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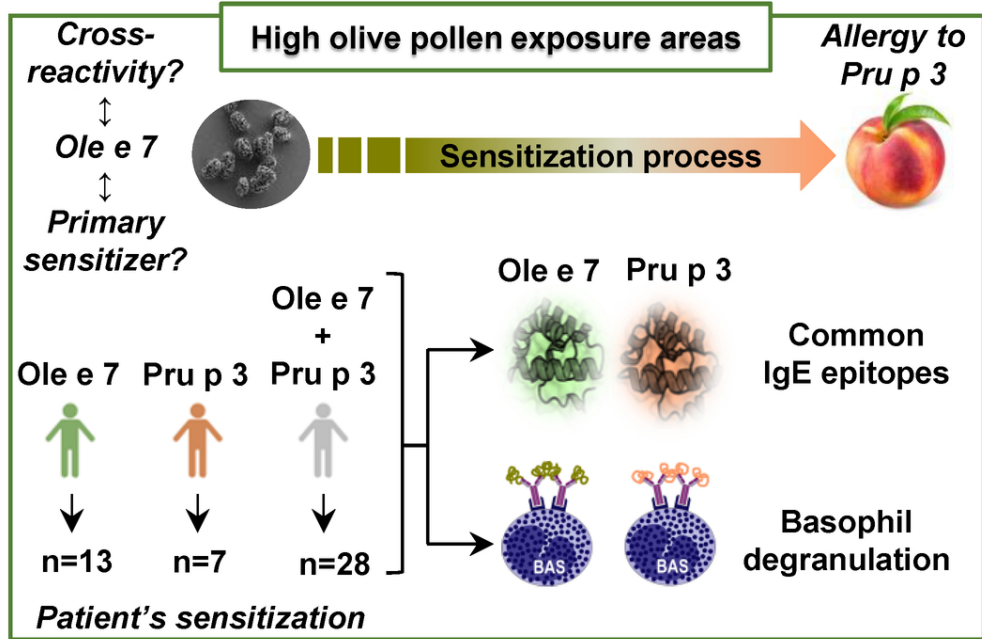
New insights into the sensitization to nonspecific lipid transfer proteins from pollen and food: New role of allergen Ole e 7

Carmen Oeo-Santos, Ana Navas, Sara Benedé, Berta Ruíz-León, Araceli Díaz-Perales , Lothar Vogel, Carmen Moreno-Aguilar, Aurora Jurado, Mayte Villalba, Rodrigo Barderas.

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## **New insights into the sensitization to non-related nsLTPs from pollen and food: new role of the allergen Ole e 7**

C. Oeo-Santos, A. Navas, S. Benedé, B. Ruíz-León, A. Díaz-Perales, I. Vogel, C. Moreno-Aguilar, A. Jurado, M. Villalba and R. Barderas.

1. Ole e 7 cross-reacts with LTPs from pollen and food, specifically with peach and pear.
2. Common IgG and IgE epitopes were identified between Ole e 7 and Pru p 3 despite their low amino-acid sequence identity.
3. Ole e 7 could act as primary sensitizer in regions with high olive-pollen exposure, leading to Pru p 3 sensitization.

For Peer Review

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3 **1 New insights into the sensitization to non-related nsLTPs from pollen and food:**  
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5 **2 new role of the allergen Ole e 7.**  
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1  
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3 37 *Abstract*  
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5 38 **Background:** Ole e 7 is a non-specific lipid transfer protein (nsLTP) from olive pollen, one  
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7 39 of the main allergenic pollens worldwide. This allergenic nsLTP is responsible for severe  
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9 40 symptoms in regions with high olive pollen exposure, where many Ole e 7-sensitized  
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11 41 patients exhibit a co-sensitization to the peach nsLTP, Pru p 3. However, there is no  
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13 42 evidence of cross-reactivity which explains this observed co-sensitization. Therefore, the  
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15 43 purpose of this study was to explore the relationship between Ole e 7 and Pru p 3.

16 44 **Methods:** A total of 48 patients sensitized to Ole e 7 and/or Pru p 3 were included in the  
17  
18 45 study. Specific IgE serum levels were measured by ImmunoCAP 250 and ELISA.  
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20 46 Inhibition assays were performed to determine the existence of cross-reactivity between  
21  
22 47 both nsLTPs. Allergic response was analyzed **ex vivo** (Basophil Activation Test) and *in*  
23  
24 48 *vitro* (RBL-2H3 mast cell model).

