated in Medicine from the University of Pavia (Italy) in 1980. He completed his residency in Pediatrics and then fellowships in Allergy/Immunology and Human Genetics at the same University. He obtained a position of Assistant Professor in Pediatrics at the University

of Brescia (Italy) in 1986. After a research stage at the National Institutes of Health, Bethesda, MD (USA) between 1986 and 1989, he was promoted to Associate Professor at the University of Brescia (Italy) in 1990 and to Full Professor of Pediatrics in 1996, also at the University of Brescia.

From 2000 to 2006, Dr Notarangelo served as Chair of Department of Pediatrics at the University Hospital in Brescia. He was elected President of the European Society for Immune

Deficiency from 2002 to 2006, and co-chaired the Committee on Primary Immune Deficiencies of the International Union of Immunological Societies between 2006 and 2012. In May 2015, he will become President of the Clinical Immunology Society (CIS).

He has authored more than 450 peer-review articles, mostly on the molecular and cellular pathophysiology, diagnosis and treatment of primary immunodeficiencies. He has discovered the genetic basis of several inborn errors of immunity, including X-linked and autosomal recessive forms of hyper-IgM syndrome, Severe Combined Immune Deficiency (SCID) due to JAK3 deficiency, Omenn syndrome, isolated X-linked thrombocytopenia, and DOCK2 deficiency.

Dr Notarangelo is co-Principal Investigator of the Primary Immune Deficiency Treatment Consortium and also site PI in a gene therapy trial for X-linked SCID, and co-PI in a gene therapy trial for Wiskott-Aldrich syndrome.

Professor Notarangelo's travel has been supported by an unrestricted educational grant from CSL Behring.

Basten Orator

Professor Robert Heddle MBBS PhD FRACP FRCPA

Chief Pathologist, SA Pathology and Head, Clinical Immunology, Royal Adelaide Hospital



Professor Heddle has held senior clinical posts as a Clinical Immunologist/Allergist at the Royal Adelaide Hospital (RAH), Flinders Medical Centre (FMC), Repatriation General Hospital, Daw Park and Women's and Children's Hospital, and until 2003 he was also in private consultant rooms practice. He then took a position as Director of Allergy at FMC. He moved in August 2008 to the position of Head of Clinical Immunology SA Pathology/RAH before taking on the role as Chief Pathologist, SA Pathology in March 2010. He is also an ASCIA past President.

Professor Heddle has major interests in insect sting anaphylaxis with multiple invitations to speak at meetings and publications in journals with high impact factors. He has a strongly held view that Clinical Immunologists/Allergists need strength in the broader biological sciences relevant to their roles, such as botany, entomology and food science. Other major interests are drug allergy, immunoglobulin replacement therapy, the fostering of research activity and the development and maintenance of professional standards.

Other Speakers and Chairs (A-Z)

Conference and Autoimmunity Update

Prof Katie Allen MBBS BMedSc PhD FRACP

*Paediatric Gastroenterologist and Allergy Specialist, Royal Children's Hospital, Melbourne, VIC
Director, Murdoch Children's Research Institute, Melbourne, VIC*

Dr Tatjana Banovic MD FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, IMVS, Royal Adelaide Hospital, Adelaide, SA

Prof Dianne Campbell MBBS PhD FRACP

Clinical Immunology/Allergy Specialist and Chair (Allergy/Immunology), Children's Hospital at Westmead, NSW

Dr Damien Chan MBBS DCH FRACP

Clinical Immunology/Allergy Specialist, Women and Children's Hospital Adelaide, SA

Prof Toby Coates MBBS PhD

Transplant physician and Nephrologist, University of Adelaide, SA

Prof Matthew Cook MBBS(Hons) PhD FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Canberra Hospital. ACT

Dr Tim Cooper MBBS MSc MBA AM

Managing Director and Chief Brewer, Coopers

A/Prof David Fulcher MBBS(Hons) PhD FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, NSW

Dr David Gillis MBBS(Hons) FRACP FRCPA

*Clinical Immunology/Allergy Specialist and Immunopathologist, Royal Brisbane and Women's Hospital, QLD
ASCIA past President*

A/Prof Michael Gold MBChB DCH MD FRACP FCP

Clinical Immunology/Allergy Specialist, Women's and Children's Hospital, Adelaide, SA

Prof Tom Gordon MBBS FRACP FRCPA PhD MD

Clinical Immunology Specialist and Immunopathologist, SA Pathology, Flinders Medical Centre, Adelaide SA

Dr Paul Gray MBChB BA(Hons) BMedSc MRCPCH(UK) FRACP

Clinical Immunology/Allergy Specialist, Sydney Children's Hospital, NSW

Prof Geoff Hill MBChB MD FRACP FRCPA

Transplant physician and Haematologist, Queensland Institute of Medical Research, QLD

Dr Pravin Hissaria MBBS MD DM FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Royal Adelaide Hospital, SA

A/Prof Peter Hollingsworth MBBS DPhil FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, QEII Medical Centre, Perth, WA

Dr Tiffany Hughes MBBS MD FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Royal Adelaide Hospital, SA

Prof Connie Katelaris MBBS PhD FRACP

*Clinical Immunology/Allergy Specialist, NSW
ASCIA and APAAACI past President*

Dr Frank Kette MBBS PhD FRACP FRCPA

Clinical Immunology/Allergy Specialist, Adelaide SA

Dr Jovanka King BPod BMBS(Hons) DCH

Clinical Immunology/Allergy Advanced Trainee, Adelaide SA

A/Prof Tim Kleinig PhD FRACP MBBS (Hons) BA

Neurologist, Adelaide SA

Dr Ming-Wei Lin MBBS FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Westmead Children's Hospital, NSW

A/Prof Richard Loh MBBS FRACP FAAAAI FAAAAI

*Clinical Immunology/Allergy Specialist, Perth WA
ASCIA past President*

Prof Maria Makrides BSc BND PhD

*Director of Research, Women's and Children's Health Research Institute, Adelaide SA
Professor of Human Nutrition, University of Adelaide, SA.*

Prof Dominic Mallon MBBS FRACP FRCPA

*Clinical Immunology/Allergy Specialist, Immunopathologist and Chief Pathologist, Pathwest WA
ASCIA past President*

Dr Andrew McLean-Tooke MBChB MD MRCP FRACP FRCPATH

Clinical Immunology/Allergy Specialist and Immunopathologist, Perth, WA

Ms Merryn Netting BSc BND AdvAPD

Dietitian, Adelaide SA

Dr Kate Nicholls MBBS BMedSc FRACP

Clinical Immunology/Allergy Specialist, Royal Melbourne Hospital, VIC

Dr Michael O'Sullivan MBBS(Hons) FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Perth, WA

A/Prof Susanna Proudman MBBS(Hons) FRACP

Rheumatologist, Royal Adelaide Hospital, SA and Medical Director, Arthritis Australia

Dr Patrick Quinn MBBS FRACP

Clinical Immunology/Allergy Specialist, Women's and Children's Hospital, Adelaide, SA

Dr Katrina Randall BSc(Hons) MBBS(Hons) FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Canberra ACT

A/Prof Sean Riminton MBChB PhD FRACP FRCPA

Clinical Immunology/Allergy Specialist and Immunopathologist, Concord Hospital, Sydney, NSW

