¿WHICH IS CURRENTLY THE MOST IMPORTANT MONTH FOR POLLINOSIS IN MADRID?



Javier Subiza, MD†, Enrique Fernández-Caldas, PhD††, Concha Barjau, MD†, Vanessa Rodríguez, MD†, Pilar González, MD†, and Jonathan Kilimajer, MD†

† Subiza Asthma and Allergy Centre, Madrid, Spain †† Immunotek SL, Madrid, Spain

Objectives

Traditionally, May and June are considered the most important months for pollinosis in Madrid. However, climatic changes and changes in vegetation (increased planting of *Cupressus*, and *Platanus* trees), pollution (an increase in diesel vehicles) and in the incidence of atopy, lead us to question whether this is still true

Materials and Methods

Six hundred and forty-six patients from an outpatient clinic, diagnosed with pollinosis, and resident in Madrid, were selected at random. Their pollinosis symptoms were monitored during four consecutive years (from 1st January 2009 to 31st December 2012), using an electronic diary card to record daily symptoms, which we developed to be used in their computers and/or mobile devices connected to our clinic monitoring system (Allercon)

Results

The study was completed by 96 patients and the rest were excluded due to poor compliance and/or a change of residence away from the urban environment of Madrid.

Their positive skin prick tests are shown in Table I.

The symptomatology can be seen in the figures and is expressed as the mean of the percentage of monthly reactivations of rhinoconjunctivitis (Fig. 1) and in daily symptoms, for 2012 only (Fig. 2).

Symptoms were reported all year round. Although May continues to be the most important month, globally speaking, March is higher than June and February is higher than April. (Fig. 1).

However, in 2012, February was the most intense regarding symptoms (Fig. 2).

Table IPresence of skinprick test positivity

Alnus glutinosa	22%
Artemisia absinthium	30%
Betula alba	19%
Castanea sativa	23%
Chenopodium album	34%
Corylus avellana	23%
Cupressus arizonica	49%
Cupressus sempervirens	37%
Cynodon dactylon	69%
D. pteronissynus	8%
Dactylis glomerata	84%
Epitelio gato	10%
Fraxinus excelsior	53%
Juniperus oxycedrus	46%
Morus alba	30%
Olea europaea	57%
Parietaria judaica	19%
Pinus silvestris	6%
Plantago lanceolata	33%
Platanus hispanica	36%
Populus alba	28%
Quercus ilex	25%
Rumex acetosella	17%
Salsola kali	29%
Trisetum paniceum	81%
Ulmus minor	15%

% of monthly reactivations of rhinoconjunctivitis



Fig. 2 Daily mean values of the Cupressaceae, *Platanus* and Poaceae pollen and the mean rhinitis-asthma symptoms scores observed by 96 pollinosis patients on their diary cards

Conclusions

These data indicate the growing importance of pollinosis during the winter months and at the beginning of Spring