25 49 **Results:** Common IgG and IgE epitopes were identified between both allergens. **IgE-**  
26  
27 50 **binding inhibition** was detected in Ole e 7-monosensitized patients using rPru p 3 as  
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29 51 inhibitor, reaching inhibition values of 25 and 100%. **Ex vivo** and *in vitro* assays revealed a  
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31 52 response against rPru p 3 in four (31%) Ole e 7-monosensitized patients.

32 53 **Conclusions:** Our results suggest that Ole e 7 could play a new role as primary sensitizer  
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34 54 in regions with high olive pollen exposure, leading to the peach nsLTP sensitization. This  
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36 55 co-sensitization process would occur because of the cross-reactivity between Ole e 7 and  
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38 56 Pru p 3 observed in some allergic patients.  
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42 57  
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44 58 *Short title*

45 59 **New insights into non-related nsLTPs sensitization**  
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47 60  
48 61 *Keywords*

49 62 **Cross-reactivity, Non-specific Lipid Transfer Protein, Olive pollinosis, Peach allergy,**  
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51 63 **Primary sensitization.**  
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53 64  
54 65 *Abbreviations*

55 66 **BAT- Basophil Activation Test**

56 67 **ELISA- Enzyme-Linked ImmunoSorbent Assay**

57 68 **nsLTP- Non-specific Lipid Transfer Protein**

58 69 **SPT- Skin Prick Test**

59 70 **SEM- Standard Error of the Mean**

60 71 **WB- Western Blotting**

## 72 Introduction

73 The huge development of proteomics and molecular biology techniques in the last years  
74 has boosted the identification of specific proteins responsible for the allergic responses with the  
75 aim to improve the diagnosis and immunotherapy protocols of the pathology. The disease  
76 exacerbation is dependent on the severity of allergen-specific symptoms or whether allergy is  
77 caused by a genuine sensitization (primary or **species**-specific) or by cross-reactivity (1). Cross-  
78 reactivity is due to the existence of IgEs, which recognize the same epitope in allergens from  
79 different biological sources (2). These reactions have been widely described among many  
80 allergenic protein families, including pollen and food allergens (3-5).

81 Non-specific Lipid Transfer Proteins (nsLTPs) comprise a protein family of 7-9 kDa,  
82 widely distributed throughout the plant kingdom (6). Notably, several members of the nsLTP  
83 family are considered main allergens in the Mediterranean area. Among them, Pru p 3, the  
84 major allergen from peach, is one of the most frequently recognized fruit allergens and plays a  
85 relevant role in cross-reactivity, even with pollen LTPs (7-10). Additionally, Pru p 3 behaves as  
86 the primary sensitizer in the development of food allergy to *Rosaceae* species in regions where  
87 the presence of birch is rare and the involvement of Bet v 1-like allergens is infrequent, such as  
88 in southern Europe (3, 11-13). However, it has been described that Pru p 3 could lose its  
89 primary sensitizer role in regions where birch is scarce and the presence of other pollens is  
90 intense (14, 15).

91 Olive tree pollinosis is worldwide increasing due to its extensive cultivar. Indeed, it is a  
92 main allergenic source in California (US), China, India, Australia and South America beyond  
93 the Mediterranean Basin, where this pollen has been extensively studied (16). Fourteen olive  
94 pollen allergens have been identified so far (16-18). Among them, the nsLTP Ole e 7 is a major  
95 allergen associated to severe clinical symptoms in regions with high levels of olive pollen  
96 counts such as in Andalusia (Spain) (19, 20). **In this area, some allergic patients to Ole e 7 show  
97 clinical symptoms to *Rosaceae* fruits, being the co-sensitization to Pru p 3 frequently observed.**

98 Despite the 31% of amino acid sequence identity reported between Ole e 7 and Pru p 3  
99 (21), a co-sensitization to these two LTPs has been previously described in other Spanish

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3 100 regions (22). Therefore, an immunological relationship between Ole e 7 and Pru p 3 may not be  
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5 101 excluded, with Ole e 7 as the primary sensitizer in the development of peach allergy, especially  
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7 102 in areas with high exposure to olive pollen. However, the underlying causes of this co-  
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9 103 sensitization have not yet been elucidated.

11 104 In this context, the aim of the present work was to explore the role of Ole e 7 in the  
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13 105 sensitization process to peach by means of Pru p 3, in those regions with olive pollen counts  
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15 106 over 5000 grains/m<sup>3</sup>, to get further insights into the underlying causes of a possible co-  
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17 107 sensitization. To this end, we performed *in vitro* analysis of the IgE response to both allergens  
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19 108 by ELISA and WB, followed by *ex vivo* and *in vitro* cellular response analyses in basophils and  
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21 109 the RBL-2H3 mast cell line model.