Prof Sarah Robertson BSc PhD

Director, Robinson Research Institute, University of Adelaide, SA

Dr Jan Sinclair MBChB FRACP

Clinical Immunology/Allergy Specialist, Starship Children's Hospital, Auckland, NZ

Dr Joanne Smart BSc MBBS PhD FRACP

Clinical Immunology/Allergy Specialist, Melbourne, VIC

Dr Anthony Smith MBBS PhD FRACP

Clinical Immunology/Allergy Specialist, Adelaide, SA and Chair, ASCIA 2015 Conference

Dr William Smith MBBS(Hons) PhD FRACP FRCPA

*Clinical Immunology/Allergy Specialist, Adelaide, SA
Chair, ASCIA 2015 Conference and ASCIA President Elect*

Prof Mimi Tang MBBS PhD FRACP FRCPA FAAAAI

Clinical Immunology/Allergy Specialist and Immunopathologist, Melbourne, VIC

Dr Billy Tao MBBS FRACP

Allergy Specialist, Adelaide SA

Prof Carola Vinuesa LMS(MBBS) PhD

Elizabeth Blackburn NHMRC Research Fellow and Professor of Immunology, Australian National University, ACT.

Dr Brynn Wainstein MBChB PhD FRACP

Clinical Immunology/Allergy Specialist, Sydney, NSW

A/Prof Jenny Walker

Rheumatologist, Adelaide SA

Dr Melanie Wong MBBS(Hons) PhD FRACP FRCPA

*Clinical Immunology/Allergy Specialist and Immunopathologist, Children's Hospital at Westmead, NSW
ASCIA President*

Speakers and Chairs (A-Z)

Allergy and Immunology Update

Ms Aida Ahmadi RN BN GDAC

Royal Adelaide Hospital, Adelaide, SA

Ms Kathy Beck BSc GDDietNut MHlthSc

Dietitian, Royal Children's Hospital, Brisbane, QLD

Ms Janice Capstick RN GCNP

Auckland City Hospital, NZ

Ms Noelene Davies MN

Australian Red Cross Blood Service, Adelaide, SA

Ms Dianne Edwards BN

Flinders Medical Centre, Adelaide, SA

Dr Pravin Hissaria MBBS MD DM FRACP FRCPA

*Clinical Immunology/Allergy Specialist and Immunopathologist,
Royal Adelaide Hospital, SA*

Ms Pamela Hudson BN CNC

Flinders Medical Centre, Adelaide SA

Dr Tiffany Hughes MBBS MD FRACP FRCPA

*Clinical Immunology/Allergy Specialist and Immunopathologist,
Royal Adelaide Hospital, SA*

Dr Margaret Kummerow MBBS FRACP

Clinical Immunology/Allergy Specialist, Adelaide SA

Ms Emma Landorf BND(Hons)

Dietitian, Adelaide SA

Ms Emily Lively BSc

*Director and Speech Pathologist, Lively Eaters Feeding Services,
Adelaide, SA*

Ms Vicki McWilliam BAppSc MNutDiet CertPaedNutDiet

Dietitian, Royal Children's Hospital, Melbourne, VIC

Ms Merryn Netting BSc BND AdvAPD

Dietitian, Adelaide SA

Ms Val Noble RN

Department of Health, Perth, WA

Ms Sacha Palmer BN

Women's and Children's Health Network, Adelaide, SA

A/Prof Kay Price BN DipTeach(Nurse Ed) MN PhD

*Associate Professor, School of Nursing and Midwifery, University of
South Australia*

Ms Anna Richards DHlthSc(Otago) NZRD

Dietitian, Grafton Specialists, NZ

Ms Ingrid Roche BSc GDDiet

Dietitian, Perth, WA

Ms Laura Ryan BEnvHlth MNutDiet CertIVFit APD AN

Founder and Principal Dietitian, Early Nutrition, Adelaide SA

Ms Simone Stephens DCN CNP PCHSAN

Auckland City Hospital, NZ

Ms Barbara Stet BHlthSc

Dietitian, Wellington Hospital, NZ

Ms Clara Tait

Community Support Coordinator Asthma Foundation SA

Ms Deryn Thompson SRN BN MNg MBNDG MADNA

University of SA, Women's and Children's Hospital Adelaide, SA

Ms Anna Thomson RN

Prince Alfred College, SA

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PBS Information: Authority Required. Refer to PBS Schedule for full authority information.

BEFORE PRESCRIBING, PLEASE REVIEW APPROVED PRODUCT INFORMATION
AVAILABLE ON REQUEST FROM ALPHAPHARM.

MINIMUM PRODUCT INFORMATION EpiPen® Adrenaline Auto-Injector 0.3 mg / 0.3 mL EpiPen® Jr. Adrenaline Auto-Injector 0.15 mg / 0.3 mL. The following are not a complete listing: **Indication:** For the emergency treatment of anaphylaxis [acute severe allergic reaction] due to insect stings or bites, foods, drugs or other allergens. **Contraindications: Contraindications are relative, as this product is intended for use in life-threatening emergencies.** Certain arrhythmias, cerebral arteriosclerosis, vasopressor drug contraindication, shock (except anaphylactic shock), certain types of general anaesthetics. **Precautions:** Sulfite allergy, intravenous administration, ventricular fibrillation, prebrillatory rhythm, tachycardia, myocardial infarction, cardiovascular disease, organic heart disease, cardiac dilation, cerebral arteriosclerosis, prostatic hypertrophy, elderly, individuals with diabetes, hypertension, narrow angle glaucoma, hyperthyroidism, organic brain damage, psychoneurosis, phenothiazine-induced circulatory collapse, Parkinsonism. Avoid injection into hands, feet, ears, nose, buttocks, genitalia. Use in Pregnancy: Pregnancy Category A. Excreted in breast milk. Use with caution when maternal blood pressure is in excess of 130/80. Interactions: CNS medicines, alpha and beta adrenergic blockers, some general anaesthetics, hypoglycaemic agents. **Adverse Effects:** Anxiety, restlessness, tachycardia, respiratory difficulty, tremor, weakness, dizziness, headache, dyspnoea, cold extremities, pallor, sweating, nausea, vomiting, sleeplessness, hallucinations, flushing of face and skin. Psychomotor agitation, disorientation, impaired memory, potentially fatal ventricular arrhythmias, severe hypertension which may lead to cerebral haemorrhage and pulmonary oedema. Angina may occur in patients with CAD. **Dosage:** Single intramuscular injection into anterolateral aspect of thigh, repeat as directed if symptoms recur or have not subsided. Adults > 30kg: EpiPen® Auto-Injector (0.3 mg adrenaline) Children 15–30kg: EpiPen® Jr. Auto-Injector (0.15 mg adrenaline). The prescribing physician may choose to prescribe more or less than this amount; please refer to relevant guidelines.

