Innovation from cell to society


AllerGen

Networks of Centres of Excellence of Canada | Réseaux de centres d'excellence du Canada
AllerGen NCE Inc. is hosted at McMaster University, Hamilton, Ontario, Canada.

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Networks of Centres of Excellence is a joint program of the Natural Sciences and Engineering Research Council (NSERC), the Social Sciences and Humanities Research Council (SSHRC), the Canadian Institutes of Health Research (CIHR) and Industry Canada.

Created in 1989, the NCE Program currently supports four national initiatives: Networks of Centres of Excellence (NCE); Centres of Excellence for Commercialization and Research (CECR); Business-Led Networks of Centres of Excellence (BL-NCE); and the Industrial Research and Development Internship Program (IRDI).

**AllerGen NCE Inc.**

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Corporate Profile

**AllerGen NCE Inc. was established in response to the fact that one in three Canadians** is living with allergic disease. In addition, there is a dearth of research on the causes of and cures for allergy, asthma and related immune diseases. Since its inception in 2004, AllerGen has fostered a national network comprising leading Canadian allergy, asthma and immune diseases experts who are working in trans-disciplinary and multi-sectoral teams with national and international collaborators, as well as stakeholder and research partner organizations. These teams are addressing gaps in knowledge and seizing new opportunities in diagnostics, therapeutics, health care, public health, ethics, policy and patient education. They are also training the next generation of researchers, innovators and clinician-scientists, while collaboratively working to reduce the morbidity, mortality and socio-economic impacts of allergy, asthma and anaphylaxis.

**AllerGen-funded research aims** to accelerate the development of new diagnostic tests, better medications, accessible patient education tools and more effective public policies. AllerGen’s investments in education and training are expanding public education, improving allergy, asthma and anaphylaxis management, and increasing the number of medical professionals researching and practicing in these areas.

AllerGen NCE Inc. (AllerGen), the Allergy, Genes and Environment Network, is a national research network funded by Industry Canada through the Networks of Centres of Excellence (NCE) Program. AllerGen supports excellence in research and fosters commercialization, social innovation and knowledge mobilization that will enable Canadians to better prevent, treat and manage allergy, asthma, anaphylaxis and related immune diseases.

Through the creation of a national network of allergy and immune disease experts, AllerGen brings together 190 Network investigators and collaborators and 446 students and young professionals, research associates and technicians, who together represent the equivalent of 232 full-time network research staff. In addition, over the last year, AllerGen worked closely with 180 partners from across sectors, including academe, industry and government, on 24 research projects and eight strategic initiatives.

**AllerGen’s Vision**
To create an enduring network of allergy and immune disease experts whose discovery and development efforts contribute to reductions in the impact of allergic and related immune diseases nationally and globally.

**AllerGen’s Mission**
To catalyze and support discovery, development, networking, capacity building, commercialization and knowledge translation that contribute to reducing the morbidity, mortality and socio-economic burden of allergic and related immune diseases.
The past year marked a significant milestone in AllerGen’s activities as a Network of Centres of Excellence. Following 18 months of national stakeholder consultation, development of detailed reports on Network-wide progress and extensive strategic and operational planning, on March 23, 2012, at McMaster University, the Honourable Gary Goodyear officially announced AllerGen’s successful renewal to 2019. Minister Goodyear confirmed AllerGen’s receipt of $36.5 million over the next seven years to continue its work. This announcement brings AllerGen’s total NCE funding since 2005 to $73.83 million.

AllerGen’s 2012-2019 Strategic Plan was developed collaboratively with Network partners across sectors from coast to coast following intensive consultations. Regional meetings included representatives from industry, government, community and patient advocacy groups, clinicians and researchers. At these meetings, AllerGen invited partners to identify research gaps and share strategic priorities for the next seven years, opportunities for collaboration that would address partner needs, and gaps that could not be met by the respective organizations working alone. A large part of AllerGen’s success is attributable to its networked way of working.

The research, capacity building, commercialization and knowledge mobilization initiatives proposed in AllerGen’s Strategic Plan to 2019 were complemented by a compendium of 110 individual
letters of support detailing commitments in excess of $45.3 million in cash and in-kind support. This represents a 1:1.24 leveraging by AllerGen of its NCE funding award.

Over the past year, AllerGen has deepened existing international research relationships and increased the global capacity building opportunities it has developed for Network trainees. AllerGen signed four Memoranda of Understanding related to new capacity building opportunities with The Karolinska Institute in Sweden, The University of Newcastle in Australia, The Allergie-Centrum-Charité at Charité – Universitätsmedizin Berlin (Germany) and the Munich Allergy Research Center (MARC) – Technische Universität München (TUM) and Helmholtz-Zentrum München (Germany). These four collaborations are the basis of developing and launching AllerGen’s new International Trainee Research Visits Program.

AllerGen trainees are Canada’s future leaders in allergy, asthma, and gene-environment research. Since 2005, AllerGen has enhanced the capacity of over 700 individuals through Network participation. Graduates have gone on to work in academe, industry, the not-for-profit sector, and government.

Other AllerGen research highlights over the past year include the CHILD Study team’s achievement of its recruitment goal of 3,500 pregnant mothers. This milestone means that there are now more than 10,000 participants involved in the study, including babies-to-be, mothers and fathers. Home visits at three months of age have been completed with more than 2,000 families. In addition, a variety of biological samples have been collected and more than 1,000 babies have participated in the one-year visit when skin allergy tests are performed and a full health review is undertaken.

AllerGen’s Allergic Asthma Clinical Investigator Collaborative (CIC) expanded into Sweden last year, completing its first international clinical trial with Genentech at the Karolinska Institute in Stockholm. The CIC is also in the process of expanding its clinical trials into studies focused on Severe Asthma (SA-CIC) and Allergic Rhinitis (AR-CIC).

The Canadian Group on Food Allergy Research (CanGoFAR) has continued to build on two previous AllerGen-funded studies that aim to determine food allergy prevalence amongst Canadians. Surveys were administered to Canadians of varied backgrounds including vulnerable populations, individuals of lower socio-economic status, Aboriginals and new immigrants. Over the past year, this team has been synthesizing the survey results and will soon be ready to provide a first-ever Canadian perspective on food allergy prevalence.

This year’s annual report is a particular tribute to the accomplishments of AllerGen investigators, trainees, research collaborators and partners. Since 2005, AllerGen investigators have produced 1,391 publications. Of those, 397 were peer reviewed, 168 were non-refereed, 476 were specialized publications and 350 were scientific posters.
AllerGen’s success is a reflection of the commitment of its entire network of researchers, trainees, national and global collaborators, stakeholder and patient organizations, research partners, government, and healthcare providers. We thank them for their continuing support.

This year’s annual report is a particular tribute to the accomplishments of AllerGen investigators, trainees, research collaborators and partners. Since 2005, AllerGen investigators have produced 1,391 publications.

We would like to thank AllerGen’s Board of Directors, Research Management Committee and our many advisory committee members for their ongoing contributions of time and expertise, especially given the additional demands over the past year necessitated by the requirements of the NCE renewal process.

A Network is but the collective reflection of the many dedicated individuals who contribute to its success. We would also like to recognize the outstanding contributions of several retiring members of AllerGen’s Board of Directors: Dr. Zave Chad, MD, Allergist and Clinical Immunologist and Associate Professor, University of Ottawa; Dr. Tom Hudson, MD, President and Scientific Director, Ontario Institute for Cancer Research; and, Dr. Kelly McNagny, PhD, Professor, Department of Medical Genetics Hematopoietic Cell Development at the University of British Columbia.

Also retiring from several roles is AllerGen trainee, Jennifer Protudjer, PhD. Dr. Protudjer is the past President (to February 2012) of the AllerGen Students and New Professionals Network (ASNPN), was an ex-officio member of the Board of Directors, and a member of AllerGen’s Advanced Education and Training Opportunities Advisory Committee (AETOAC). She played a major role in AllerGen’s renewal efforts, providing outstanding representation on behalf of AllerGen’s trainees and Network graduates during the evaluation process.

We would also like to thank the outgoing ASNPN executive members who served from 2009 to 2012, and who provided invaluable support to AllerGen’s successful renewal bid.

Finally, we would like to thank the NCE directorate and members of the NCE Steering Committee for the opportunity to pursue our vision through to completion in 2019. Looking ahead, we see a future replete with new challenges, new opportunities, new collaborations and new knowledge underpinning the development of innovative tools, technologies, policies and programs that will collectively reduce the burden of disease for Canadians living with allergies, asthma and anaphylaxis.

Mr. Graham W.S. Scott, C.M., Q.C
Chair, AllerGen Board of Directors, AllerGen NCE Inc.

Dr. Judah Denburg, MD, FRCP(C)
Scientific Director and CEO, AllerGen NCE Inc.
In August 2011, following a rigorous 18 month planning process, AllerGen submitted a written application consisting of a Progress Report documenting the first seven years of the Network’s achievements and impacts, a Strategic Plan outlining strategic priorities for the next seven years of focus, and Letters of Support from 110 partner and stakeholder organizations.
AllerGen’s Scientific Director, Dr. Judah Denburg, noted that “over the next seven years, AllerGen aims to focus on commercialization and knowledge mobilization activities and will remain dedicated to ongoing investments in training the next generation of allergists and clinical immunologists that will increase access to services for Canadians living with allergies, asthma and anaphylaxis.”

New Strategic Plan Garners NCE Funding Approval, 2012-2019

Fiscal 2011-2012 was the final year of the first cycle of AllerGen’s research development, knowledge translation and capacity building programs. Three integrated research programs – Gene-Environment Interactions; Diagnostics and Therapeutics; and Public Health, Ethics, Policy and Society – provided the conceptual framework around which the Network was built.

The 2012 NCE Funding Renewal Competition consisted of two parts: a written application and an in-person full-day presentation to an NCE International Expert Panel. In August 2011, following a rigorous 18 month planning process, AllerGen submitted a written application consisting of a Progress Report documenting the first seven years of the Network’s achievements and impacts, a Strategic Plan outlining strategic priorities for the next seven years of focus, and letters of support from 110 partner and stakeholder organizations. Highlights of this application were presented on September 20, 2011 to an NCE International Expert Panel. This panel documented the strengths and weaknesses of the Network’s application in a report to the NCE Standing Selection Committee, which in turn provided recommendations to the NCE Steering Committee for a final decision.

In preparing the NCE application, AllerGen convened numerous meetings with program leaders, researchers, partner organizations, stakeholders, and commercialization experts to identify strategic priorities that would guide Network investments over the next seven years. This process provided AllerGen with valuable feedback that led to the convergence of Network research expertise into integrated Legacy Projects and Enabling Platforms.

Legacy Projects 2012-2019:

• The Canadian Healthy Infant Longitudinal Development (CHILD) Study, led by Dr. Malcolm Sears, Professor, Department of Medicine, McMaster University; and
• The Clinical Investigator Collaborative (CIC), led by Dr. Paul O’Byrne, Professor and Chair, Department of Medicine, McMaster University; and
• The Canadian Food Allergy Strategic Team (CanFAST), led by Dr. Jean Marshall, Professor and Head, Microbiology and Immunology, Dalhousie University and Dr. Ann Clarke, Professor, Department of Medicine, McGill University.
Enabling Platforms 2012-2019:

- **Gene-Environment Interactions**, led by Dr. Andrew Sandford, Associate Professor, Department of Medicine, University of British Columbia and Dr. Jeffrey Brook, Senior Scientist, Air Quality Research Branch for Environment Canada;
- **Biomarkers and Bioinformatics**, led by Dr. Dean Befus, Professor, Department of Medicine, University of Alberta and Dr. Kelly McNagny, Professor, Department of Medical Genetics, University of British Columbia; and
- **Patients, Policy and Public Health**, led by Dr. Susan Elliott, Professor and Dean, Faculty of Applied Health Sciences, University of Waterloo and Dr. Ann Clarke, Professor, Department of Medicine, McGill University.

On March 23, 2012, the Honourable Gary Goodyear, Minister of State for Science and Technology, announced that AllerGen would receive $36.5 million over seven years to continue its work. Minister Goodyear noted that “this investment will support the application and development of world-class excellence in the knowledge and people necessary to provide relief to the millions of Canadians suffering from the complications of allergic diseases.”

The Minister went on to say that “the Government of Canada is committed to improving the lives of all Canadians. While we believe that prevention and health care promotion will help keep health costs down and improve our quality of life, we also understand that investing in science and technology will not only achieve these objectives, but will also contribute to economic growth.”