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24 110 We reported for the first-time evidences of cross-reactivity between Ole e 7 and Pru p 3,  
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26 111 which had not yet been examined. Moreover, we identified four Ole e 7-monosensitized patients  
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28 112 who developed a cellular response against Pru p 3, despite their unique sensitization to Ole e 7  
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30 113 by ImmunoCAP 250 and SPT. Our results suggest that Ole e 7 could behave as a primary  
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32 114 sensitizer in regions with high olive pollen exposure, leading to a secondary sensitization to Pru  
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34 115 p 3 with or without symptoms.

## 116 **Materials and Methods**

117 See the materials and methods section in this article's supporting information online for full  
118 details about protein extracts, allergens and antibodies, IgG-binding analysis, specific IgE  
119 binding to Ole e 7 and Pru p 3, cell-based allergic mediator release assays, and ELISA and WB  
120 inhibition assays.

### 121 122 *Patients*

123 The study was approved by the Ethical Committees of the Reina Sofia University  
124 Hospital, Córdoba, Spain (ref. 3033), and the Complutense University and Instituto de Salud  
125 Carlos III (CEI P49). Written informed consent was obtained from all patients. All samples  
126 were anonymously handled.

127 A total of 48 patients recruited at the Immunology and Allergy Department of the Reina  
128 Sofia University Hospital (Córdoba, Spain) with a confirmed history of allergy to olive pollen  
129 with sensitization to Ole e 7 and/or sensitization to LTP from peach (Pru p 3) were included in  
130 the study. Clinical evaluation included examination of patient history, SPT and determination of  
131 specific IgE (sIgE). The SPT was performed according to the European guidelines (23), using  
132 commercial extracts from *Olea europaea* pollen and peach (ALK-Abelló, Madrid, Spain). A  
133 positive SPT response was considered when the diameter of the wheal was 3 mm greater than  
134 that induced by the negative control. sIgE to Ole e 7 and Pru p 3 were measured by  
135 ImmunoCAP 250 (Phadia, Uppsala, Sweden) according to the manufacturer recommendations.

136 Patients were stratified according to their sensitization status by ImmunoCAP 250  
137 (Supporting Table 1). In addition, patients were also analyzed by SPT to *O. europaea* and Pru p  
138 3. Accordingly, three groups of study were defined:

139 I. Ole e 7-monosensitized patients (n=13) had sIgE to Ole e 7 >0.35 kU/L and sIgE to Pru  
140 p 3 <0.35 kU/L. In addition, a positive SPT response to *O. europaea* pollen and a  
141 negative SPT response to LTP-peach were observed in all patients.

142 II. Pru p 3-monosensitized patients (n=7) had sIgE to Pru p 3 >0.35 kU/L and sIgE to Ole e  
143 7 <0.35 kU/L. In addition, a positive SPT response to Pru p 3 was observed in 71.43%  
144 of patients and a negative SPT to *O. europaea* pollen in all patients.

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3 145 III. Ole e 7 and Pru p 3-bisensitized patients (n=28) had a sIgE level >0.35 kU/L to both  
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5 146 allergens. In addition, 60.71% of these patients showed a positive SPT response to Pru p  
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7 147 3 and 92.86% to *O. europaea* pollen.  
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9 148 Patients sensitized to Ole e 7 exhibited rhinoconjunctivitis and bronchial asthma due to the  
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11 149 exposure to olive pollen. Patients sensitized to Pru p 3 had a clinical history of allergic reactions  
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13 150 following the ingestion of *Rosaceae* fruits. Symptoms of food allergy included oral allergy  
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15 151 syndrome (OAS), urticaria/angioedema, gastrointestinal symptoms or anaphylaxis. None of the  
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17 152 patients had been treated with immunotherapy for the last three years before the inclusion in the  
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19 153 study or was being treated with active immunotherapy.  
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## 154 **Results**