References: 1. Australian Register of Therapeutic Goods (ARTG) EpiPen® and EpiPen® Jr registration, 20/08/1993. Available at <https://www.ebs.tga.gov.au> accessed August 2015. 2. Pharmaceutical Benefits Schedule Item reports, August 1993 – June 2014. https://www.medicareaustralia.gov.au/statistics/pbs_item.shtml. accessed August 2015. 3. ASCIA: Guidelines for adrenaline auto-injector prescription 2015. Available at http://www.allergy.org.au/images/stories/anaphylaxis/2015/ASCIA_Guidelines_AAI_prescription_2015.pdf accessed August 2015. 4. ASCIA Action Plan for Anaphylaxis. Available at www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis accessed August 2015. 5. Pharmaceutical Benefits Scheme. Adrenaline Auto-Injectors. Available at www.pbs.gov.au/medicine/item/8697R-8698T accessed August 2015. 6. EpiClub®, www.epiclub.com.au accessed August 2015. EpiPen® is a registered trademark of Mylan, Inc. EpiPen® and EpiPen® Jr. are distributed in Australia by Alphapharm Pty. Limited. ABN 93 002 359 739, Level 1, 30 The Bond, 30–34 Hickson Road, Millers Point, NSW, 2000. Customer Service Line: 1800 274 276, www.alphapharm.com.au inCeptiv ALP0686 August 2015



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References: 1. AIHW 2011. Allergic rhinitis ('hay fever') in Australia. Cat. no. ACM 23. Canberra: AIHW. 2. NAC Australia. Asthma & allergy. A guide to the management of allergy for those living with asthma. Available at: <http://www.nationalasthma.org.au/uploads/publication/asthma-allergy.pdf> (cited 24 July 2015). bioCSL (Australia) Pty Ltd, ABN 66 120 398 067, 63 Poplar Road, Parkville, Victoria 3052. Medical Information: 1800 642 865. bioCSL® is a registered trademark of CSL Limited. AUS/MIZZ/0715/0006 ZEST/BCSME005/0715. Date of preparation: July 2015

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[†]IVIg = intravenous immunoglobulin

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Hizentra[®]

PBS Information: This product is not listed on the PBS.

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www.cslbehring.com.au/au-pi or at Stand no. 23**

Minimum Product Information HIZENTRA[®] (Normal Immunoglobulin (human) 20% (20g/100mL), subcutaneous injection.

Indications: Replacement therapy in primary immunodeficiency disease and symptomatic hypogammaglobulinaemia secondary to underlying disease or treatment. **Contraindications:** Severe systemic allergic reaction to active substance or excipients. Hyperproliferative. **Precautions:** **SUBCUTANEOUS use ONLY. DO NOT administer Intravenously (IV)**, shock can develop if accidentally administered IV. Infusion must be stopped immediately if severe hypersensitivity reaction occurs. Monitor during and for the first hour after first infusion patients a) that are naive to human normal Ig, or b) that have switched from an alternative Ig product, or c) with long interval since previous infusion. All other patients monitor during and at least 20 minutes post infusion. Those with anti-IgA antibodies, in whom treatment with subcutaneous IgG remains only option, switch to Hizentra only under close medical supervision. Reported cases of aseptic meningitis syndrome, embolic and thrombotic events. **Pregnancy and lactation:** Hizentra only given with caution, immunoglobulin crosses placenta and present in breast milk; limited clinical study data, clinical experience suggests no harmful effects. **Pathogen safety:** donor screening and dedicated viral inactivation/removal manufacturing procedures used; possibility of viral transmission cannot, however, be totally excluded. **Interactions:** May affect the response to live attenuated vaccines. May interfere with some serological tests. For all precautions, etc., review approved product information (PI). **Adverse Effects:** infusion site reactions and headache. For all adverse events review approved PI. **Dosage & Administration:** Dose needs to be individualised for the patient. Loading dose: at least 0.2 to 0.5 g/kg (1.0 to 2.5 mL/kg), which may need to be divided over several days. Maintenance doses: administered at repeated intervals to reach a cumulative monthly dose of around 0.4 to 0.8 g/kg (2.0 to 4.0 mL/kg). Administered subcutaneously into sites such as abdomen, thigh, upper arm, and lateral hip. Large doses (>25 mL) recommended to be administered at multiple sites (sites at least 5 cm apart). Initial infusion rate should not exceed 15 mL/hour/site. If well-tolerated, rate can be gradually increased to 25 mL/hour/site. Contains no preservative, use immediately after opening, discard unused portion. Do not use if cloudy or contains particulate matter. Based on HIZENTRA[®] Approved Product Information 19 June 2015 (V 3.00).

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References: **1.** HIZENTRA[®] Approved Product Information. Date of last amendment 19 June 2015 (V 3.00). **2.** Anderson D, Caspi A. *Product Profiler*. 2010; 35 (8). **3.** Quevedo TG, et al. Health-related quality of life of patients with primary immunodeficiency switching from intravenous IgG to a new 20% subcutaneous IgG. Poster presented at: Federation of Clinical Immunology Societies; June 24, 2010; Boston. Abstract F39. **4.** Jolles S, Sleasman JW. *Adv Ther* 2011; 28(7): 521-33. **5.** National Blood Authority of Australia. Immunoglobulin product authorisation and management: Subcutaneous Immunoglobulin (SCIg). Available from: <http://www.blood.gov.au/SCIg> Accessed on: 29.06.15

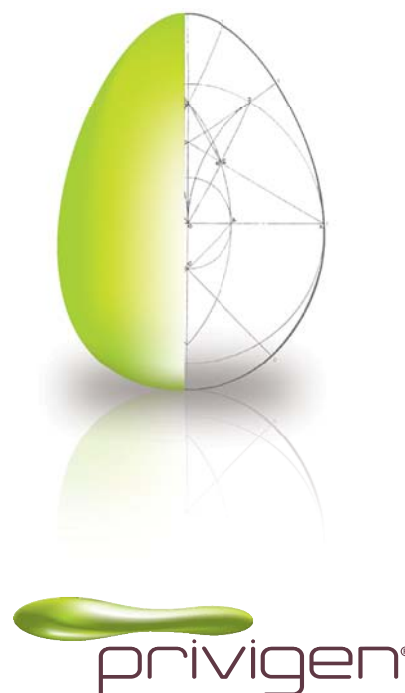
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Minimum Product Information PRIVIGEN[®] (Human Normal Immunoglobulin [Ig] 10% (100g/100mL)), intravenous injection.