AllerGen’s Scientific Director, Dr. Judah Denburg, noted that “over the next seven years, AllerGen aims to focus on commercialization and knowledge mobilization activities and will remain dedicated to ongoing investments in training the next generation of allergists and clinical immunologists that will increase access to services for Canadians living with allergies, asthma and anaphylaxis.”
The CHILD Study Achieves Recruitment Targets

Over the last three decades, reported allergy and asthma in children has more than doubled. The risk of developing asthma is highest in children. One in three children develops breathing difficulties (wheezing) in the first few years of life and 20% of all children are diagnosed with asthma before the age of 12. One in three Canadians will be diagnosed with asthma over their lifetime, sharing the same risk level with diabetes, cancer and heart disease.

The Canadian Healthy Infant Longitudinal Development (CHILD) Study, led by Dr. Malcolm Sears at McMaster University, is the largest multidisciplinary, longitudinal, population-based birth cohort study in Canada and is designed to be one of the most informative studies of its kind in the world. This cohort recruits pregnant women at centres in Vancouver, Edmonton, Winnipeg and Toronto and follows their children for six years, from pre-birth to five years of age. Infants are being studied at birth, three months, one, three and five years of age.

Study researchers are creating comprehensive biological, psychological, genetic and environmental profiles of the parents and children participating in the study. This will enable researchers to track the development of asthma, allergies and other environmentally triggered diseases across a large group of individuals. The CHILD Study will test multiple hypotheses within the theme that genetic and immunological factors, together with specific environmental exposures, lead to the development of allergic responses.

Over the past year, the CHILD Study has demonstrated that it is a catalyst of innovative approaches that will accelerate the identification of biomarkers and new therapeutic targets for predicting and monitoring disease. This unique platform will produce results that inform the development of new ways of diagnosing and treating diseases across a wide range of health issues, and engage multiple generations of Canadian researchers.

The multi-sectoral and trans-disciplinary nature of AllerGen’s research teams, supported by AllerGen and CIHR, has enabled Network investigators to
leverage the CHILD Study infrastructure and obtain more than $2.36 million in partner funding from Health Canada for three separate projects. These projects will help determine the impact of indoor and outdoor chemicals, toxicants and air pollution particles on the development of chronic disease, especially allergies and asthma, in Canadian infants and will contribute to federal government risk assessments and policy development. Urbanization correlates with increased asthma rates, yet we remain uncertain of the impact of many of the common environmental substances to which we are exposed. We need to know whether or not air quality in our communities, types of housing and building construction, where we live, and what we eat directly influence the development of asthma and allergies. The CHILD Study is meeting these challenges. It is suspected that the environment plays an important role in the development of childhood asthma, and cohort studies are a powerful observational tool for studying exposure-response relationships.

By early 2012, 3,600 pregnant mothers were recruited, representing more than 10,000 participants (babies-to-be, mothers and fathers) in the CHILD Study birth cohort. Data collection and analyses are ongoing. Home visits at three months of age have been completed with more than 2,000 families. These visits involve an extensive questionnaire and the collection of babies’ urine, stool samples and nasal swabs, dust from the babies’ bedrooms and beds, and breast milk samples. Over 1,000 study subjects have reached the one-year visit milestone, when skin allergy tests are performed and a full health review is undertaken.

Over the past year, the CHILD Study has demonstrated that it is a catalyst of innovative approaches that will accelerate the identification of biomarkers and new therapeutic targets for predicting and monitoring disease. This unique platform will produce results that inform the development of new ways of diagnosing and treating diseases across a wide range of health issues, and engage multiple generations of Canadian researchers.

Dr. Michelle North has been involved in AllerGen since its inception, taking full advantage of the capacity building opportunities available to Network trainees, which included attendance at all seven of AllerGen’s annual conferences and six AllerGen Annual Trainee Symposia. Michelle’s PhD supervisors, AllerGen Investigators Drs. Jeremy Scott and Frances Silverman, encouraged her involvement in Network activities from the outset of her graduate training. These events played an important role in Michelle’s career development and represented unique value-added opportunities that significantly augmented her graduate training experience.

AllerGen networking activities led Dr. North to her postdoctoral supervisor, AllerGen Investigator Dr. Anne Ellis, and she is currently working in Dr. Ellis’ laboratory at Queen’s University. In January 2012, Michelle visited the lab of Dr. Michael Kobor at the Centre for Molecular Medicine and
Therapeutics at the University of British Columbia on a Laboratory Exchange funded by AllerGen. That exchange offered Dr. North a unique opportunity to learn new techniques and work with technologies that are not currently available at Queen’s University and indeed are only available at select centres in Canada. She was also involved with committee work and gained valuable leadership skills as the President of the AllerGen Students and New Professionals Network (ASNPNI) from 2008 to 2009. In 2011, she was the recipient of an AllerGen Canadian Allergy and Immune Diseases Advanced Training Initiative (CAIDATI) Fellowship.

Dr. David Préfontaine joined AllerGen as a trainee at the beginning of his doctoral degree in Pathology at the Meakins-Christie Laboratories, McGill University, where he worked under the supervision of AllerGen Investigators Drs. Qutayba Hamid and Bruce Mazer. Employed as a Clinical Research Associate at Mount Sinai Hospital Center in Montreal since completion of his PhD, David’s involvement in AllerGen provided him with invaluable opportunities to develop a professional network in the allergy research community and to nurture strong relationships with established researchers across the country. The Network greatly contributed to David’s academic accomplishments as a doctoral candidate. David was also actively involved in the ASNPN, first as the Regional Representative for the Quebec/Atlantic Region and then as Vice-President. By virtue of his VP position, David sat on AllerGen’s Research Management Committee, which provided him with insights into the decision-making and management of Network activities, and allowed him to gain experience in administration, management and governance in a networked context.

Dr. Jeremy Hirota is a postdoctoral fellow at the University of British Columbia’s James Hogg iCAPTURE Centre, working under the supervision of AllerGen Investigator Dr. Darryl Knight. Jeremy is studying the role of airway epithelium in asthma pathogenesis.

In 2010, Jeremy was awarded an AllerGen CAIDATI Fellowship, and in 2011 he received a joint AllerGen-Michael Smith Foundation for Health Research (MSFHR) Postdoctoral Fellow Research Trainee Award.

Jeremy’s involvement in AllerGen has resulted in numerous opportunities to engage and interact with Canadian and international investigators, including Dr. Paul Foster at the University of Newcastle in Australia, and Dr. Sven-Erik Dahlén at the Karolinska Institute in Sweden. AllerGen has also provided Jeremy with mentorship opportunities that extended well beyond those typically available to Canadian graduate students.

Since joining the Network, Jeremy has taken full advantage of the capacity building opportunities offered to AllerGen trainees, including participation in annual research conferences and trainee symposia. He has also taken an active leadership role in the Network, sharing his expertise with other trainees on knowledge translation and career development in workshop presentations at various events. In early 2012, Jeremy became the ASNPN’s Pacific Regional Representative.
In 2011-2012, AllerGen leveraged an additional $7.48 million in cash and in-kind support from partner and stakeholder organizations — a leveraging ratio of 1:1.43.
During fiscal 2011-2012, AllerGen invested more than $6.33 million in allergy, asthma and anaphylaxis research across three priority areas:

- Gene-Environment Interactions;
- Diagnostics and Therapeutics; and
- Public Health, Ethics, Policy and Society.

In 2011-2012, through strong, continuing partnerships, AllerGen has leveraged its research investments, generating an additional $7.48 million in cash and in-kind support from partner and stakeholder organizations — a leveraging ratio of 1:1.43.
Program A:  
Gene-Environment Interactions  
Research Leaders:  
Jeffrey Brook, PhD, Environment Canada,  
University of Toronto  
Andrew Sandford, PhD,  
University of British Columbia  
Strategic Focus:  
Genetics, environmental exposures and gene environment interactions in allergy and asthma  
AllerGen’s Gene-Environment Interactions research program aims to capitalize on the wealth of data concerning early life phenotypes by pooling data across existing cohorts and focusing on genetic polymorphisms in genes related to early life allergic processes. In addition, AllerGen’s Gene-Environment Interactions research team works to determine the ‘prime-candidate’ environmental events and exposures during infancy and early childhood involved in the development and perpetuation of a predisposition to allergic disease. It also investigates the interaction of airborne pollutants and allergens, the role of infection in allergy and asthma, and the prevalence and expression of allergy and asthma in specific Canadian populations.

Program B:  
Diagnostics and Therapeutics  
Research Leaders:  
Dean Befus, PhD, University of Alberta  
Paul O’Byrne, MB, FRCP(I), FRCP(C), FRCP(E), FRCP(Glasg), McMaster University  
Strategic Focus:  
Biomarkers, immune monitoring and drug development and discovery  
AllerGen’s Diagnostics and Therapeutics research program aims to identify indicators of asthma and allergic disease, develop effective monitoring methods, and test and develop new therapeutics to treat allergy, asthma and other immune-related diseases. AllerGen’s Diagnostics and Therapeutics research team also looks to move biomarkers and immune monitoring science out of the laboratory and apply it to the development of new therapies and drug targets in clinical settings.

Program C:  
Public Health, Ethics, Policy and Society  
Research Leaders:  
Ann Clarke, MD, MSc, FRCP(C), McGill University  
Susan Elliott, PhD, University of Waterloo  
Strategic Focus:  
Allergic disease management, education, policy and patients  
AllerGen’s Public Health, Ethics, Policy and Society research program assesses current legal frameworks, policies and education systems, as well as prevalence and perception issues. It fills knowledge gaps and enables evidence-based policy and practice to improve disease management and public health. This research team also aims to further the investigation of psychosocial impacts and the health economics of allergic diseases, including food allergy, allergic rhinitis, asthma and anaphylaxis to inform policy and clinical practice.
In addition to supporting the three primary research thrusts outlined above, AllerGen supports the development of four additional cross-programmatic, multidisciplinary research teams.

**Cross-Programmatic Research Teams and Platforms**

**The Canadian Healthy Infant Longitudinal Development (CHILD) Study**

**Research Leaders:**
Malcolm Sears, MB, ChB, FRACP, FAAAAI, McMaster University
PJ Subbarao, MD, MSc, FRCP(C), University of Toronto

**Food Allergy and Anaphylaxis**
**Research Leader:** Jean Marshall, PhD, Dalhousie University

**Mind-Body Interactions and Allergic Disease**
**Research Leader:** Dean Befus, PhD, University of Alberta

**Occupational and Work-related Allergy and Asthma**
**Research Leader:** Diane Lougheed, MD, MSc, FRCP(C), Queen’s University

**Facts and Statistics**

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| Principal Investigators, Co-Investigators and Collaborators: | 190 |

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<td>Other participating students &amp; new professionals</td>
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| Full-time Equivalent Network Research Staff: | 232 |

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<td>International collaborating countries</td>
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The growing epidemic of allergies and allergic asthma has several potential explanations. One is that improved sanitation methods and widespread use of antibiotics have reduced childhood exposures to the various gut bacteria and flora proven to be critical to immune system development.
Research Highlights

Gene-Environment Interactions

This research team examines relationships between genes and the environment and how they affect allergies and asthma. Examples of work in progress include:

Traffic-related Air Pollution exposure during early life linked to the development of asthma in children

AllerGen’s Traffic-Related Air Pollution (TRAP) project evaluates the generally accepted hypothesis that early life exposure to traffic-related air pollution will contribute to the development of asthma in children, as they are particularly sensitive to toxic inhalants.

Drs Chris Carlsten and Michael Brauer from the University of British Columbia have been working within AllerGen’s Gene-Environment Interactions team to recruit infants who are at high-risk for asthma. This cohort — which features children with a first-degree relative having asthma — helped eliminate misclassifications regarding the presence or absence of asthma from the outset of the study. The study began with a regression tool estimation of exposures to nitric oxide, nitrogen oxide, black carbon and fine particulate matter and concluded when a pediatric allergist conducted a methacoline challenge test to measure bronchial sensitivity and assess asthma at the age of seven.

The team found that among this high-risk group of infants, those living in a high-traffic air pollution area had higher prevalence of new-onset asthma at age seven if exposed to elevated PM 2.5, even at relatively low levels. Even modest exposure to some traffic-related air pollutants during the first year of life can lead to asthma.