### 155 *Ole e 7 displays IgE-cross-reactivity with nsLTPs from food-derived extracts*

156 Previous studies have described cross-reactions between several LTPs from different  
157 biological sources. Nevertheless, **the role of Ole e 7** in these processes has not been clarified due  
158 to the low amount of natural Ole e 7 allergen obtained after its purification. The successful  
159 expression of Ole e 7, whose primary amino acid sequence was obtained by proteomics and  
160 retains the structural, allergenic and antigenic properties of the natural allergen (17), has enabled  
161 a deeper analysis of the cross-reactivity of Ole e 7 with other LTPs. First, we surveyed different  
162 pollen and food-derived extracts by an ELISA inhibition test to determine whether any LTP  
163 could cross-react with Ole e 7. To this end, six pollen and ten food-derived extracts were used  
164 as inhibitors of the IgE-binding to Ole e 7 (Fig 1A, B). Regarding pollen extracts, *O. europaea*  
165 used as control of the assay was almost able to completely inhibit the IgE-binding to Ole e 7. In  
166 addition, other members from the Oleaceae family showed significant inhibition values: 80% *L.*  
167 *vulgare* from Ligustrum genus, 56% *S. vulgaris* from Syringa genus and 65% *F. excelsior* from  
168 Fraxinus genus (Fig 1A). **Moreover**, the highest significant inhibition with food-derived extracts  
169 was observed **with** peach (*P. persica*) and pear (*P. communis*) extracts as inhibitors, with  
170 significant inhibition values of 67 and 52% respectively (Fig 1B).

171 These results suggest the existence of cross-reactions between Ole e 7 and LTPs from  
172 pollen and food-derived extracts.

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### 174 *Ole e 7 and Pru p 3 share common IgG epitopes*

175 We next focused the study on the potential LTP pollen-food cross-reactivity between  
176 Ole e 7 and Pru p 3 because of their clinical relevance, even though they possess low amino acid  
177 sequence identity (Supporting Fig 1).

178 Prior to establish structural relationships analyzing the IgG recognition of both LTPs,  
179 the quality of the recombinant allergens was assessed by Coomassie blue staining and mass  
180 spectrometry (Fig 2A, Supporting Fig 2). Then, the IgG-binding to each allergen from each

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3 181 specific polyclonal antiserum to rOle e 7 or rPru p 3 was analyzed by WB and ELISA (Fig 2B-  
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5 182 D).

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7 183 Although Ole e 7 was also barely recognized by the Pru p 3 polyclonal antiserum by  
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9 184 WB, Ole e 7 and Pru p 3 were recognized by both polyclonal **antisera** (Fig 2B). Then, the IgG-  
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11 185 binding to the native proteins was analyzed by ELISA (Fig 2C, D). In agreement with the  
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13 186 previous results obtained by WB, Pru p 3 polyclonal antiserum was able to recognize Ole e 7. In  
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15 187 contrast, although the specific Ole e 7 polyclonal antiserum slightly recognized Pru p 3, these  
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17 188 results show the presence of common IgG epitopes in both LTPs, which could also cause their  
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19 189 cross-reactivity at IgE level.

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22 190 To address this question, our next aim was to study the existence of common IgE  
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24 191 epitopes, and further analyzed their potential IgE cross-reactivity by cellular assays.

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27 193 *Some patients may recognize equivalent IgE epitopes from olive pollen and peach*  
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29 194 *nsLTPs.*

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32 195 Inhibition assays by ELISA and WB were performed using individual sera from two  
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34 196 Ole e 7-monosensitized and four bisensitized **patients**, whose sIgE levels were measured by  
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36 197 ELISA and ImmunoCAP (Supporting Fig 3, Supporting Fig 4 and Supporting Table 1). Both  
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38 198 proteins were used on the solid phase and as inhibitors (Fig 3, Supporting Fig 4).

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40 199 Interestingly, the bisensitized patient 44 used as control of IgE reactivity to both LTPs  
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42 200 showed IgE-binding inhibition by ELISA as well as WB. By ELISA, a complete inhibition of  
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44 201 the IgE-binding to rOle e 7 was obtained using both rOle e 7 and rPru p 3 as inhibitors. In  
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46 202 contrast, inhibition to rPru p 3 was barely observed using rOle e 7 as inhibitor (Fig 3A, B). By  
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48 203 WB, a complete inhibition **to the IgE-binding** to rOle e 7 was achieved using rOle e 7 and rPru p  
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50 204 3 as inhibitors, **and a 25% IgE-binding inhibition to rPru p 3 was reached using rOle e 7 as**  
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52 205 **inhibitor** (Fig 3C, D). In addition, three other bisensitized patients were analyzed by ELISA  
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54 206 **(Supporting Fig 4)**. For patients 1 and 27, Ole e 7 or Pru p 3 as inhibitors were almost able to  
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56 207 abrogate the IgE binding to each protein. On the other hand, similar results with that of patient  
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58 208 44 were also obtained for patient 21. These results indicate, apart from the heterogeneous IgE  
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3 209 reactivity of patients, that some IgE epitopes of Pru p 3 seem to be absent in Ole e 7, especially  
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5 210 in the native conditions of the protein. However, we cannot discard that these epitopes could not  
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7 211 be highly recognized by sIgEs from patients, being the affinity for those epitopes decisive to  
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9 212 identify the epitopes involved in cross-reactions. Even so, although further experiments would  
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11 213 be performed to determine the relevance of the different affinity of the IgE, the inhibition of the  
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13 214 IgE-binding observed in the experiments suggest the existence of common conformational and  
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15 215 linear epitopes supporting the cross-reactivity between both allergens.