Indications: Replacement therapy in primary immunodeficiency diseases (PID), myeloma or chronic lymphocytic leukaemia with severe secondary hypogammaglobulinaemia and recurrent infections, symptomatic hypogammaglobulinaemia secondary to underlying disease or treatment. **Immunomodulatory therapy** in Idiopathic Thrombocytopenic Purpura in patients at high risk of bleeding or prior to surgery to correct the platelet count, Guillain-Barré Syndrome, Kawasaki disease, Chronic Inflammatory Demyelinating Polyneuropathy, Multifocal Motor Neuropathy, Myasthenia Gravis exacerbations, Lambert-Eaton Myasthenic Syndrome, Stiff Person Syndrome. **Contraindications:** Hypersensitivity to the active substance or excipients, hyperprolinaemia, hypersensitivity to homologous immunoglobulins – especially where IgA deficiency with anti-IgA antibodies. **Precautions:** Adequate hydration prior to IVIg infusion. Monitor during and for the first hour after first infusion in patients that a) are naive to human normal Ig, or b) switched from an alternative Ig product, or c) with long interval since previous infusion. All other patients monitor during and at least 20 minutes post infusion. Monitor urine output and serum creatinine levels. Avoid use of loop diuretics. Risk of certain adverse reactions may increase with a) high infusion rate, b) in hypogammaglobulinaemia or agammaglobulinaemia with or without IgA deficiency, c) receiving IVIg for the first time, d) Ig product switch, or when long interval since a previous infusion. Reported cases of hypersensitivity, haemolytic anaemia, aseptic meningitis syndrome, thromboembolism and acute renal failure. **Pregnancy and lactation** immunoglobulin crosses placenta and present in breast milk, no clinical study data, clinical experience suggests no harmful effects. **Pathogen safety** – donor screening and dedicated viral inactivation/removal manufacturing procedures used; possibility of viral transmission cannot, however, be totally excluded. **Interactions:** May affect the response to live attenuated vaccines. May interfere with some serological tests. For all precautions, etc., review approved product information. **Adverse Effects:** Headache, nausea/vomiting, hypertension, back pain, urticaria/rash, chills, fever, fatigue and asthenia, influenza-like illness. For all adverse events review approved product information. **Dosage & Administration:** Dose needs to be individualised for the patient. Replacement therapy: 0.2 to 0.8 g/kg. Immunomodulatory therapy: 0.4 to 2g/kg. Refer to full PI for dosage details. **Privigen should only be administered intravenously.** Recommended initial infusion rate 0.3 mL/kg/hr which if tolerated can be gradually increased to 4.8 mL/kg/hr. Maximum infusion rate administered in PID trials was 7.2mL/kg/hour. **Patients at risk for acute renal failure, or thromboembolic events use minimum rate of infusion and dose practicable.** Infusion rate slowed, or stopped temporarily if adverse event occurs. Contains no preservative, use immediately after opening, discard unused portion. Do not use if cloudy or contains particulate matter. Do not mix other medicinal products in the same infusion line. Based on PRIVIGEN[®] Approved Product Information 30 July 2014 (V 14.00).

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References: 1. PRIVIGEN[®] Approved Product Information. July 2014. 2. National Blood Authority of Australia. Outcomes of Imported Immunoglobulin Tender and Transition Arrangement. Available from: <http://www.blood.gov.au/Ig-tender-outcomes>. Accessed on 29.07.15.



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Xolair® is indicated for adults and adolescents (12 years of age and above) with chronic idiopathic urticaria who remain symptomatic despite H1-antihistamine treatment¹

PBS Information: This product is not listed on the PBS for the treatment of chronic idiopathic urticaria.

See Approved Product Information before prescribing. Approved Product Information available on request.
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XOLAIR® omalizumab (rch). Indication: for the management of adult and adolescent patients with moderate to severe allergic asthma, who are already being treated with inhaled steroids, and who have serum immunoglobulin E levels corresponding to the recommended dose range. ♦ **Chronic Idiopathic Urticaria:** for adults and adolescents (12 years of age and above) with chronic idiopathic urticaria who remain symptomatic despite H1 antihistamine treatment. **Contraindications:** hypersensitivity to omalizumab or any other component of the formulation. **Precautions:** Local or systemic allergic reactions, including anaphylaxis, may occur. In post-marketing experience, anaphylaxis and anaphylactoid reactions have been reported following the first and subsequent administrations of Xolair. Although most of these reactions occurred within 2 hours after Xolair administration, some occurred beyond 2 hours and even beyond 24 hours after injections. Medications for the treatment of anaphylactic reactions should always be available for immediate use following administration of Xolair. Patients should be informed that such reactions are possible and prompt medical attention should be sought if allergic reactions occur. - Serum sickness and serum sickness-like reactions have rarely been seen in patients treated with humanised monoclonal antibodies including omalizumab, typically 1-5 days after administration of the first or subsequent injections. Patients should be advised to report any symptoms suggestive of serum sickness such as arthritis/arthralgia, rash (urticaria or other forms), fever and lymphadenopathy. - Patients with severe asthma may rarely present systemic hypereosinophilic syndrome or allergic eosinophilic granulomatous vasculitis (Churg-Strauss syndrome), both of which are usually treated with systemic corticosteroids. In rare cases, patients on therapy with anti-asthma agents, including omalizumab, may present or develop systemic eosinophilia and vasculitis. A causal association between Xolair and these underlying conditions has not been established. These events are commonly associated with the reduction of oral corticosteroid therapy. In these patients, physicians should be alert to the development of marked eosinophilia, vasculitic rash, worsening pulmonary symptoms, paranasal sinus abnormalities, cardiac complications, and/or neuropathy. Discontinuation of omalizumab should be considered in all severe cases with the above mentioned immune system disorders. - In controlled clinical trials, interim and final analyses of an observational study, a numerical imbalance of ATE was observed. - Patients may potentially develop antibodies to the protein. - Parasitic infestation may also result in elevation of serum IgE concentrations. - No formal drug interaction studies have been performed with Xolair. **Adverse reactions:** pyrexia, injection site reactions including pain, abdominal pain upper, swelling, itching, and redness, pruritus, headaches; nasopharyngitis, upper respiratory tract infection and viral upper respiratory tract infections, sinusitis and sinus headache, arthralgia, myalgia, pain in extremity, musculoskeletal pain, dizziness, somnolence, postural hypotension, weight increase, urticaria, fatigue, swelling arms, nausea, pharyngitis, skin rashes, post-injection phenomena, syncope and vasovagal syncope, diarrhoea, dyspeptic signs and symptoms, flushing, moniliasis, paresthesia, coughing, laryngoedema, angioedema, photosensitivity, asymptomatic platelet decreases, parasitic infections. Serious AEs reported in clinical trials include were appendicitis and fractures. Other serious, but rare, AEs include anti-therapeutic antibody development, anaphylactic reactions and other allergic conditions such as anaphylactic reactions, allergic bronchospasm and serum sickness. **Dosage and administration: Allergic Asthma:** 150 to 375 mg administered subcutaneously every two or four weeks. Doses (mg) and dosing frequency are determined by baseline serum total IgE level (IU/mL), measured before the start of treatment, and bodyweight (kg). Doses greater than 750 mg were not studied in the pivotal clinical studies and are not recommended. See the dose determination chart in the full disclosure approved PI. ♦ **Chronic Idiopathic Urticaria:** 300 mg s.c. every 4 weeks. Some patients may achieve control of their symptoms with a dose of 150 mg s.c. every 4 weeks. Prescribers are advised to periodically reassess the need for continued therapy. Clinical trial experience of long-term treatment beyond 6 months in this indication is limited. Xolair should be used as add-on therapy to H1 antihistamine treatment. **Sponsor:** Novartis Pharmaceuticals Australia Pty. Limited, ABN 18 004 244 160, 54 Waterloo Road, North Ryde, NSW 2113 (xol111114m.doc). **References:** 1. XOLAIR®. TGA-Approved Product Information. Novartis Pharmaceuticals Australia Pty. Limited. 11 November 2014. 2. Maurer M *et al.* *N Eng J Med* 2013; 368: 924-935. ® Registered trademark of Novartis. Novartis Pharmaceuticals Australia Pty Limited ABN 18 004 244 160. 54 Waterloo Road, North Ryde NSW 2113. Ph (02) 9805 3555. July 2015.XCIU0052.CRD2573.