These research findings have important implications for public health nationally and internationally, particularly regarding the protection of sensitive populations from ambient traffic-related air pollutants. These findings can also help policy makers develop enforcement strategies within industrial and high-traffic areas to help minimize the negative impacts of traffic-related pollution on health.

While it is clear that the over-consumption of sugary foods and low levels of physical activity contribute to childhood obesity worldwide, current studies have uncovered many gaps in our understanding of the underlying causes. Based on evidence that many overweight adults also present with comorbidities and depression, scientists began looking at other factors that may contribute to children gaining weight.

AllerGen’s team set out to determine the association between the risk of being overweight at age nine to the risk at age eleven, and correlated those risks to exposure to stress during fetal development, the post-partum period and at school age. The stressors in chronological order from before birth were: smoking during pregnancy, distress in the

Mother’s stress pre- and post-birth connected to kids developing asthma and becoming overweight

Over the past several years, Dr. Anita Kozyrskyj and her team at the University of Alberta have been looking at the connection between maternal stress before and after birth, and the development of childhood asthma and allergies. The original study was a longitudinal follow-up of a diverse group of children both with and without asthma from the 1995 SAGE (Study of Asthma Genes and the Environment) birth cohort in Manitoba. Results from this team’s AllerGen-funded research showed clear links between maternal stress or depression — particularly persistent depression — and the development of childhood asthma. The team also produced an interesting finding regarding childhood obesity.
mother during the period following birth, and abnormal stress responses in children at school age based on cortisol and cortisol-DHEA (dehydroepiandrosterone) levels as markers of stress.

Study results indicated that the risk of being overweight later in life was higher amongst those whose mothers had experienced distress during the period immediately after birth. Results also showed higher risk of developing asthma, indicating possible multiple disease development in these individuals. However, these associations varied by gender and presence or absence of asthma.

In animal studies, it has been shown that babies who receive low levels of maternal grooming can produce offspring with higher abdominal fat levels, elevated blood glucose and reduced sensitivity to glucose. In humans, children who are less “cared” for and overfed as a response to infant cues such as crying, which is common in mothers with postpartum depression, are at greater risk of rapid weight gain.

These findings contribute to the growing body of evidence that maternal and family stress during and after pregnancy can have significant impacts on the later-life development of chronic diseases such as asthma and allergies, as well as weight gain, even in otherwise healthy children.

**An improved research-oriented storage tool for genetic data**

Scientists around the world are pooling data to increase sample sizes so they are better able to identify genetic associations that advance human health. These global collaborations have resulted in the creation of large databases that require sophisticated tools for data storage, access control, retrieval, manipulation and security.

The team at the James Hogg iCAPTURE Centre, University of British Columbia, led by Dr. Denise Daley, has developed the Biology-related Information Storage Kit (BRISK) to facilitate collaboration and simplify data sharing for AllerGen investigators. Its unique strength is that it was designed specifically for clinical investigators, as well as both wet (biology and microbiology) and dry (statistical and administrative) laboratory users.

BRISK is an open-source package of several web-based data management tools that provides the kind of cohesive data integration and management platform demanded by collaborative data sharing. It can handle large databases including data generated in longitudinal and cohort studies.

BRISK has even been used by investigators to retrieve information from high-throughput Genome-wide Association Studies (GWAS) with hundreds of thousands of markers.

**Diagnostics and Therapeutics**

AllerGen’s investment in diagnostic and therapeutic research focuses on identifying indicators for allergies and asthma and the discovery and development of new diagnostic tools and treatments.

**Lung function in chronic lung disease and the role of female hormones**

Asthma rates before puberty are higher in boys than in girls, but following puberty, more than 60% of adult patients with asthma are women. When asthmatics reach adulthood, the prevalence of asthma is nearly 50% higher in women than in men. At the same time, the severity of asthma symptoms changes during the menstrual cycle and significantly decreases after menopause, suggesting that female hormones may be
influencing lung function, asthma development and severity.

AllerGen Investigator Dr. Delbert Dorscheid and his team at the University of British Columbia reviewed data on the effects of female hormones on inflammatory airway diseases such as asthma. The team noted that female mice exposed to an allergen have an increased allergic response compared to male mice. Observations in humans indicated that the highest rates of emergency department visits for asthma occur during the pre-ovulatory phase of a woman’s menstrual cycle. While the cause is unknown, the female hormone and its higher concentration during the menstrual cycle play a role in disease development, recurrence and its severity.

Dr. Dorscheid’s team concluded that female sex hormones contribute to inflammatory airway conditions and that further research is required to understand how and why. With the worldwide rise in asthma rates, especially amongst women, this research will enhance our understanding of the role that hormones play in asthma and other lung diseases. This will, in turn, help inform clinical practice in relation to disease symptom management, hormone therapy practices and menopause management.

**Antibiotic use in early-life and its effect on gut microbiota linked to allergic asthma**

The growing epidemic of allergies and allergic asthma has several potential explanations. One is that improved sanitation methods and widespread use of antibiotics have reduced childhood exposures to the various gut bacteria and flora proven to be critical to immune system development. Interfering with this development by introducing antibiotics to the gut can be linked to atopic disorders such as allergic asthma, likely due to the disruption of healthy gut flora communities and the corresponding reduction in the diversity of “friendly” bacteria.

An AllerGen team from the University of British Columbia, led by Dr. Kelly McNagny, explored the relationship of antibiotics to the development of allergic asthma by using animal models. They treated neonatal mice with clinical doses of two widely used antibiotics and evaluated results in gut flora and the likelihood of allergic asthma development.

The team found that both newborns and adults treated with antibiotics displayed significant changes in the composition of gut microbiota; however, these changes were not identical. They related the risk of developing allergic asthma to the use of antibiotics early in life, but found that adult treatment had no such relationship and only affected the make-up of gut microbiota.

**Overview of current asthma biomarkers in asthma diagnosis and management**

Biomarkers are unique disease indicators that — like fingerprints — offer a non-invasive method of identification, in this case of diseases such as allergies and asthma. This type of precision diagnosis can help create personalized treatment plans to slow disease progression, reduce symptoms, maximize treatment effectiveness and increase patient quality of life.

AllerGen investigator Dr. Delbert Dorscheid and his team from the University of British Columbia looked at current and emerging biomarkers of airway inflammation, which can help to identify, monitor and guide treatment for asthmatics. To date, the best treatment for asthma is corticosteroids, which are not only expensive but also variably effective by asthmatic individual, so the ability to use biomarkers in blood, urine, exhaled gases, sputum, serum or exhaled breath condensate to diagnose or treat asthma has great advantages over traditional techniques, which normally require direct access to diseased tissue.
Traditional techniques also appear to have important limitations. Spirometry, for example, identifies a broad spectrum of asthmatics but cannot differentiate between the various sub-groups. Tissue biopsies and inflammatory cell counting from induced sputum are good determinants of airway inflammation but are invasive, expensive and difficult to standardize and administer.

This is where biomarkers hold promise. Most biomarkers studied to date reveal airway inflammation, but to obtain a clear diagnosis, many other factors need to be assessed and incorporated.

The study concluded that biomarkers will not fully replace traditional diagnostic tools. Rather, they will complement better diagnosis and management of the progression of disease and deliver more personalized and more effective courses of treatment. This has obvious potential benefits to patients, but also implications for the healthcare system, its practice and costs.

Public Health, Ethics, Policy and Society

AllerGen invests in research designed to produce innovation in public health, education, ethics, policy, patient care and society. Projects have focused on food allergy, the way allergic diseases are presented in the media, mobilization of research results, the economic burden of asthma and allergic diseases, and the development of online education tools for children and adults.

The effect of anaphylaxis legislation on school environments

An AllerGen-funded study examined school environments in Ontario as well as unlegislated provinces (British Columbia, Alberta, Quebec, Newfoundland and Labrador) to determine the range of approaches to anaphylaxis prevention and its management. Dr. Lisa Cicutto from the University of Toronto and her team assessed school board policies and compared them against Canadian anaphylaxis guidelines. They also surveyed school personnel and parents of at-risk
In 2006, the world’s first anaphylaxis legislation for schools, known as Sabrina’s Law, was designed to protect Ontario students with life-threatening allergies. Ontario schools now have a legal obligation to protect the welfare of students at risk of anaphylaxis while they are at school. Schools are required to ensure allergen avoidance and the appropriate management of allergic reactions. School staff often lack the knowledge and skills necessary to recognize and treat anaphylactic reactions. In most Canadian provinces, each school board develops its own policies based not on legislation, but on national anaphylaxis guidelines.

In the absence of preauthorized parental consent, there was no provision for an employee to administer medication to a student even if the employee believed that the student was experiencing an anaphylactic reaction. Second, there was no statement to protect school staff from liability when taking proactive measures, acting in good faith, to prevent an anaphylactic reaction. Finally, the team’s research revealed that less than 35% of all school personnel studied had perfect EpiPen administration technique.

This study has important implications for policy development, implementation and adherence. The gaps identified revealed that school personnel and parents are likely unaware of or not knowledgeable about their own school boards’ written anaphylaxis policies. This discovery can guide school board officials in preparing training, communication and policy. Government policy makers now know that better adherence to policies is required and that there is a need for measures to enforce these policies. It is clear that even though legislation exists, laws without proper resources for implementation are not achieving their goals.
Demographic predictors of common food allergies

An AllerGen-funded study, which surveyed more than 9,500 individuals across Canada, has provided the first-ever food allergy prevalence rates amongst Canadian children and adults and was the first study in North America to correlate allergy prevalence with demographic factors including education, immigration status and geography. This is particularly important because it has become evident that environmental and demographic factors — not just genetics — play a role in allergy development.

Preliminary findings indicate that about 7% of Canadians self-report at least one food allergy. The study, led by AllerGen Program Leader Dr. Ann Clarke, Professor at McGill University, was consistent with other research in showing that peanut, tree nut and sesame allergy were more common in children, while fish and shellfish allergy were more common in adults. The demographic data suggest that higher education levels may be linked with increased risk of food allergy; however, the mechanisms underlying these relationships are not yet well understood. Additionally, all food allergies were less common amongst immigrants, suggesting that those born outside of Canada are less likely to have food allergies.

Several hypotheses attempt to explain these findings. The hygiene hypothesis is generally associated with higher education levels and changes in family lifestyle. Smaller family size, decreased exposure to pets and livestock, fewer infections during infancy, increased use of antibiotics and vaccinations, and improved sanitation may all help explain why higher education levels are linked to increased risk in developing food allergy. It is also possible that parents with higher education levels are more likely to seek a medical diagnosis after suspecting a food allergy in their child, thus resulting in a higher number of diagnosed cases.

The reduced risk of food allergy amongst immigrants may be attributed to both genetic differences and environmental influences. The correlation may be explained by Western dietary habits and lifestyles including omega-3 deficiency due to lower fish consumption, decreased fresh fruit and vegetable intake, inadequate vitamin D levels, different food processing methods, delayed introduction of certain foods (such as peanuts), and improved sanitation.

This research suggests that demographic factors such as education level, birthplace and location may influence the development of a variety of food allergies. This information is relevant for health and educational resource planning for Canadians, particularly those concentrated in areas of higher risk. Understanding demographic predictors will assist policy makers in developing better prevention guidelines and help patient
advocacy groups tailor audience-specific educational materials for people at risk.

**Food allergic Canadians’ use of epinephrine auto-injectors**

In Canada, the first line response to an anaphylactic reaction, the deadliest form of food allergies, is the use of an Epinephrine Auto-Injector (EAI). A recent paper by an AllerGen trainee and current President of the AllerGen Students and New Professionals Association, Lianne Soller at McGill University, examined trends associated with EAI use by Canadians and related clinician prescribing rates.

Using data from an AllerGen-funded nationwide survey, individual possession of EAI was compared to household education level, household income, marital status, urban location and birthplace of the respondents.

Given that an EAI is the only medication to act against an anaphylactic reaction outside of a hospital setting, this study made an alarming discovery. Only 55% of Canadians who have a physician-diagnosed food allergy possess an EAI. The study also revealed that individuals residing in a “married” household are more likely to possess an EAI. Females, children, individuals living with two or more food allergies, and those who have been previously treated with epinephrine for an anaphylactic reaction are also more likely to possess and carry an EAI. Single adult males were the least likely to possess and carry an EAI.