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18 216 Surprisingly, the two Ole e 7-monosensitized patients analyzed by WB showed an  
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20 217 inhibition of the IgE binding to rOle e 7 of 25 and 100%, using rPru p 3 as inhibitor (Fig 3E).  
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22 218 No IgE binding was detected to rPru p 3 strips by any patient. Furthermore, we explored the  
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24 219 differences on the IgE recognition to those epitopes under denaturing and non-denaturing  
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26 220 conditions. A reduction of the signal of about 15% was detected under non-denaturing  
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28 221 conditions (Fig 3F). The lack of conformational epitopes of the protein in the presence of  $\beta$ -ME  
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30 222 (denaturing conditions) suggests, besides the existence of common conformational epitopes  
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32 223 observed by ELISA with bisensitized patients, the existence of common linear IgE epitopes for  
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34 224 both allergens.

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39 226 *Analysis of the release of cell mediators reveals that Ole e 7 could trigger the allergic*  
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41 227 *response to the nsLTP from peach in Ole e 7-monosensitized patients.*

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43 228 Next, we proceeded to study this reactivity at IgE level in the forty-eight patients  
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45 229 sensitized to Ole e 7 and/or Pru p 3 according to ImmunoCAP 250 (Supporting Figure 3 and  
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47 230 Supporting Table 1) by means of *ex vivo* cellular assays by BAT (Figure 4, Supporting Figure 5)  
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49 231 and by *in vitro* analysis using the RBL-2H3 mastocyte cell model (Figure 5).

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51 232 Regarding the Ole e 7 response by BAT (Fig 4A), we observed that the percentage of  
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53 233 degranulated basophils was significantly higher in Ole e 7-monosensitized and bisensitized  
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55 234 patients than in Pru p 3-monosensitized patients ( $p=0.001$  and  $p<0.001$ , respectively), whereas  
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57 235 no significant differences were found between Ole e 7-monosensitized and bisensitized patients  
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59 236 ( $p=0.864$ ). Interestingly, when considering the Pru p 3 response (Fig 4B), no significant

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3 237 differences between the three analyzed groups were found. Surprisingly, we identified four Ole  
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5 238 e 7-monosensitized patients whose basophils degranulated after the incubation with rPru p 3.  
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7 239 Thus, while basophils from Pru p 3-monosensitized patients were not able to degranulate in the  
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9 240 presence of Ole e 7, basophils from 4 out of 13 Ole e 7-monosensitized patients were also able  
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11 241 to degranulate in the presence of Pru p 3.

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13 242 To confirm the specificity of the observed response, BAT was performed at 0.1 µg/mL,  
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15 243 1 µg/mL and 10 µg/mL of rOle e 7 and rPru p 3 in the four Ole e 7-monosensitized patients who  
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17 244 responded to Pru p 3, and two random selected bisensitized patients. Clinical characteristics of  
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19 245 these patients are summarized in Table 1. Basophils from the four Ole e 7-monosensitized  
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21 246 patients (patient 9, 12, 16 and 36) degranulated similarly at the three concentrations of rOle e 7.  
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23 247 However, when rPru p 3 was used to promote degranulation, the response was only achieved at  
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25 248 the highest concentration. These results show that apart from rOle e 7, rPru p 3 can induce  
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27 249 basophil degranulation from Ole e 7-monosensitized patients. Basophils from the bisensitized  
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29 250 patient 37 behaved like the four-rOle e 7-monosensitized patients (Fig 4C, D), in line with the  
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31 251 serum sIgE levels obtained by ELISA, in which IgE was detected only with rOle e 7  
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33 252 (Supporting Fig 3). Regarding bisensitized patient 38, its degranulation percentage was similar  
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35 253 at the three different concentrations either with rOle e 7 or rPru p 3 as stimulus (Fig 4C, D).