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At Shire, we focus on developing and delivering innovative medicines for patients with rare diseases such as hereditary angioedema (HAE).

We believe in treating each HAE patient as an individual. We provide a range of HAE management solutions which can be tailored to meet individual patient needs.

At Shire, we are working hard to enable HAE patients to lead better lives.



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- 20% of annual turnover is reinvested into Research and Development
- Affiliation and sponsorship of groups who are undertaking research into the causes of allergic rhinitis and allergic asthma
- Research grants ensure allergen immunotherapy is an integral part of today's medical education
- Practicum in Clinical Allergy at University of Melbourne.

Stallergenes offers a comprehensive range of products and services:

Diagnostics:

- An extensive range of diagnostic allergens
- Equipment including various skin prick testing devices.

Treatments:

Allergen immunotherapy:

- subcutaneous injection: the only registered treatment in Australia and New Zealand for specific allergens including temperate grasses and dust mites^{1,2}
- sublingual via drops: across a range of allergens – pollen, house dust mites, epithelia, insect and mould
- sublingual via tablet: the first temperate grass tablet registered in Australia and New Zealand.^{3,4}

Venom immunotherapy:

- the only bee and wasp venom immunotherapy registered and reimbursed in Australia and New Zealand.^{5,6}

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- Our Allergy Nurse Educators can assist with training and continual support for your practice staff on diagnostics, skin prick tests and evaluating results, products and protocols.

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- A range of education to suit your needs: Medical information team, eLearning platforms, educational meetings, congress updates, patient materials.

SOOS - our allergy management portal with practical tools for you and your patients:

- A simple and streamlined online system to support your practice from treatment management to assisting with patient adherence.



References: 1. Australian Government Department of Health. Therapeutic Goods Administration. Search of the Australian Register of Therapeutic Goods (ARTG) "allergen immunotherapy" www.tga.gov.au/australian-register-therapeutic-goods - date searched 29/4/15. 2. Medsafe - New Zealand Medicines and Medical Devices Safety Authority. Search of the Medsafe site for "allergens" www.medsafe.govt.nz/regulatory/DbSearch.asp - date searched 5/6/15. 3. ARTG website - www.tga.gov.au/australian-register-therapeutic-goods search term "grass tablet" - date searched 11/8/15. 4. Medsafe - www.medsafe.govt.nz/regulatory/DbSearch.asp search term "grass tablet" 11/8/15. 5. Search of the ARTG website "venom immunotherapy" www.tga.gov.au/australian-register-therapeutic-goods - date searched 29/4/15. 6. Search of the Medsafe site for "bee venom" and "wasp venom" www.medsafe.govt.nz/regulatory/DbSearch.asp - date searched 5/6/15.

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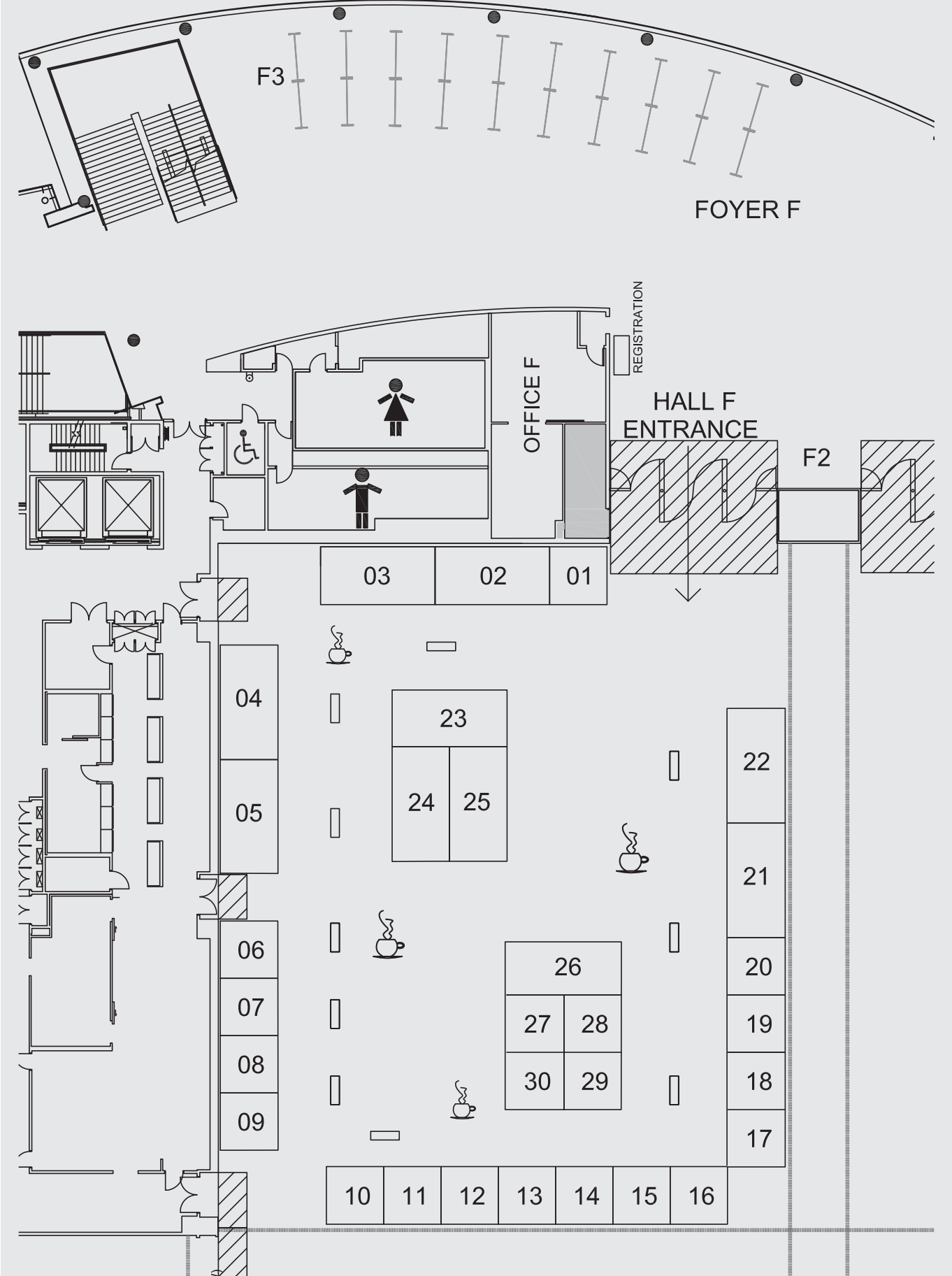
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Abacus ALS will showcase a number of new advances in allergy, asthma and autoimmunity, including new developments in allergy testing. We are also focused on standardisation across sIgE testing in laboratories throughout Australia and New Zealand. The gastrointestinal disease test menu continues to grow on the Phadia® platforms and we are pleased to provide updates on our tests performance in this important area. New tests for the EliA range include a new revised assay for TG and TPO and various complementary tests in the diagnosis of ANA testing.

