

POSTER PRESENTATION

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Grass pollen nasal challenge is associated with increases in Th2 cytokines, Eotaxin, MDC and IL-6 in nasal fluid

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Background

We previously validated a grass pollen nasal challenge model to record clinical outcomes and local biomarkers in nasal fluid [1]. Here we further validate our methods and compare the expression of Th2- and Th1-related cytokines, chemokines and IL-17.

Methods

18 grass pollen allergics underwent nasal allergen challenges; 15 grass allergics had matched diluent challenges. Symptom scores and peak nasal inspiratory flow were recorded; nasal fluid was collected using polyurethane sponges, then extracted by centrifugation across microfilters. Fluid was then tested for Th2 cytokines by Mesoscale 7-plex multi-spot plate assay. A further 6 allergics underwent nasal allergen challenges with collection of fluid using both polyurethane sponges and Leukosorb filter strips; nasal fluid was analysed by Milliplex cytokine/chemokine magnetic bead multiplex assay.

Results

Allergen vs diluent challenges; multi-spot plate assay: symptoms increased, and peak nasal flow decreased, following allergen but not diluent challenge (both p<0.001, between groups difference). Levels of IL-4 (p<0.01), IL-5 and IL-13 (both P<0.001) were maximally increased at 5 hours compared to pre-challenge; no significant increases were seen following diluent challenge. Between group differences (allergen vs diluent) for IL-4, -5 and -13 were seen at 4 and 6 hours (all p<0.01). Allergen challenge; magnetic bead assay: IL-5 was increased at

6 hours (p=0.03 vs pre-challenge), with IL-13 and IL-4 also showing a trend towards an increase (both p=0.06 vs pre-challenge). Eotaxin and MDC were increased at 6 hours (both p=0.03 vs pre-challenge); IL-6 was elevated at 2 hours (p=0.03 vs pre-challenge). Levels of IL-17A, IL-27, IL-23, IFN-gamma and IL-12p70 were low and did not change significantly after allergen challenge. High levels of IL-8 were detected, maximal at baseline, but did not change significantly after challenge. Polyurethane sponges proved superior to filters for all measurements.

Conclusions

Grass pollen nasal challenge is associated with a strong local Th2, but not Th1, response detectable in nasal secretions. Despite elevation of IL-6, there is no significant local Th17 response, up to 6 hours. Responses are allergendriven and independent of the intervention and any diurnal variation. Multiplex assays are capable of detecting cytokines and chemokines in low volumes (25mcl) of nasal fluid by both multi-spot and micro-bead techniques.

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