While only half of the at-risk group report having the device, a mere half again report that they carry it at all times. This suggests that only about 25% of all individuals who should carry an EAI actually do so. This is significant on many levels, especially since the most at-risk group with the most severe reactions is children.

This information is vital for patient advocacy groups developing educational programs for those living with anaphylaxis, as well as for policy makers developing guidelines and legislation. Healthcare providers would also benefit from more effective education on anaphylaxis management, including proper medication administration techniques and adherence to clinical advice.

**Strategic Initiatives**

Each year, AllerGen supports time-sensitive, strategic initiatives that enable Network investigators to respond rapidly to new opportunities related to existing projects. In 2011-12, AllerGen invested $394,591 in eight new Strategic Initiatives across two priority areas:

**Strategic Initiatives – Research**

- Collaboration between the CHILD Study and South Asian birth cohort (START) Study - $50,000
  PJ Subbarao, Clinician-Scientist and Pediatric Respirologist, The Hospital for Sick Children
- Development of sensor arrays for the assessment of exposure to air pollutants - $20,000
  Greg Evans, Professor, University of Toronto
- Method for measuring phthalate concentrations representative of exposure - $32,900
  Miriam Diamond, Professor, University of Toronto
- Molecular interactions and ontologies for allergy and asthma - $27,372
  Fiona Brinkman, Professor, Simon Fraser University

**Strategic initiatives – Knowledge Translation**

- Enhancing Roaring Adventures of Puff (RAP) for First Nations Communities - $50,000
  Dean Befus, Professor, University of Alberta
- Respiratory health awareness community outreach and engagement of First Nations community in Alberta: Pilot Intervention - $45,000
  Miriam Stewart, Professor, University of Alberta
- Sustainable Online Support for Children - $49,679
  Miriam Stewart, Professor, University of Alberta
- Using and abusing evidence in science and health policy - $40,000
  Timothy Caulfield, Professor, University of Alberta
For the first time, the AllerGen conference was an *Accredited Group Learning Activity* as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, and approved by the Canadian Society of Allergy and Clinical Immunology (CSACI). Continuing Medical Education (CME) accreditation made this event even more attractive to family doctors and clinician-scientists.
**Innovation from cell to society** – AllerGen’s Annual Research Conference

Toronto, Ontario was the host city for AllerGen’s Seventh Annual Research Conference, *Innovation from cell to society*, which took place February 5-7, 2012.

AllerGen’s Annual Research Conference is an important means of disseminating and mobilizing Network research. It also provides an exclusive opportunity for AllerGen investigators, collaborators, trainees and new professionals to network and share research outcomes with partners and stakeholders, including policy-makers, patient advocacy groups, healthcare providers and representatives from industry, government and the clinical, academic and not-for-profit sectors. In addition to presentations by Network Investigators, AllerGen’s conference features global experts invited to share their insights and perspectives on new research, commercialization and the knowledge mobilization strategies that inform Network priorities.

AllerGen Investigator Dr. Sharon Dell, Associate Professor in the Department of Pediatrics & Institute of Health Policy, Management and Evaluation, University of Toronto and Senior Associate Scientist, Division of Respiratory Medicine at the Hospital for Sick Children, chaired the 2012 Conference Program Planning Committee. Dr. Teresa To, Professor at the Dalla Lana School of Public Health, University of Toronto and Senior Scientist, Child Health Evaluative Sciences at the Hospital for Sick Children, chaired the HOP Sub-Committee.

The theme of *Innovation from cell to society* was birth cohort research, with special focus on AllerGen’s CHILD Study. The opening keynote session featured Dr. John Henderson from the University of Bristol, who shared his experience.
as co-Director of the Avon Longitudinal Study of Parents and Children (ALSPAC), including key findings and lessons learned from a networked, birth cohort approach to research on childhood asthma and allergies in the United Kingdom.

Dr. Malcolm Sears offered a Canadian perspective on birth cohort research in a keynote address titled, *The CHILD Study: Directions, Drivers and Destination*. Additional CHILD Study investigators reported on CHILD Study findings related to the role of viral infections, lung function, and the outcomes of dietary assessments on the development of allergy and asthma in early life. In addition, CHILD Study results arising from research partnerships with Health Canada and Environment Canada were presented in a panel involving partner representatives. Ethical issues affecting cohort research were discussed by Prof. Tim Caulfield, Faculty of Law and School of Public Health, University of Alberta. The Microbiome research team, led by Dr. Anita Kozyrskyj, Associate Professor, Faculty of Medicine and Dentistry at the University of Alberta, shared preliminary results arising from her team’s study of the impacts of infant diet and the environment on infant intestinal microbiota. AllerGen’s Clinical Investigator Collaborative presented an overview of their clinical trials in asthma leading to drug discovery.

An asthma education session, focused on engaging Aboriginal families affected by allergies and asthma, was moderated by Cheryl Connors, Executive Director of the Canadian Network for Respiratory Care (CNRC). The session shared best practices in knowledge translation and mobilization, and offered lessons learned from the successful school-based *Roaring Adventures of Puff* (RAP) asthma education program. A panel discussion on *Research Benefiting Patients: future research priorities and opportunities* discussed parental preferences for asthma control in children and social exclusion in youth living with anaphylaxis. It explored issues from the perspectives of a clinician, scientist, parent and patient advocacy group representative.

A conference highlight was an interactive lunchtime session by Clean Air Champions – an AllerGen partner organization that showcased the *Air Aware* program. This interactive presentation highlighted the challenges and opportunities of raising awareness among sports coaches, athletes, youth, parents and administrators about the important...
connections between asthma, allergy, air pollution and active lifestyles.

Roger Martin, Chairman, Institute for Competitive-ness and Prosperity and Dean of the Rotman School of Management at the University of Toronto, closed the conference by sharing his vision of Innovation in Canada – Opportunities and Challenges 2012 and Beyond. He discussed the difference between invention and innovation and identified what Canadian researchers and educators can do to promote innovation and an innovation-oriented culture.

**AllerGen Student Poster Competition**

Fifty-four trainees and new professionals representing 14 universities and affiliated institutions participated in AllerGen’s 2011-2012 Poster Competition. In total, $2,800 in cash prizes was awarded to the trainees presenting the top posters.

**AllerGen’s 7th annual Innovation from cell to society conference was made possible through partnerships with the following organizations:**

**Gold Sponsors**
- GlaxoSmithKline
- Merck Canada
- Pfizer Canada

**Silver Sponsors**
- McMaster University
- Novartis Pharmaceutical Canada

**Bronze Sponsors**
- Boehringer-Ingelheim
- Maple Leaf Foods
- Michael Smith Foundation for Health Research
- Nycomed: a Takeda Company
- Roche Canada
- Sun Butter – Red River Commodities

**In addition, in-kind support was provided by:**
- Allergic Living magazine
- Anaphylaxis Canada
- Asthma Society of Canada
- Canadian Allergy Asthma and Immunology Foundation
- Canadian Lung Association
- Canadian Network for Respiratory Health
- Canadian Society of Allergy and Clinical Immunology
- Canadian Thoracic Society
- Clean Air Champions
- National Asthma Patient Alliance
- The Sandbox Project
- UBC James Hogg Research Centre
AllerGen has been active in establishing a knowledge mobilization community in asthma and allergic disease that did not exist prior to the formation of the Network.
Since its inception, AllerGen has developed and nurtured partnerships with academic institutions, federal and provincial agencies, the private sector, patient advocacy groups and international collaborators. AllerGen has also been active in establishing a knowledge mobilization community in asthma and allergic disease that did not exist prior to the formation of the Network.

AllerGen’s research portfolio involves an average of 100 research partners per year. In 2011-12, AllerGen involved 180 organizations in Network activities including research, knowledge mobilization, commercialization and capacity building. The average AllerGen-funded project involves approximately three Canadian and/or international partners.

### Universities: 34
**(21 Canadian, 13 International)**
- American University
- Athabasca University
- Charité Universitätsmedizin Berlin
- Dalhousie University
- Harbin Institute of Technology - China University
- Indiana University
- Karolinska Institute
- McGill University
- McMaster University
- Oxford University
- Queen’s University
- Simon Fraser University
- Université de Montréal
- Université du Québec à Chicoutimi
- Université Laval
- University of Alberta
- University of Arizona
- University of British Columbia
- University of Calgary
- University of Groningen
- University of Guelph
- University of Manchester
- University of Manitoba
- University of New Brunswick
- University of Newcastle
- University of North Carolina at Chapel Hill
- University of Ottawa
- University of Saskatchewan
- University of Toronto
- University of Victoria
- University of Waterloo
- University of Western Australia
- Utrecht University
- Western University
Hospitals: 8
Centre de recherche du CHUM – Hôpital Saint-Luc
Hôpital du Sacré-Coeur de Montréal
Hôpital Sainte-Justine
Hospital for Sick Children
Kingston General Hospital
Mount Sinai Hospital, Toronto
St. Joseph’s Hospital, Hamilton
St. Michael’s Hospital, Toronto

Industry: 31
Adiga Life Sciences
Advaxis, Inc.
AIM Therapeutics
Amgen Inc.
Asmacure
AstraZeneca
Boehringer Ingelheim Canada
CHENOMX Inc.
Club Penguin™ Disney Online Studies Canada Inc.
Genentech
GlaxoSmithKline Inc.
Graham Scott Strategies Inc.
HealthDiary Inc.
Intelliware Development Inc.
Kincora Innovation
Lincoln Diagnostics Inc.
Lumira Capital

Maple Leaf Canada
Mark Bisby Consultant
MedImmune Inc
Merck Frosst Canada Inc.
Novartis Pharma Canada Inc.
Nycomed Canada
Pfizer Canada Inc.
Pharmaxis
Pro-Bio Associates Innovation Consultants
Roche Canada
Stem Cell Technologies
Sun Butter
Suzanne Tough Consultation
TEC Edmonton

Federal Agencies: 5
Assisted Human Reproduction Canada
Canada Mortgage and Housing Corporation
Environment Canada
Health Canada
Health Canada - First Nations and Inuit Health Branch
Health Canada - Food Directorate
Public Health Agency of Canada

Provincial Agencies: 5
Alberta Cancer Foundation
Alberta Health Services
Alberta Innovates

Genome Alberta
Ontario Ministry of Health and Long-Term Care

Non-Profit (Professional Associations, Community-based and Charitable Organizations): 43
Aboriginal Communities:
Blue Quills First Nations College
Enoch Cree Nation
Eskasoni First Nation
First Nations Family Caring Society
Kihiew Asiniy Education Centre, Saddle Lake
Kitaskinaw Education Authority
Mannawanis Native Friendship Centre Society
Membertou First Nation
Onchaminahos School, Saddle Lake
Potlotek First Nation
Saddle Lake First Nation
Siksika First Nation
Treaty 7 Management Corporation
Tui’kn Partnership
Wagmatcook First Nation
Wah-Koh-to-Win Child Care Society
Wahkotowin (Kinship) Society
Waycobah First Nation
Whitefish Lake First Nation (Goodfish Lake)
Yellowhead Tribal Council

Alberta Asthma Centre
Alberta Breathes
Alberta Lung Association
American Thoracic Society
Anaphylaxis Canada
Assembly of Manitoba Chiefs
Association des Allergies Alimentaires (AAA)
Asthma Allergy Information Association (AAIA)
Asthma Society of Canada
Boys and Girls Club Saddle Lake
British Columbia Lung Association
Canadian Association of Geographers
Canadian Breast Cancer Foundation
Canadian Lung Association/Canadian Thoracic Society
Centre for Addiction and Mental Health
Clean Air Champions
Creating Hope Society
Inner City Youth Development Association
International Health Economics Association
Lung Association of Nova Scotia
Ontario Lung Association
The Lung Association
The Sandbox Project