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The AllergEnd Plus range includes EasyCare fitted sheets, which alleviate the need to wash the full zip up mattress every 8-12 weeks. The EasyCare fitted sheet is designed to go over our zip up mattress covers and under the normal linen fitted sheet. It stops dead skin, house dust mites and allergens from contacting the full zip up cover and when used together the zip up mattress covers only need washing annually. Made from the same barrier fabric as our zip up covers the EasyCare fitted sheet is 100% Oeko-Tex Standard 100 certified chemical free cotton, super breathable and luxurious to sleep on.

ALLERGY & ANAPHYLAXIS AUSTRALIA (A&AA)

www.allergyfacts.org.au



Allergy & Anaphylaxis Australia (A&AA) is a national, non-profit, community support organisation established in 1993 to support and assist those affected by allergy and anaphylaxis. Our aim is to improve the quality of life of those affected by allergy whilst minimising risk to their health and wellbeing. The organisation:

- Advocates for people living with allergies when communicating with government, health and teaching professionals, food industry and the broader community; and
- Strives to raise awareness of allergy in the Australian community and provide evidence-based information, resources and services to support those with allergy and those who live with the risk of anaphylaxis.

Together with ASCIA, Allergy & Anaphylaxis Australia has hosted two Allergy Summits, in August 2014 and 2015, and have developed the first National Allergy Strategy for Australia, in consultation with other stakeholders.

For more information on allergy and anaphylaxis see our website or call 1300 728 000.

ALLERGY NEW ZEALAND

www.allergy.org.nz



Allergy New Zealand is the national patient support organisation in New Zealand. With the support of a Medical Panel (all members of ASCIA) we work to raise awareness, provide evidence-based information and education on all allergies, and support through a national volunteer network to families with children with food allergy. Our quarterly magazine, Allergy Today, is distributed to over 5,000 health professionals. We also represent the interests of the allergic population through submissions and participation in working groups; and are involved in research into the burden of food allergy in New Zealand.

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ausEE Inc. is an Australian charity dedicated to providing support and information to anyone diagnosed with or caring for someone with an Eosinophilic Gastrointestinal Disorder (EGID) including Eosinophilic oEsophagitis (EoE). ausEE is committed to raising public awareness and supporting the medical community for further research into eosinophilic disorders in Australia. We have an active facebook group providing valuable support to adults with EGIDs and parents and caregivers of children diagnosed with an EGID. We offer free patient resources including children's picture books on EoE, EGID medical brochures and patient information folders. For more information, please visit our website.



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Australia: www.amsl.com.au

New Zealand: www.nzms.co.nz

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www.autoimmune.org.au

ARRC was established in 1989, to provide people living with systemic and organ specific autoimmune illnesses education and support services as well as access to research. ARRC services aim to reduce the impact and disease burden of illness by educating patients, carers, family and the general community on autoimmune illness, promoting healthy lifestyles and better self-management choices. Programs are designed to improve overall health, quality of life and life potential whilst maintaining a balance between medical treatments, illness understanding and self-management techniques. ARRC offers a wide range of educational resource materials and education seminars for patients and health professionals.



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www.foodallergyresearch.org.au



The Centre for Food & Allergy Research (CFAR) is a collaboration of Australia's leading experts in paediatric food allergy and food-related immune disorders. CFAR was funded in 2013 as a National Health and Medical Research Council (NHMRC) Centre of Research Excellence. Our Centre includes more than 30 multi-disciplinary collaborators from 20 partner institutions. CFAR's activities aim to help curb the epidemic of childhood food allergy, decrease the public health burden and ensure that children with food allergy are provided with the best care and treatment.

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Our collective world-class research efforts provide evidence to optimise food allergy management and find novel treatments. CFAR collaborates with governments, health bodies and the community to: communicate our research findings; support the development of evidence-based public health policies and clinical practice guidelines; and, promote consistency in the diagnosis and management of allergic conditions. CFAR also plays a pivotal role in training the next generation of paediatric food allergy researchers.

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CSL Behring

CSL Behring is a global leader in biotherapies. We develop and deliver innovative specialty biotherapies (plasma-derived and recombinant), driven by our commitment to help people with serious and rare medical conditions.

CSL Behring is proud to serve as the chosen national plasma fractionator of Australia and New Zealand, delivering each country a world class and broad range of plasma-derived therapies indicated in conditions including a range of immune deficiencies, bleeding disorders, urgent warfarin reversal in patients with acute major bleeding, and to help victims of trauma, shock and burns. In Australia we are pleased to advise forthcoming availability of CSL Behring's global SCIg (Hizentra®) and IVIg (Privigen®) products under the NBA's recently concluded tender arrangements for supply of imported IV and SC immunoglobulins, expanding upon the product range fractionated from Australia's own plasma.

DIAGNOSTIC SOLUTIONS

www.diagnosticsolutions.com.au



Diagnostic Solutions is a leading distributor of high quality, innovative automated systems for autoimmune diagnostic testing across Australia and New Zealand. The Image Navigator® from Immuno Concepts is the most advanced automated IFA system today. With true sample traceability, fast positive / negative screening combined with interfacing to the CARIS™/DSR™ Systems using the DEESSE software the system can provide workflow streamlining capability for your laboratory. Australia: 1300 788 003 New Zealand: 0800 448 018

EGO PHARMACEUTICALS

www.egopharm.com



Ego Pharmaceuticals is an Australian family owned and operated company.

For more than 50 years we have specialised in manufacturing quality skincare products such as market leaders 'QV', 'Sunsense', 'Pinetarsol', 'DermAid' and 'Moov'.

The QV range of gentle moisturisers and cleansers has been scientifically formulated for those who suffer from dry or sensitive skin conditions. The entire QV range is free from colour, fragrance,

propylene glycol, lanolin and its derivatives, making it ideal for the most sensitive skin types.

ENT TECHNOLOGIES

www.enttech.com.au



ENT Technologies Pty Ltd is a wholly Australian owned business which specialises in the formulation, development and delivery of novel pharmaceutical preparations for the management of both acute and chronic pathologies of both nasal and sinus cavities. ENT Technologies has pioneered the introduction of FLO – a range of sterile, preservative-free multidose nasal sprays in Australia. It was also first to formulate sinus irrigations with Ringers solution (FLO Sinus Care) rather than just salt and sodium bicarbonate and to further develop this preservative free technology into a very low ionic strength irrigation solution which would not interfere with innate immunity in the paranasal sinuses.

ENT Technologies welcomes discussion with surgeons and clinical immunologists who have unique requirements for their patients. If we can help, we will.

ESL Biosciences

www.eslbioscience.com



ESL Biosciences supplies high quality, automated in-vitro diagnostic instruments and reagents and provides full training in their use throughout Australasia. With over 25 years of experience in the niche field of autoimmunity we offer a comprehensive range of products from Euroimmun, a world- leader in autoimmune diagnostics. Assays include (but are not limited to) those for Rheumatology, Autoimmune Hepatitis, PBC and Vasculitis. Others include test kits for the determination of Gluten sensitivity, antibody test kits for Autoimmune Mediated Diabetes markers and Autoantibodies in Paraneoplastic Neurological Syndromes (PNS).

ESL Biosciences also presents a range of automated systems to the laboratory.