Other (Research Institutes, International Organizations, Networks, Private Donors and School Boards): 48
Agriculture and Food Development Authority, Ireland
Alberta Centre for Child, Family & Community Research
Atlantic Aboriginal Health Research Program
Canadian Allergy, Asthma and Immunology Foundation (CAAIF)
Canadian Foundation for Innovation
Canadian Network for Respiratory Care (CNRC)
Canadian Society for Epidemiology and Biostatistics
Canadian Society of Allergy, Asthma and Clinical Immunology (CSACI)
Cancer Stem Cell Consortium (CSCC)
Centre for Drug Research and Development (CDRD)
Centre of Excellence for the Prevention of Organ Failure (PROOF)
Childhood Asthma Foundation
Children’s Asthma Education Centre
Compute Canada
Coopérative des paramédics de l’Outaouais
COPD and Asthma Network of Alberta
CORE: Collaboration for Outcomes Research & Evaluation
Delton Public School Edmonton
Dr. Cheryl Cuddeford, Family Physician
Dr. Loretta Fiorillo, Family Physician
Dreamspeakers on Tour
Fonds de la recherche en santé du Québec (FRSQ)
Giovanni & Concetta Guglietti Family Foundation
Harry Medovy House
Healthy Child Manitoba
Helmholtz-Zentrum München, Germany
iCAPTURE Centre
Institut universitaire du cardiologie et de pneumologie de Québec (IUCPQ)
IWK Health Centre
Jim LaPlante The Family Center
Manitoba ACADRE-NEAHR Network
Manitoba Institute of Child Health
Mitacs
McGill University Health Centre
Meadowood Centre, Winnipeg
Michael Smith Foundation for Health Research (MSFHR)
Munich Allergy Research Center (MARC), Germany
National Asthma Patient Alliance (NAPA)
National Institute of Arthritis and Musculoskeletal and Skin Diseases
Network Environments for Aboriginal Health Research (NEAHR)
Norlien Foundation
Northern Alberta Institute of Technology
Ontario Institute for Cancer Research (OICR)
Ontario K-NET
Stem Cell Network
Urgences-santé Québec
Winnipeg Health Sciences Centre
Winnipeg School Division
AllerGen’s Partners and Stakeholders Attest to the Network’s Value

In support of AllerGen’s NCE renewal bid, 110 letters of support were provided by partner and stakeholder organizations from industry, federal and provincial governments, international partners, research centres, hospitals, patient groups and professional societies totaling a cash and in-kind commitment of over $45.3 million. This represents a leveraging ratio of 1:2.24 in relation to the NCE funding award received on March 23, 2012.

Part of AllerGen’s success is attributable to its networked way of working. Over the years, researchers and collaborators have developed strong partnerships that return benefits to the whole network by employing multi-sectoral and multi-disciplinary approaches to the way research and knowledge mobilization activities are undertaken.

During fall 2010, AllerGen held a series of regional stakeholder consultation meetings at locations across Canada including Vancouver, Edmonton, Toronto, Burlington, Ottawa and Montreal. These meetings directly engaged Network stakeholders in the development of AllerGen’s strategic plan to 2019.
International Partnerships

Over the past seven years, approximately 20% of AllerGen’s partnerships have been with organizations outside Canada. Through the NCE International Partnerships Initiative (IPI), AllerGen launched five new international collaborations with counterpart networks and centres of excellence renowned for their world-class research and knowledge translation abilities. Currently, AllerGen has collaborations with teams in ten countries including Australia, China, Germany, India, Ireland, Japan, the Netherlands, Sweden, the United Kingdom and the United States of America.

One of AllerGen’s goals is to continue fostering national and international partnerships. Over the past year, AllerGen has built on the momentum of these successful relationships and collaborations. Featured highlights include:

International AllerGen Consortium Convenes in Sweden for Gene-Environment Interactions Workshop

Over the last several years, AllerGen and its investigators and trainees have benefited from a strong partnership with the Karolinska Institute in Sweden. On August 29-30, 2011, the National Institute of Environmental Medicine at the Karolinska Institute hosted a two-day workshop for collaborators within the international AllerGen consortium.

This workshop focused on gene-environment (GxE) interactions using genome-wide data and was aligned with the AllerGen-funded Traffic pollution, Asthma and Genetics (TAG) project, led by AllerGen Investigators Drs. Michael Brauer and Christopher Carlsten from the University of British Columbia. This event also facilitated networking and strengthened relationships between researchers and trainees engaged in the TAG project.

Workshop objectives included dissemination of knowledge, sharing of applications and methodologies amongst research experts in fields related to genetics, allergic and immune-related diseases and epidemiology. The two-day event focused on relevant GxE interactions including statistical methods to assess interaction effects, genes, smoking and lung function, applications of GxE interactions in cardiovascular diseases and GxE analysis. This event also allowed for an internal meeting of selected international participants including students and faculty from the Karolinska Institute, AllerGen investigators, trainees and Administrative Centre staff with international collaborators in the consortium from Helmholtz-Zentrum München, University of Düsseldorf (both in Germany), and the University of Groningen and Utrecht University in the Netherlands.

AllerGen signs capacity building MOUs with Australia, Germany and Sweden

AllerGen is committed to creating new capacity building programs that enrich training and skill acquisition opportunities available for AllerGen students, new professionals and researchers.

Effective Canadian and global networking has led to new partnerships and the signing of Memoranda of Understanding (MOU) with the University of Newcastle in Australia and The Allergie-Centrum-Charité at Charité - Universitätsmedizin Berlin, Munich Allergy Research Center (MARC) -
opportunities. However, AllerGen, building upon its successful international laboratory and trainee exchange programs developed in the context of the AllerGen NCE International Partnership Initiative Award, offers the next generation of researchers and clinicians a range of global experiences. AllerGen trainees are not only exposed to visiting international professorships and speakers, but are also given the opportunity to work and learn abroad.

Over the past year, AllerGen trainees gaining international experience include:

- **Jennifer Protudjer, PhD,** Karolinska Institutet, Stockholm, Sweden  
  Supervisor: Catarina Almqvist Malmros, MD, Associate Professor, Department of Medical Epidemiology and Biostatistics.

- **Elaine Fuertes, PhD (c), MSc,** Helmholtz-Zentrum München, German Research Centre for Environmental Health  
  Supervisor: Joachim Heinrich, PhD, Institute of Epidemiology, Helmholtz-Zentrum München, German Research Center for Environmental Health.

Technische Universität München (TUM), and Helmholtz Zentrum München in Germany. These new partnerships provide increased opportunities for international networking, research collaboration and knowledge exchange. Associated MOUs build on the strength of the Network’s long and successful partnership with the Karolinska Institute in Sweden.

**Canadian Trainees Gain International Experience**

Normally, students and new professionals have limited access to international capacity building
• Steven Maltby, PhD, University of Newcastle, Callaghan, NSW, Australia
  Supervisor:
  Professor Paul Foster, PhD, School of Biomedical Sciences and Pharmacy and Director of the Priority Research Centre for Asthma and Respiratory Disease.

• Irene Fung, MD, Children’s Hospital of Philadelphia Clinical Immunology and Allergy Fellowship
  Supervisor:
  Jonathan Spergel, MD, PhD, Chief, Allergy Section; Co-Director, Centre for Pediatric Eosinophilic Disorders, and Associate Professor of Pediatrics, Perelman School of Medicine, University of Pennsylvania.

AllerGen Trainee Wins Research Assistantship and Admission to PhD Program in Sweden

AllerGen trainee, Huan Shu, supervised by Network Investigator Dr. Tim Takaro, Associate Professor, Faculty of Health Sciences, Simon Fraser University, won a Research Assistantship competition and admission to the PhD program at Karlstad University in Sweden. Huan Shu has finished her Masters of Science degree and she will be working with prolific phthalate investigator, Dr. Carl Bornheg, to gain valuable experience and knowledge. This opportunity will provide her with a unique opportunity to gain international expertise and will enhance networking and research collaboration between Sweden, AllerGen and the CHILD Study.

Advancing Science Internationally

Over the years, AllerGen has partnered with international researchers and collaborators to share knowledge and advance science on a global scale. AllerGen received 13 letters of support from members of the international research community, confirming their commitment to sustained research and capacity building collaboration with the Network. Globally networked initiatives include:

- A genome-wide asthma study consortium undertaken in collaboration with the Institute national de la santé et de la recherche médicale in France and the University of Bristol in England;
- Participation in the CHILD Study Scientific Advisory Board by Professor Peter Sly, Queensland Children’s Medical Research Institute in Australia and Dr. Fernando Martinez from the University of Arizona, USA;
- Collaborative research with the University of North Carolina’s School of Medicine on air pollution in the airways;
- Development of asthma education tools for use by AllerGen partners in El Salvador; and,
- International training agreements.

AllerGen also worked closely with European partners in the area of food allergy prevalence in Canada as compared to European countries.
Effective KTEE and knowledge mobilization strategies are critical to successful dissemination of Network research results and ensuring that the social and economic value of AllerGen’s national and international networking and research are realized.
AllerGen is committed to KTEE and knowledge mobilization and continuously engages and shares results with Network partners and stakeholders, including not-for-profit allergy, asthma, anaphylaxis and related immune diseases organizations; clinicians and healthcare professionals; asthma educators; the general public; policy makers and other decision makers.

AllerGen Success Stories

AllerGen Success Stories is a quarterly publication that offers lay and research audiences access to AllerGen’s cutting-edge research results. This publication is available on AllerGen’s website or by request in hard copy and is designed to make AllerGen research results accessible to the public. It offers those living with asthma and allergic diseases, along with their families and friends, practical information about how the latest allergy and asthma research...
conducted in Canada can be applied to their disease management practices in everyday settings.

Over the past year, AllerGen published three volumes of Success Stories and they were mailed to more than 1,200 Network participants, research partners and knowledge users.

Stories included:

**Allergic Disease:**
- Unlocking the Secrets of Mind-Body Connections to Revolutionize Inflammatory and Allergic Disease Diagnosis, Treatment and Prevention
- The Global Search for Allergy and Asthma Genes: Genetic Testing, Counselling and Novel Therapies on the Horizon
- Predicting Allergies and Asthma in Babies: Pioneering Canadian Scientists Discover that Stem Cells are “Crystal Balls”

**Asthma:**
- Teaching Kids with Asthma How to Take Charge of Their Health
- Urine Samples Advance Asthma Diagnosis and Help Patients “Breathe Easy”
- The Front Lines: Studying Asthma During Early Childhood Development
- When is Your Child’s Wheeze a Sign of Asthma? Canadian Researchers Establish New Diagnostic Tests for Infants and Young Children
- Asthma in the Workplace: Looking to Ease the Burden through Identification and Prevention
- Mapping Air Pollution to Predict Asthma
- Internationally Acclaimed Canadian Scientists Discover How Airway Cells Respond to Viruses and Air Pollution: Is a Revolutionary New Drug for Airway Diseases on the Horizon?

**eLearning:**
- Using the World-Wide Web to Drive Asthma Genes Research Forward at High Speed
- A New Generation of e-Learning Tools for Asthma Education
- Using the Internet to Improve Education and Support for Canadian Children, Teens, and Parents Affected by Asthma and Allergies

**Policy:**
- AllerGen Food Allergy and Food Labelling Research Team Supports Policy Updates to Enhance the Protection of Food-Allergic Consumers

**Other:**
- Adults Raised in Poor Socioeconomic Circumstances Show Increased Susceptibility to Chronic Disease.

Since 2005, AllerGen investigators have produced 397 peer-reviewed publications, 168 non-refereed publications, 476 specialized publications, and 350 scientific posters, for a total of 1,391 publications.

**AllerGen Publications 2011-12**

<table>
<thead>
<tr>
<th>Refereed Contributions</th>
<th>85</th>
</tr>
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<tbody>
<tr>
<td>Articles in Refereed Publications</td>
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</tr>
<tr>
<td>Other Refereed Contributions</td>
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<tr>
<td>Non-Refereed Contributions</td>
<td>29</td>
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<tr>
<td>Specialized Publications</td>
<td>57</td>
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<tr>
<td>All 2011-2012 Publications</td>
<td>171</td>
</tr>
<tr>
<td>Posters</td>
<td>124</td>
</tr>
</tbody>
</table>

Between April 2011 and March 2012, AllerGen researchers produced 171 new publications (refereed, non-refereed and specialized). Of that number, 85 were refereed publications, published in leading academic journals.

**Online Learning Tool Wins Two Awards from the Canadian Society for Training and Development**

In November 2011, the Canadian Society for Training and Development (CSTD) recognized AllerGen and its collaboration with Anaphylaxis Canada, the Canadian Society of Allergy and Clinical Immunology (CSACI), and Leap Learning Technologies (a Canadian start-up company based in Hamilton, ON) for the online education program How to C.A.R.E. for
Students at Risk of Anaphylaxis: What Educators Need to Know.

This online training course, which aims to increase anaphylaxis education among school personnel, was recognized with two prestigious award at the CSTD’s annual awards ceremony.