GRIFOLS

www.grifols.com



Grifols is a global healthcare company whose mission is to improve the health and wellbeing of people around the world. We accomplish this mission by producing life-saving protein therapies for patients and by providing hospitals, pharmacies and healthcare professionals with the tools they need to deliver expert medical care.

We have three primary divisions – Bioscience, Diagnostic and Hospital – which develop, produce and market our innovative products and services to medical professionals in more than 90 countries around the world

GSK

www.gsk.com.au

GlaxoSmithKline is a global research-based pharmaceutical and healthcare company with a mission to improve the quality of human life by enabling people to do more, feel better and live longer. In Australia we have improved people's wellbeing by delivering the highest quality medicines, vaccines and over-the-counter healthcare products since 1886. We provide about 1700 skilled jobs across the country, working with researchers and doctors to discover new ways of treating and preventing disease. In 2012 we invested \$54 million in local research and development, and supplied \$521 million to Australia's pharmaceutical and medicinal exports.



HAE AUSTRALASIA

www.haeaustralasia.org.au

HAE Australasia Ltd is a not for profit organisation, founded by HAE patients and caregivers and is dedicated to improving the quality of life of those living with Hereditary Angioedema (HAE) in Australia and New Zealand.



HAE Australasia provides education to patients, carers and health care providers, raises the awareness of HAE in the medical and general communities and assists research organisations with their studies into causes, prevention and treatment of HAE.

HAE Australasia is also looking at ways to make treatment and medications more accessible for patients across Australia and New Zealand.

IDFA

www.idfa.org.au

Immune Deficiencies Foundation of Australia (IDFA) is the patient organisation for people affected by Primary Immune Deficiencies in Australia. IDFA provides education, information, advocacy, communication and support to members. IDFA is governed by a Board of Directors which includes two leading Australian Immunologists (Paediatric and Adult). IDFA is a member of IPOPI (International Patient Organisation for Primary Immunodeficiencies) and has representation on the IPOPI Board. IDFA welcomes membership from Immunologists and other Health Professionals.

For further information, email christine.jeffery@idfa.org.au, call 0409 945 114 or visit our website.



IDFNZ

www.idfnz.org.nz

Immune Deficiencies Foundation of New Zealand (IDFNZ) is a registered charity which has served patients of all ages with diagnosed Primary Immune Deficiency (PID) disorders since 1989. IDFNZ offers individual patient support, education, advocacy and information. IDFNZ also sponsors medical and scientific research, and promotes awareness of PID to the general public and health professionals including visiting speaker and awareness programmes. IDFNZ is governed by a volunteer Board which includes representatives from our medical advisory panel, comprising of leading medical professionals specialising in PID disorders. IDFNZ is a foundation member of the International Patient Organisation for Primary Immune Deficiencies (IPOPI).



MEDA

www.meda.com.au

MEDA AB is a leading international specialty pharmaceutical company. Our products are sold in 120 countries worldwide and the company is represented by its own organizations in 60 countries.

With Australian headquarters in Sydney, MEDA is a fast growing global pharmaceutical company with an exciting portfolio of products in niche markets. Our company culture embraces innovation and creativity. We celebrate new ideas and getting things done. We are committed to quality products and happy customers. The MEDA share is listed under Large Cap on the Nasdaq OMX Nordic Stock Exchange in Stockholm. Find out more, visit our website.



MENARINI AUSTRALIA

www.menarini.com.au

A member of the Menarini Group, a leading European biopharmaceutical company, Menarini Australia is focused on delivering differentiated ethical and consumer healthcare brands to Australians. With an extensive brand portfolio, Menarini Australia markets a wide range of pharmaceutical, biotechnology and consumer health brands. Building on our strengths in dermatology, primary care, consumer health and specialty care, Menarini Australia also has products in men's sexual health, inborn errors of metabolism, cardiovascular, respiratory, and rheumatology therapeutic areas. For further information please visit our website.



NATIONAL ASTHMA COUNCIL

www.nationalasthma.org.au

The National Asthma Council Australia is a not-for-profit organisation working to improve health outcomes and quality of life for people with asthma. Launched in 1990, the Council was formed to



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lead a national effort to combat the alarming number of deaths from asthma in the 1980s. Since our formation, this figure has fallen dramatically with improved management of asthma by health professionals and patients and their carers. Although asthma remains a serious problem in Australia, we continue to rise to the challenge.

NATIONAL BLOOD AUTHORITY

www.blood.gov.au



The National Blood Authority (NBA) is responsible for providing an adequate, safe, secure and affordable supply of blood and blood products and promotes safe, high quality management and use of these products.

Visit the NBA website for up to date information, tools and material on patient blood management, product and inventory management, wastage reduction, immunoglobulin products and much more.

NEILMED PHARMACEUTICALS

www.neilmed.com



NeilMed Pharmaceuticals manufacture allergy and sinus relief products that are highly effective for rhinosinusitis, allergies, and most beneficial for post FESS patients. NeilMed's Sinus Rinse[®] Kit is a soothing saline nasal irrigation system with 60 packets of preservative free, isotonic, pH balanced mixture, irrigation bottle and custom designed cap. NeilMed's NasaFlo[®] is a free flowing gravity method to nasal irrigation. NeilMed's NasoGel[®] is a soothing saline gel for prolonged moisturization of dry nasal passages. NeilMed's NasaMist[®] is a buffered, preservative free nasal spray, isotonic and hypertonic available. NasaDrops, Ampoules with Aspirators, Saline ampoules for stuffy, congested or dry noses for babies, children and adults. Tel: 1300 652 148

NESTLÉ

www.nestle-hcp.com.au

www.nestlehealthscience.com.au



Nestlé is the world's leading Nutrition, Health and Wellness company. Through integrating scientific and research expertise, Nestlé Nutrition aims to pioneer the development and application of evolving science to help infants and children develop to their full potential plus create a new role for nutrition in disease prevention and management. Together Nestlé Health Science and Nestlé Infant Nutrition offer high quality nutrition products for the crucial first years of life & nutritional solutions for people with specific dietary needs related to illnesses, disease states or the special challenges of different life stages. As a long-time supporter of ASCIA please come and visit us during this year's meeting to find out more about our product range.

NICHE MEDICAL

www.nichemedical.com.au



We are a progressive Australian owned Company with decades of experience in the medical industry. We strive to achieve long and happy relationships with our Customers. The Niche Medical team specialises in the supply and support of market leading products to the Australian Healthcare Industry. We actively support our customers to further their knowledge to improve patient care.

Our primary field of expertise is Respiratory Medicine and we will be displaying the following products at ASCIA 2015:

- NIOX VERO Airway Inflammation Monitor (Fractional Exhaled Nitric Oxide)
- EasyOne Spirometry and EasyOne Pro Pulmonary Function Testing

NOVARTIS

www.novartis.com.au



Novartis is helping Australians live healthier lives. Our medicines focus on critical disease areas including cardiovascular and metabolic diseases, ophthalmology, neuroscience, respiratory diseases and oncology. Novartis' history in Australia goes back over 50 years. We are committed to research and development and since 2007 Novartis has invested 20% of its net pharmaceutical sales globally in R&D - in Australia we invest around \$AUD 30 million annually.