- “Gold” for Training Excellence in E-Learning, and

This online tool was developed collaboratively by AllerGen Investigator Dr. Anthony Levinson, MD, FRCPC, Associate Professor and Director of e-Learning Innovation for the Michael G. DeGroote School of Medicine, McMaster University, in partnership with Anaphylaxis Canada, led by Laurie Harada, Executive Director, and CASCI, led by President Dr. Stu Carr. AllerGen congratulates this team for its efforts to develop and disseminate effective patient-oriented knowledge mobilization tools.

AllerGen in the Media

AllerGen’s communication strategy targets diverse national, international, external, internal, scientific and lay public audiences. In 2011-12, AllerGen experienced a steady stream of visitors to its website, with a peak of 931 unique visitors in a single month. In addition, AllerGen researchers were featured in the media on 20 occasions.

Commercialization and Industry Partnerships

AllerGen’s research program supports translational projects aimed at generating commercial products.
and services that have the potential to improve healthcare practices, inform patient decision-making for clinicians, improve workplace productivity, reduce risk and increase quality of life for Canadians.

The identification, protection, commercialization, translation and mobilization of Network-supported intellectual property are fundamental to AllerGen’s success. Each research investment that AllerGen makes is undertaken following a critical assessment of the “value-added” of Network support, the degree of “pull” from the user sector that supports the research and a clearly identified need for results.

Examples of AllerGen-supported commercialization initiatives include:

**Respirlyte Inc.**

Atopic or allergic diseases are common chronic illnesses. Asthma is the most frequent chronic clinical childhood condition and the number one reason for pediatric emergency admissions in Canadian hospitals. The tissues of people with atopic diseases become inflamed and treatment often requires anti-inflammatory drugs like inhaled or oral corticosteroids. These medications can have a number of unwanted side-effects. Further, deciding when to treat or when to increase the dose of corticosteroids is more difficult for

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<table>
<thead>
<tr>
<th>Date</th>
<th>Source</th>
<th>Title</th>
<th>Description</th>
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<tr>
<td>24-May-11</td>
<td>CBC News – Online - Daniel Schwartz</td>
<td>“The four seasons of hay fever - Pollen from trees, grass and weeds and mold spores responsible”</td>
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<td>26-May-11</td>
<td>CBC News – Online - Daniel Schwartz</td>
<td>“Allergies: why we get them”</td>
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<td>02-May-11</td>
<td>Nature Medicine – Online - Mike May</td>
<td>“Drug companies hope to breathe life into asthma pipeline”</td>
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<td>31-Aug-11</td>
<td>Vancouver Sun – Print - Laura Kane</td>
<td>“Parents’ stress alters children’s genes”</td>
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<td>12-Sep-11</td>
<td>CBC News – Online - Mark Gollom</td>
<td>“Doctors slam alternative medicine proposal”</td>
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<tr>
<td>30-Sep-11</td>
<td>The National – Online - Tom Blackwell</td>
<td>“Alternative medicine ‘unscientific,’ study warns”</td>
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<tr>
<td>14-Oct-11</td>
<td>Toronto Star – Online - Emily Jackson</td>
<td>“London-area school board pans imitation peanut butter”</td>
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<tr>
<td>03-Jan-12</td>
<td>National Post - Tom Blackwell</td>
<td>“The downside of a good education: food allergies”</td>
<td></td>
</tr>
<tr>
<td>04-Jan-12</td>
<td>GlobalNews.ca - Carmen Chai</td>
<td>“Food allergies nearly twice as common among well-educated: study”</td>
<td></td>
</tr>
<tr>
<td>05-Jan-12</td>
<td>Discovery.ca</td>
<td>“More Education May Mean More Food Allergies”</td>
<td></td>
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<tr>
<td>08-Mar-12</td>
<td>CIHR Website</td>
<td>“Research Profile – The Asthma Lottery”</td>
<td></td>
</tr>
<tr>
<td>24-Mar-12</td>
<td>The Hamilton Spectator - Carmela Fragomeni</td>
<td>“$36m nothing to sneeze at - McMaster-based allergy researchers get federal boost”</td>
<td></td>
</tr>
<tr>
<td>29-Mar-12</td>
<td>Research Money - Ron Freedman</td>
<td>“AllerGen renewed for another seven years to continue battle against allergy epidemic”</td>
<td></td>
</tr>
</tbody>
</table>
doctors when asthma control is less than optimal. For example, young children with asthma are often unable to perform tests to measure their lung function. To have a clear diagnosis or measure of inflammation, a biopsy can be performed. However, this is potentially dangerous and painful. Other less invasive tests are available, but they are less accurate, and are not suited for the average doctor’s office.

Based on this urgent need for a better test, especially one that could be used within a typical doctor’s office, AllerGen Investigator Dr. Darryl Adamko, Associate Professor at the University of Saskatchewan, developed a novel method to diagnose asthma using a combination of urine samples and Nuclear Magnetic Resonance (NMR) analyses. Dr. Adamko’s research findings indicated that the urine metabolites of children and adults with lung inflammation will reflect changes in the disease.

Respirlyte Inc. is a privately-held, discovery-stage company located in Edmonton, Alberta. Incorporated in 2011, the company develops respiratory diagnostic assays through the use of metabolomics-based technologies.

Dr. Adamko’s research team is studying humans with different allergic diseases (i.e., asthma or allergic rhinitis) to determine the feasibility of developing a non-invasive test to correctly diagnose people with allergic disease (including asthma) compared to healthy people. Respirlyte’s market competitiveness is rooted in the fact that urine tests will not only diagnose allergic diseases better than available techniques, but will also help physicians better adjust treatment schedules for patients to ensure that optimal amounts of medication are administered.
**AIM Therapeutics**

In 2011, Dr. Dean Befus, Professor at the University of Alberta, discovered that the nervous system controls production of an anti-inflammatory protein in a model of allergic asthma. He investigated the effects of this anti-inflammatory compound in several disease models, developed experimental drugs and tested their pathways in humans.

With major funding from AllerGen NCE and AIM Therapeutics Inc., Dr. Befus’ research team identified a novel salivary gland peptide with anti-inflammatory activity that could inform the treatment of asthma. AIM 102, a lead drug derived from knowledge of its pathway, was demonstrated effective in preclinical models of asthma and Phase I clinical studies were successfully completed.

The outcome of this research is expected to lead to rapid advances in applications to treat allergic and other inflammatory diseases, which is necessary to attract capital and further commercialization of innovative therapeutic approaches to asthma management.

AIM 102 offers a potentially safer and more convenient treatment for moderate to severe asthma, one of the most prevalent chronic diseases in major markets. AIM 102 is the first of a new class of oral, non-steroidal, immune modulating anti-inflammatory drugs. In the future, AIM Therapeutics plans dosing AIM 102 in a multi-site Phase II clinical trial in collaboration with the Clinical Investigator Collaborative (CIC) of AllerGen.

**Adiga Life Sciences Inc.**

In 2010-2011 AllerGen was involved in the establishment of Adiga Life Sciences Inc., a joint venture between McMaster University and Circassia Ltd., a clinical-stage biopharmaceutical company located in the UK, to commercialize intellectual property.

Dr. Mark Larché, Professor, Division of Clinical Immunology & Allergy and a Canada Research Chair in Allergy & Immune Tolerance at McMaster University, spearheaded Adiga’s work related to the identification of key T-cell epitopes, which helped to bring novel allergic rhinitis vaccines to the marketplace.

Building on the success of this partnership, Dr. Anne Ellis, AllerGen Investigator and Assistant Professor at Queen’s University, performed clinical trials in allergic rhinitis (AR) at the Environmental Exposure Unit at the Kingston General Hospital and Queen’s University. This large scale AR clinical trial model utilized a controlled nasal allergen challenge.
Together with Dr. Helen Neighbour, an AllerGen investigator at McMaster University, she has secured a partnership with Adiga Life Sciences. This emerging partnership builds upon initial AllerGen-funded research aimed at performing clinical trials that test new therapeutics in the treatment of AR. The outcomes of this initial investment informed the optimization of NAC protocols which may serve as the Standard Operating Procedures (SOP) for AR within the scope of the Clinical Investigator Collaborative (CIC) led by Dr. Paul O’Byrne, McMaster University.

This initial success in matching the AR-CIC to an industry partner indicates that this collaborative and its SOPs represent useful clinical research tools for industry partners with novel therapeutics requiring proof-of-concept evaluations. These SOPs will help partner organizations determine clinical effectiveness and identify novel diagnostic biomarkers of allergic inflammation, allergic rhinitis and asthma. This is a unique niche in which Canada is poised to become a global leader.

Moving forward, Dr. Ellis’ research team will explore opportunities to develop a national platform and SOPs for industry-partnered clinical trials of novel therapeutics in allergic rhinitis by validating novel, “patient-centred” biomarkers of allergic airways diseases, including rhinitis and asthma.

**AllerGen’s Path to Commercialization**

AllerGen encourages its investigators to think like entrepreneurs and leave a legacy of research results that can become commercially useful and/or improve the lives of Canadians as well as asthma and allergy sufferers globally. AllerGen has made considerable investments in fast-tracking the establishment of new companies and incubating start-up companies. By assisting in the development and commercialization of inventions, AllerGen helps make its researchers’ “spin-offs” sustainable.
Since 2005, 190 AllerGen trainees have graduated from their respective programs. Forty-eight percent are employed in one of four sectors: University (49%), Industry (33%), Government (12%), and Hospital (6%).
AllerGen creates value-added opportunities for the training, education and professional development of HQP, students and new professionals who strengthen Canada’s knowledge base, innovative capacity and workforce productivity.

AllerGen’s capacity building initiatives offer world-class programs and unique opportunities for Network trainees, young professionals, research associates and technicians.

Since 2005, 190 AllerGen trainees have graduated from their respective programs. Forty-eight percent are employed in one of four sectors: University (49%), Industry (33%), Government (12%), and Hospital (6%). Forty-one percent are continuing their education. The remaining 11% are in transition.

**AllerGen Students and New Professionals Network (ASPN)**

The ASNPN comprises students (undergraduate to postdoctoral fellow), research associates, technicians and new professionals beginning their careers in allergy and asthma research. Trainees working on an AllerGen-funded project and AllerGen award recipients automatically become AllerGen HQP and part of the ASNPN Network. Individuals not directly working on an AllerGen project may apply to become an ASNPN member and access the associated benefits. Currently there are 446 ASNPN members – 323 active HQP involved in network research, plus 123 new...
professionals and students not directly involved in AllerGen projects, who are participating in AllerGen networking and professional development opportunities.

### CAIDATI Awards

Over the past year, 11 outstanding students from seven academic institutions across Canada were selected to receive AllerGen’s CAIDATI awards. AllerGen issued $175,080 in student support for research with potential to reduce the morbidity, mortality and socio-economic burden of allergic and related immune diseases. This funding was matched 1:1 by partner organizations from across Canada for a total award value of $350,160. The students awarded AllerGen-matched funding attended the following institutions:

<table>
<thead>
<tr>
<th>Institution</th>
<th>AllerGen Funding</th>
<th>Total Award Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dalhousie University</td>
<td>$2,980</td>
<td>$5,960</td>
</tr>
<tr>
<td>McGill University</td>
<td>$17,500</td>
<td>$35,000</td>
</tr>
<tr>
<td>McMaster University</td>
<td>$44,120</td>
<td>$88,240</td>
</tr>
<tr>
<td>Queen’s University</td>
<td>$35,000</td>
<td>$70,000</td>
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<tr>
<td>The Hospital for Sick Children</td>
<td>$17,500</td>
<td>$35,000</td>
</tr>
<tr>
<td>University of Alberta</td>
<td>$20,000</td>
<td>$40,000</td>
</tr>
<tr>
<td>University of British Columbia</td>
<td>$37,980</td>
<td>$75,960</td>
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</tbody>
</table>

#### Dalhousie University

**Oral Exposure to a TLR2 Agonist Interferes with Oral Tolerance Induction to PB in a TLR-2 Dependent Manner**

*Trainee: Kaitlyn Carson*

- **AllerGen Contribution**: $2,980
- **Total Award Value**: $5,960

*Supervisor: J. Marshall, Professor and Head Microbiology & Immunology*

#### McGill University

**Genetic Dissection of Phenotypes Defining Susceptibility to Allergic Asthma: Airways Hyperresponsiveness and Atopy**

*Trainee: Cynthia Kanagaratham*

- **AllerGen Contribution**: $17,500
- **Total Award Value**: $35,000

*Supervisor: D. Radzioch, Professor, Experimental Medicine, Department of Human Genetics*

#### McMaster University

**Early Life Microbial Influence and the Imprinting of Allergic or Tolerance Phenotypes**

*Trainee: Katherine Arias*

- **AllerGen Contribution**: $26,620
- **Total Award Value**: $53,240

*Supervisor: M. Jordana, Professor, Pathology and Molecular Medicine; Head, Respiratory Diseases and Allergy Division Centre for Gene Therapeutics; Tier 1 Canada Research Chair in Immunobiology of Respiratory Diseases and Allergy*
Queen’s University
The Role of T regulatory Cells in Allergic Asthma
Trainee: Michelle North
AllerGen Contribution .....................$35,000
Total Award Value .......................$70,000
Supervisor: A. Ellis, Assistant Professor,
Department of Biomedical and Molecular Sciences; Associate Professor of Medicine, Microbiology and Immunology

University of British Columbia
Traffic-Related Air Pollution as a Risk Factor for Childhood Allergic Rhinitis, And the Role Played By Genetic Variability
Trainee: Elaine Fuertes
AllerGen Contribution .....................$17,500
Total Award Value .......................$35,000
Supervisor: M. Brauer, Professor, School of Population and Public Health, Faculty of Medicine, Department of Medicine & Atmospheric Science Programme
Supervisor: C. Carlsten, Assistant Professor and Chair in Occupational and Environmental Lung Disease

How Does the Timing of Home Environmental Tobacco Smoke and Particulate Exposure during Childhood Affect the Age of Asthma Development
Trainee: Elinor Simons
AllerGen Contribution .....................$17,500
Total Award Value .......................$35,000
Supervisor: T. To, Senior Scientist, Child Health Evaluative Sciences; Professor Dalla Lana Graduate School of Public Health, Institute of Health Policy and Management and Evaluation, Institute of Medical Sciences

University of Alberta
The Impact of Antibiotic Use, Caesarean Section Delivery and Formula Feeding on Infant Microbiota
Trainee: Meghan Azad
AllerGen Contribution .....................$20,000
Total Award Value .......................$40,000
Supervisor: A. Kozyrskyj, Research Chair, Maternal-Child Health and the Environment; Associate Professor in the Department of Pediatrics, Faculty of Medicine

How CLA Treatment Can Modulate Lipid Raft Formation Affecting RSV-Induced Inflammation
Trainee: Janet Xu
AllerGen Contribution .....................$2,980
Total Award Value .........................$5,960
Supervisor: D. Dorscheid, Associate Professor of Medicine, The James Hogg Research Centre, Institute for Heart + Lung Health St. Paul’s Hospital

McMaster University - Delia Heroux, Pia-Lauren Reece, Steven Smith, Claudia Hui
Queen’s University - Michelle North

American Academy of Allergy, Asthma and Immunology (AAAAI)
(March 2-6, 2012), San Francisco, CA
McMaster University - Delia Heroux, Pia-Lauren Reece, Steven Smith, Claudia Hui
Queen’s University - Michelle North

American Thoracic Society Annual General Meeting (May 13-18, 2011), Denver, CO
McMaster University - Alba Llop
University of Alberta - Meghan Azad
University of British Columbia - Jianqing He, Sarah Kam

AllerGen Travel Awards
Over the past fiscal year, AllerGen funded 26 travel applications, supporting 18 trainees to participate in 13 national and international events. Travel awards were issued to the following trainees:

American Academy of Allergy, Asthma and Immunology (AAAAI)
(March 2-6, 2012), San Francisco, CA
McMaster University - Delia Heroux, Pia-Lauren Reece, Steven Smith, Claudia Hui
Queen’s University - Michelle North

American Thoracic Society Annual General Meeting (May 13-18, 2011), Denver, CO
McMaster University - Alba Llop
University of Alberta - Meghan Azad
University of British Columbia - Jianqing He, Sarah Kam

AllerGen NCE Inc.
Anaphylaxis Canada Spring Conference (May 7, 2011), Toronto, ON
McMaster University - Bonnie Chow

Association of Clinical Research Professionals Annual Conference (April 30 - May 3, 2011), Seattle, WA
McMaster University - Heather Campbell, Karen Howie

Canadian Association of Geographers Annual Meeting (May 31-June 4, 2011), Calgary, AB
McMaster University - Daniel Harrington

Canadian Respiratory Conference (April 28-30, 2011), Niagara Falls, ON
University of Toronto - Michelle North

Injury and Repair Mechanisms in Chronic Airways Disease International Conference (April 6-8, 2011), London, UK
University of Manitoba - Pawan Sharma

International Eosinophil Society Research Symposium (June 21-25, 2011), Quebec City, QC
McMaster University - Claudia Hui, Steven Smith, Pia-Lauren Reece
University of British Columbia - Steven Maltby

International Human Microbiome Congress (March 19-21, 2012), Paris, France
University of Toronto - Tedd Konya

International Medical Geographers Symposium (July 10-15, 2011), Durham, UK
McMaster University - Bonnie Chow, Daniel Harrington

International Society for Environmental Epidemiology Conference (September 13-16, 2011), Barcelona, Spain
University of British Columbia - Elaine Fuertes

International Society for Exposure Science Annual Meeting (October 23-27, 2011), Baltimore, MD
University of British Columbia - Rongrong Wang

Spring School of Population Genomics and Genetic Epidemiology (May 30-June 3, 2011), Montreal, QC
University of British Columbia - Elaine Fuertes

AllerGen - Michael Smith Foundation for Health Research (MSFHR) Trainee Awards
In December 2010, AllerGen and MSFHR signed a MOU to jointly fund applicants who qualify for MSFHR’s Trainee Award Competitions. This partnership leverages provincial research funding in British Columbia to support additional research trainees within the AllerGen Network. AllerGen’s British Columbian genetics, environment, microbiome and biomarkers research team forms a major research cluster within the Network.

Drs. Jeremy Hirota and Francesco Sava were recipients of the 2011 MSFHR/AllerGen Post-doctoral Fellow Research Trainee Awards. Dr. Hirota is studying the role of the airway epithelium NLRP3 inflammasome in asthma pathogenesis with AllerGen Principal Investigator, Dr. Darryl Knight at the James Hogg iCAPTURE Centre, University of British Columbia. Dr. Sava is conducting research on diesel exhaust as an adjuvant to allergen-mediated oxidative stress and immune response in the asthmatic lung at Vancouver General Hospital with AllerGen Principal Investigator, Dr. Christopher Carlsten.

Fonds de recherche du Québec-Santé (FRQS) Clinician-Scientist Award
AllerGen has signed a partnership agreement with the Fonds de recherche du Québec - Santé (FRQS) to jointly support Clinical Research Scholars - Junior 1 Career Awards. The award is designed to facilitate the recruitment of qualified clinical researchers who would like to begin or continue independent careers in health-care research and ensure that high-calibre clinician-scientists are available to meet the needs of universities, hospitals and industry. Research projects must be within the scope of AllerGen’s research mandate to be eligible for support.

In 2011, two applications were reviewed; however, they were outside the scope of AllerGen’s research mandate and not eligible for AllerGen support.
Mitacs Internships and Trainee Capacity Building Opportunities

AllerGen was the first NCE to develop a MOU formalizing its partnership with Mathematics of Information Technology and Complex Systems (Mitacs). Mitacs offers several programs relevant to AllerGen trainees including the *Accelerate Internship* program for which AllerGen offers matching financial support. Four-month and eight-month internships are available at the graduate and postdoctoral levels, working with supervising professors and industry to help ensure that the research innovations developed in Canadian universities are utilized by Canadian companies. With the addition of a non-industry health pilot initiative, government and not-for-profit agencies are also eligible for internship placements.

AllerGen Trainees Take Top Honours at the 2011 Canadian Society for Allergy and Clinical Immunology (CSACI) Annual Scientific Meeting Poster Competition

**Meghan Azad**, a postdoctoral fellow from the University of Alberta, won first place in the Best Poster Awards - Asthma and Allergic Rhinitis category at the CSACI Annual Scientific Meeting in Quebec City, QC in 2011 for her poster titled *Maternal diabetes amplifies the influence of maternal asthma and smoke exposure on the development of asthma in offspring.*

**Claudia Hui**, a PhD candidate from McMaster University, won second place in the Best Poster Awards - Basic science/Clinical Immunology category for her poster titled *Effects of thymic stromal lymphopoietin on cord blood progenitor cell differentiation and hematopoietic cytokine receptor expression.*

**Philippe Bégin**, a Clinical Immunology and Allergy Fellow-in-Training from the Université de Montréal, won first place in the Case Reports Category at the CSACI 2011 Annual Scientific Meeting for his case study titled *A large cohort of primary familial cryofibrinogenemia originates from the Magdalen Islands.*

In addition, AllerGen and CSACI co-sponsored a Young Allergy Professionals Networking Reception hosted by AllerGen investigator, Dr. Anne Ellis, Assistant Professor at Queen’s University. The reception provided a unique networking opportunity for allergists in training, prominent practitioners and AllerGen researchers. It also offered AllerGen an opportunity to promote its many training opportunities to future Canadian Clinical Immunology and Allergy sub-specialists.

AllerGen Annual Conference – Student Poster Competition

The AllerGen student poster competition takes place each year in conjunction with the annual *Innovation from cell to society* research conference. The 2012 competition took place at the Royal York Hotel in Toronto, Ontario. Fifty-four trainees and new professionals representing 14 universities and affiliated institutions participated. The trainees were judged on the “what, so what and now what” of their research during one-minute lightning round “elevator pitches,” plus subsequent poster adjudication. The top two poster presenters in each research program area advanced and made 10-minute oral presentations the following day. In support of AllerGen’s commitment to attracting the top undergraduate students to the Network, for the first time, the top two undergraduate posters were recognized with cash awards and certificates. In total, $2,800 was awarded to poster competition winners.
AllerGen Student Poster Award Winners 2012

Program A: Gene-Environment Interactions
1st Place: Meghan Azad, University of Alberta,
Exclusive Breastfeeding Protects Against Clostridium Difficile Colonization by Promoting Lower Relative Abundance of Lachnospiraceae in Gut Microbiota: Implications for Atopic Disease?, supervised by Dr. Anita Kozyrskyj.

2nd Place: Huan Shu, Simon Fraser University,
Potential Sources of Phthalate Exposure in the Vancouver CHILD Study at Three Months of Age, supervised by Dr. Tim Takaro.

Program B: Diagnostics and Therapeutics
1st Place: Jasemine Yang, University of British Columbia,
Characterization of IL-13 Receptors in the Asthmatic Airway epithelium, supervised by Dr. Delbert Dorscheid.

2nd Place: Bernard Lo, University of British Columbia,
The Function of CD34 in Pulmonary Fibrosis, supervised by Dr. Kelly McNagny.

Program C: Public Health, Ethics, Policy and Society
1st Place: Lianne Soller, McGill University,
The Prevalence of Food Allergy Among Aboriginals in Canada, supervised by Dr. Ann Clarke.

2nd Place: Bonnie Chow, University of Waterloo,
Determinants of Purchasing Behaviours of Allergy Affected Canadian Consumers: A Mixed Methods Approach, supervised supervised by Dr. Susan Elliott.

Undergraduate (Top Two Scores)

Megan Alton, McGill University,
Postpartum Depression: An Independent Predictor of Wheeze in Preschool Girls
Supervised by Dr. Anita Kozyrskyj.

Kaitlyn Carson, Dalhousie University,
The Effect of Toll-Like Receptor Activation During the Induction of Oral Tolerance in Mice
Supervised by Dr. Jean Marshall.
AllerGen Annual Trainee Symposium

The Sixth Annual Trainee Symposium was held in Halifax, Nova Scotia from June 5 to 7, 2011. Forty-four trainees participated in this ASNPN-organized event, which featured professional development in areas not typically offered within their regular clinical or academic training programs.

The symposium featured talks by experts in several fields of interest to researchers-in-training including knowledge translation, strategic planning, mentoring, grant writing, research ethics and oral presentation skills. The symposium also included a career panel featuring government and academic speakers and a presentation about Allergy Testing: The Underbelly of Alternate Medicine by Greg Rex, MD, specialist in Pediatric Allergy and Clinical Immunology, IWK Health Centre, Halifax, Nova Scotia.