NUTRICIA ADVANCED MEDICAL NUTRITION DANONE NUTRICIA EARLY LIFE NUTRITION

www.neocate.com.au

www.danonenutricia.com.au



Nutricia leads the way through years of experience in providing a comprehensive portfolio for Advanced Allergy Management. Our products are scientifically researched for protection from and management of cows' milk protein allergy. We look forward to discussing with you how Nutricia's expertise and comprehensive allergy portfolio can assist you. By offering an unmatched superior nutritional profile, Nutricia can help you make a difference to the lives of the infants, children and mothers you care for along their allergy journey.

OCTAPHARMA

www.octapharma.com.au



Octapharma specialises in the development and production of human proteins derived from plasma and recombinant technologies. Using cutting-edge purification and viral inactivation techniques we live by our mission of "for the safe and optimal use of human proteins." We

provide life saving therapies to our patients in the treatment of multifarious diseases in Haematology, Immunotherapy, Intensive Care and Emergency Medicine. Octapharma operates and manufactures products to the highest standards of quality and safety required by physicians, patients and regulatory authorities globally. For more information visit our website.

PULMOMED

www.pulmomed.com.au

Technipro-PulmoMed is an Australian company marketing medical devices and pharmaceuticals for comprehensive management of cystic fibrosis, bronchiectasis and other chronic respiratory diseases, as well as for pancreatic insufficiency.

We represent the German company Pari, specialists in aerosol medication delivery for upper &/ or lower airways. Other brands in our portfolio include Spiro PD (the world's first personal spirometer) Panzytrat and VitABDECK as well as Pari Sinus, Pari PEP & Pari ,O' PeP . Visit our website for more information.



ROCHE

www.roche-australia.com

Headquartered in Basel, Switzerland, Roche is a leader in research-focused healthcare with combined strengths in pharmaceuticals and diagnostics.

Roche is the world's largest biotech company, with truly differentiated medicines in oncology, immunology, infectious diseases, ophthalmology and neuroscience. Roche is also the world leader in in vitro diagnostics and tissue-based cancer diagnostics, and a frontrunner in diabetes management.

Roche's personalised healthcare strategy aims at providing medicines and diagnostics that enable tangible improvements in the health, quality of life and survival of patients. Founded in 1896, Roche has been making important contributions to global health for more than a century.



SHIRE AUSTRALIA

www.shireaustralia.com.au

As one of the world's leading specialty biopharmaceutical companies, Shire's purpose is to enable people with life-altering conditions to lead better lives. Shire's Rare Diseases Business Unit focuses on innovating, developing and providing treatments that enhance the quality of life of patients suffering from rare diseases. Established in 2008, Shire Australia offers products in Fabry and Gaucher Diseases and Hereditary Angioedema. Shire also provides products in the areas of Hyperphosphataemia in Chronic Renal Disease, Essential



Thrombocythaemia, mild to moderate active Ulcerative Colitis and Attention Deficit Hyperactivity Disorder.

STALLERGENES

www.stallergenes.com

For over half a century

Stallergenes has been a leader

and pioneer in allergen immunotherapy. With a strong commitment to research and development, Stallergenes dedicates close to 20% of its turnover each year to the development of innovative and evidence-based treatments.

Locally, Stallergenes Australia is dedicated to partnering with the Australasian allergist community to address the unmet need of patients suffering from moderate to severe allergic respiratory disease. Our investments are oriented to this cause and are seen through consistent support and grants we provide, along with delivering the only TGA and Medsafe registered allergen immunotherapy treatments in Australia and New Zealand.



THE AUSTRALASIAN MASTOCYTOSIS SOCIETY (TAMS)

www.mastocytosis.com.au

TAMS was formed in 2011 and is working to:

- Provide a network of support for patients living with Mastocytosis or a Mast Cell Activation Disorder (MCAD) and their carers
- Connect patients to medical practitioners and specialists with knowledge of Mastocytosis and MCAD
- Link together with similar associations worldwide to collectively gather research data, share resources and knowledge in the hope of greater understanding, treatment practices, medications and overall improved health outcomes for those living with Mastocytosis or MCAD.



WERFEN

www.werfen.com

We are leaders in the development of new autoimmune technologies and

diagnostic markers. We manufacture IVD systems and reagents that are used in clinical laboratories and hospitals around the world. For more than 25 years, Inova Diagnostics has collaborated with clinical researchers to develop biomarkers that help advance the care of autoimmune disease patients. We are redefining autoimmunity to deliver solutions that anticipate the needs of laboratories and improve the efficiency and quality of testing.

Inova Diagnostics is part of Werfen, a global leader in IVD with a long term commitment to providing high quality, innovative solutions for hospitals and clinical laboratories to enhance patient care. Werfen companies include Inova Diagnostics, Instrumentation Laboratory, Biokit and Systelab.



ASCIA 2016 CONFERENCE

27th Annual Conference of the Australasian
Society of Clinical Immunology and Allergy

GOLD COAST CONVENTION CENTRE QUEENSLAND, AUSTRALIA

14-17 SEPTEMBER 2016

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ASCIA is the peak professional body for clinical immunology and allergy in Australia and New Zealand

Registration and abstract submission will open in April 2016

For any inquiries email education@allergy.org.au

www.ascia2016.com

26 years of ASCIA Annual Conferences 1990-2015



1990	Melbourne VIC (Hilton on the Park, April 29 - May 1)
1991	Perth, WA (Burswood Hotel, December 1-3)
1992	Cairns, QLD (Hilton Hotel, September 13-15)
1993	Sydney, NSW (Darling Harbour, April 29 - May 1)
1994	Canberra, ACT (Lakeside Hotel, December 2-5)
1995	Sydney, NSW (Regent Hotel, October 30-November 3) held with TPAIS
1996	Adelaide, SA (Hyatt Hotel, December 5-7)
1997	Wellington, NZ (Convention Centre, April 5-8) held with TSANZ
1998	Brisbane, QLD (Sheraton Hotel, August 28-30)
1999	Uluru, NT (Ayers Rock Resort, September 24-27)
2000	Sydney, NSW (Convention Centre, October 15-20) (held as part of the 17th World Allergy Congress)
2001	Perth, WA (Sheraton Hotel, September 28-30)
2002	Adelaide, SA (Hilton Hotel, September 27-29)
2003	Melbourne, VIC (Sheraton Southgate Hotel, September 10-12)
2004	Gold Coast, QLD (Marriott Hotel, September 8-10)
2005	Queenstown, NZ (Millennium Hotel, August 31 - September 2)
2006	Sydney, NSW (Manly Pacific Hotel, September 7-9)
2007	Fremantle, WA (Esplanade Hotel, November 14-16)
2008	Melbourne, VIC (Park Hyatt Hotel, November 12-14)
2009	Adelaide, SA (Adelaide Convention Centre, September 16-18)
2010	Gold Coast, QLD (Gold Coast Convention & Exhibition Centre, September 1-4)
2011	Sydney, NSW (Sydney Convention & Exhibition Centre, Darling Harbour, September 6-10)
2012	Wellington, NZ (Wellington Town Hall, September 5-8)
2013	Perth, WA (Perth Convention and Exhibition Centre, September 10-14)
2014	Melbourne, VIC (Melbourne Convention Centre, September 10-13)
2015	Adelaide, SA (Adelaide Convention Centre, September 8-12)

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