AllerGen Emerging Clinician-Scientist Research Fellowship Award

The goal of the AllerGen Emerging Clinician-Scientist Research Fellowship is to enable Canadian Clinical Immunologists and Allergists to pursue allergy, asthma and/or anaphylaxis academic research training immediately following their Clinical Immunology and Allergy sub-specialty clinical training in order to:

- Strengthen the academic capacity of Canadian Clinical Immunology and Allergy sub-specialists,
- Increase Canadian capacity for translational Clinical Immunology and Allergy research, and
- Facilitate enhanced patient care through excellence in basic and clinical allergy and related immune disease research.

Eligible candidates are Canadian citizens or permanent residents who are clinicians enrolled in or who have completed Clinical Immunology and Allergy sub-specialty training at a Canadian academic health sciences centre. Candidates may apply 18 months prior to and 18 months after completion of their Clinical Immunology and Allergy sub-specialty training.
Preference is given to applicants whose host institution can confirm that the applicant has been identified for a junior faculty position following successful completion of the Fellowship and/or provincial follow-on research funding.

**Network Graduates and Employment**

Individual accomplishments of AllerGen graduates over the past year include:

**Jianqing He** is now Assistant Professor at the Chengdu University in China. Prior to this appointment, he was a postdoctoral fellow supervised by AllerGen researcher Dr. Chris Carlsten, University of British Columbia.

After completing his postdoctoral fellowship under the supervision of AllerGen program leader and Principal Investigator Dr. Dean Befus, University of Alberta, **Rene Dery** secured employment as a Research Scientist and Alberta Innovates R&D Associate at Paladin Biosciences, a division of Paladin Labs Inc.

**Nicole Gregory** is employed as a Marine Planner at the North Coast-Skeena First Nations Stewardship Society in Prince Rupert, BC. Prior to completing her Masters degree at Dalhousie University, she worked under the supervision of AllerGen Investigator Dr. Heather Castleden on the AllerGen project *Engaging Aboriginal families affected by allergies and asthma.*

**Tracy Pitt** is now a practicing clinician in Toronto. She completed her Allergy and Clinical Immunology training at the University of Manitoba and is a member of the Canadian Society of Allergy and Clinical Immunology; the American College of Allergy, Asthma & Immunology; and the American Academy of Allergy, Asthma & Immunology where she serves as an Anaphylaxis Committee member. Dr. Pitt worked on AllerGen-funded projects under the supervision of AllerGen Investigators Drs. Allan Becker (University of Manitoba) and PJ Subbarao (University of Toronto/Hospital for Sick Children).
## A Snapshot of AllerGen HQP 2011-2012

### Trainees, New Professionals, ASNPN Members, Research Associates and Technicians by Province

<table>
<thead>
<tr>
<th>Province</th>
<th>Number</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Ontario</td>
<td>163</td>
<td>36.75%</td>
</tr>
<tr>
<td>British Columbia</td>
<td>86</td>
<td>19%</td>
</tr>
<tr>
<td>Alberta</td>
<td>77</td>
<td>17%</td>
</tr>
<tr>
<td>Quebec</td>
<td>51</td>
<td>11.5%</td>
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<tr>
<td>Manitoba</td>
<td>42</td>
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<tr>
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<tr>
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<tr>
<td>Saskatchewan</td>
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<td>0.75%</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>3</td>
<td>0.75%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>446</strong></td>
<td><strong>100%</strong></td>
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### Level of Study

- Post-doctoral Studies: 51
- PhD: 54
- Masters: 59
- Medical School: 14
- Undergraduates: 46
- Research Associates and Technicians: 222

### Trainees, New Professionals, ASNPN Members, Research Associates and Technicians by University

<table>
<thead>
<tr>
<th>University</th>
<th>Number</th>
<th>Percentage</th>
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<tr>
<td>University of British Columbia</td>
<td>81</td>
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<tr>
<td>McMaster University</td>
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<td>University of Alberta</td>
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<td>Queen's University</td>
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<td>Dalhousie University</td>
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<tr>
<td>Université Laval</td>
<td>14</td>
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<tr>
<td>Affiliated Institutions and Organizations</td>
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<tr>
<td>University of Calgary</td>
<td>9</td>
<td>2%</td>
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<tr>
<td>Université de Montréal</td>
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<tr>
<td>Outside Canada</td>
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<td>1.25%</td>
</tr>
<tr>
<td>Simon Fraser University</td>
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<tr>
<td>University of New Brunswick</td>
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<td>0.75%</td>
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<td>University of Western Ontario</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>446</strong></td>
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</table>

### Trainees by Research Program

- Diagnostics & Therapeutics: 131 (29%)
- Gene-Environment Interactions: 186 (42%)
- Public Health, Ethics, Policy & Society: 98 (22%)
- More than One Programme: 5 (1%)
- Not Identified with a Programme: 26 (6%)

---

AllerGen NCE Inc.
AllerGen has deepened existing international research relationships and increased the global capacity building opportunities it has developed for Network trainees.
## AllerGen NCE Inc. Financial Summary 2011-2012

### Financial Overview

#### AllerGen NCE Inc. Financial Summary 2011-2012

<table>
<thead>
<tr>
<th>Revenues (Cash and In-Kind)</th>
<th>2010-2011 (Year 6)</th>
<th>Percentage</th>
<th>2011-2012 (Year 7)</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>NCE Award</td>
<td>5,216,500</td>
<td>33.9%</td>
<td>5,251,470</td>
<td>87%</td>
</tr>
<tr>
<td>Health Canada Funding (CMP 3)</td>
<td>1,489,599</td>
<td>9.7%</td>
<td>193,504</td>
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<td>Non-NCE Funds to Administrative Centre*</td>
<td>118,075</td>
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<td>Non-NCE Funds To Research*</td>
<td>8,578,927</td>
<td>55.7%</td>
<td>484,753</td>
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<td><strong>Total</strong></td>
<td><strong>15,403,101</strong></td>
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<table>
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<tr>
<th>Expenditures (Cash)</th>
<th>2010-2011 (Year 6)</th>
<th>Percentage</th>
<th>2011-2012 (Year 7)</th>
<th>Percentage</th>
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<tr>
<td>Research Programs</td>
<td>4,629,009</td>
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<td>6,331,284</td>
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<td>Networking</td>
<td>638,628</td>
<td>9.0%</td>
<td>803,713</td>
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<tr>
<td>Strategic Initiatives and Training</td>
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<td>4.1%</td>
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<td>Communications</td>
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<td>14,151</td>
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<td>Administration</td>
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<td>21.3%</td>
<td>1,480,132</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>7,080,849</strong></td>
<td><strong>100.0%</strong></td>
<td><strong>8,899,537</strong></td>
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<th>Committed Amounts for Future research</th>
<th>2010-2011 (Year 6)</th>
<th>Percentage</th>
<th>2011-2012 (Year 7)</th>
<th>Percentage</th>
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<tr>
<td>NCE</td>
<td>5,461,316</td>
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<td>1,474,270</td>
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<tr>
<td>Not-for-Profit</td>
<td>-587,421</td>
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<td>259,706</td>
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<table>
<thead>
<tr>
<th>All Revenue Sources (Cash and In-Kind) 2011/12 NCE &amp; Non NCE</th>
<th>2011/12 NCE &amp; Non NCE</th>
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<tr>
<td>NCE (41.25%)</td>
<td>$5,251,470</td>
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<tr>
<td>Federal (21.97%)</td>
<td>$2,796,791</td>
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<td>Industry (15.56%)</td>
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<td>University (12.31%)</td>
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<td>Provinces (4.68%)</td>
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<td>Other Sources (2.39%)</td>
<td>$303,740</td>
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<td>Not-for-Profit (1.59%)</td>
<td>$202,562</td>
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<td>Hospital (0.26%)</td>
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<td><strong>Total</strong></td>
<td><strong>$12,731,452</strong></td>
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* Includes cash and in-kind contributions

In 2011-12, AllerGen’s income from all sources (cash and in-kind) was $12,731,452. Of this amount, $5,251,470 was provided as a base grant from the NCE directorate.

For every dollar that AllerGen received from the NCE program in 2011-12, an additional $1.43 was secured from other sources.

This represents a total leveraging of $7,479,982 on the NCE base grant of $5,251,470.
The Canadian Group on Food Allergy Research (CanGoFAR) has continued to build on two previous AllerGen-funded studies that aim to determine food allergy prevalence amongst Canadians.
# Network Participants 2011-2012

## Researchers and Collaborators (n=190)

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
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<tbody>
<tr>
<td>Pascal Hickey</td>
<td>Adiga Life Sciences</td>
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<tr>
<td>David Lynn</td>
<td>Agriculture and Food Development Authority (Ireland)</td>
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<tr>
<td>Shawna Mcghan</td>
<td>Alberta Asthma Centre</td>
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<tr>
<td>Mary Lewis Allen</td>
<td>Allergy, Asthma Information Association (AAIA)</td>
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<td>Lilly Byrtus</td>
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<tr>
<td>Matthew Nisbet</td>
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<tr>
<td>Laurie Harada</td>
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<tr>
<td>Yvon Cormier</td>
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<td>Diane Dubord</td>
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<tr>
<td>Oxana Latycheva</td>
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<tr>
<td>Zave Chad</td>
<td>Canadian Allergy, Asthma and Immunology Foundation</td>
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<tr>
<td>Alan James</td>
<td>Canadian Society for Epidemiology and Biostatistics</td>
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<tr>
<td>Arturas Petronis</td>
<td>Centre for Addiction and Mental Health</td>
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<td>Tom Pfeifer</td>
<td>Centre for Drug Research and Development</td>
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<tr>
<td>Maike Pincus</td>
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<td>Chris Sarin</td>
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<td>Sarah Garside</td>
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AllerGen NCE Inc.
<table>
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</tr>
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<td>Michael Brauer</td>
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<td>Ryan Brinkman</td>
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<td>Donald Cockcroft</td>
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<td>Gary Liss</td>
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<td>Wendy Wen-Yi Lou</td>
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<td>Urgences-santé Québec</td>
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<td>Utrecht University</td>
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### Researchers and Collaborators by University and other Canadian and International Organizations

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<tr>
<th>University and Organizations</th>
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<tr>
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<tr>
<td>Université du Québec à Chicoutimi</td>
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<tr>
<td>University of New Brunswick</td>
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<td>All Canadian Institutions</td>
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<td>All Canadian Institutions and other Canadian and International Organizations</td>
<td>189</td>
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</table>

### Participating AllerGen Network Members (n=23)

- Dalhousie University
- Centre de recherche du CHUM
- Environment Canada
- Hôpital du Sacré-Coeur de Montréal
- Institut universitaire de cardiologie et de pneumologie de Québec
- McGill University
- McMaster University
- Queen's University
- Simon Fraser University
- St. John's Research Institute, India
- St. Joseph's Healthcare, Hamilton
- St. Michael's Hospital, Toronto
- The Hospital for Sick Children
- The McGill University Health Centre (MUHC)
- Université du Québec à Chicoutimi
- University of Alberta
- University of British Columbia
- University of Calgary
- University of Guelph
- University of Manitoba
- University of Saskatchewan
- University of Toronto
- University of Waterloo
Canadian Hospitals/Research Institutes/Networks: 29
Alberta Centre for Child, Family & Community Research
Atlantic Aboriginal Health Research Program
Canadian Institutes of Health Research
Canadian Network for Respiratory Care
Canadian Society for Epidemiology and Biostatistics
Centre de recherche du CHUM – Hôpital Saint-Luc
Centre for Addiction and Mental Health
Centre for Drug Research and Development
Centre of Excellence for the Prevention of Organ Failure
COPD and Asthma Network of Alberta
CORE: Collaboration for Outcomes Research & Evaluation
Hôpital du Sacré-Coeur de Montréal
Hôpital Sainte-Justine
Hospital for Sick Children
iCapture Centre
Institut universitaire de cardiologie et de pneumologie de Québec
IWK Health Centre
Kingston General Hospital
Manitoba ACADRE-NEAHR Network
Manitoba Institute of Child Health
Mount Sinai Hospital, Toronto
Network Environments Aboriginal Health Research (NEAHR)
Northern Alberta Institute of Technology
Ontario Institute for Cancer Research
St. Joseph’s Hospital, Hamilton
St. Michael’s Hospital, Toronto
Urgences-santé Québec
Winnipeg Health Sciences Centre

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