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37 254 Lastly, to further confirm these results, these patients sera were analyzed using the  
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39 255 RBL-2H3 mastocyte cell model, which allows the measurement of the release of β-  
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41 256 hexosaminidase. Four different concentrations of allergen were used (Fig 5). Interestingly,  
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43 257 despite their unique sensitization to Ole e 7, all Ole e 7-monosensitized patients tested were able  
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45 258 to react with rPru p 3. Regarding bisensitized patients 37 and 38, although a similar reaction to  
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47 259 rOle e 7 was observed at the highest concentration of allergen, the response of patient 38 was  
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49 260 mainly produced with rPru p 3 as stimulus. In this patient, these results may suggest the role of  
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51 261 Pru p 3 as primary sensitizer.

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53 262 Collectively, the herein presented results show the existence of common conformational  
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55 263 and linear IgE-binding epitopes in some allergic olive pollen patients that could explain the  
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57 264 pollen-food cross-reactivity observed in clinics between Ole e 7 and Pru p 3.

## 265 Discussion

266 Cross-reactivity between pollen and food LTPs have been extensively demonstrated,  
267 although the identification of the primary inducer in these patients is still unclear (3, 7, 24, 25).  
268 A common feature of LTP-allergic patients is their multiple plant-food sensitizations, which is  
269 known as LTP syndrome, a high relevant hypersensitivity disorder in the Mediterranean basin  
270 due to its association with severe symptoms, such as anaphylaxis (26, 27). nsLTPs from  
271 artemisia (Art v 3) and plane tree (Pla a 3) pollens are highly implicated in this syndrome since  
272 they cross-react with LTPs from different foods (28). Although this association has not been  
273 described for Ole e 7 or Pru j 1, which show low amino acid sequence similarity with nsLTPs  
274 from foods (26), their role in the LTP syndrome is still unclear. On the other hand, the  
275 sensitization to LTPs seems to be usually related to peach-specific IgE **levels** (26). In southern  
276 Europe, the main allergen from peach -Pru p 3- is considered a primary sensitizer for the  
277 development of allergy to other pollen and plant-food LTPs (10, 29). However, in regions with  
278 **high pollen exposure** (i.e. mugwort or ragweed), Pru p 3 may lose its role as primary sensitizer  
279 (14, 15).

280 We used in the study **sera from** patients from the south of Spain where olive tree is  
281 widely cultivated and its pollen is the main cause of allergy in these populations. Co-  
282 sensitization to Ole e 7 and Pru p 3 has been reported in several patients from this area (22, 30),  
283 but no **cross-reactivities** between these two nsLTP have been described to date. Indeed,  
284 preliminary results of our group using the natural Ole e 7 allergen isolated from pollen pointed  
285 out to an absence of cross-reactivity (16, 31). In this sense, it is necessary to take into account  
286 that the natural allergen isolated from pollen is a heterogeneous mixture of multiple isoforms  
287 obtained in a very low concentration and that the experiments were carried out using pools of  
288 several sera from allergic patients to Ole e 7. In this context, the main objective of the present  
289 study was to clarify **whether** Ole e 7 is involved in cross-reactivity and which is its implication  
290 in the sensitization process to other nsLTPs.

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3 291 Here, we have demonstrated that Ole e 7 cross-reacts, not only with LTPs from pollens,  
4  
5 292 but also with LTPs from pear and peach (Pyr c 3 and Pru p 3, respectively) in spite of the low  
6  
7 293 sequence identity reported for them (Supporting Figure 1). The obtained results are in  
8  
9 294 agreement with a previous study which established a clinical association between severe food  
10  
11 295 allergic clinical symptoms and sensitization to Ole e 7 (32). Nevertheless, other studies do not  
12  
13 296 support that correlation (21, 33). The observed differences may be attributed to the  
14  
15 297 multifactorial and heterogeneous character of this disorder and the molecules involved in it.  
16  
17 298 Hence, the differences between the studied populations may be explained by the demographic  
18  
19 299 characteristics of each area linked to different environmental factors (34-36). Furthermore, we  
20  
21 300 have here confirmed the antigenic and allergenic cross-relations between Ole e 7 and Pru p 3.  
22  
23 301 Common IgG epitopes were observed although the signal detected for Ole e 7 by the specific  
24  
25 302 polyclonal antiserum against Pru p 3 was much lower than that for Pru p 3, which can be  
26  
27 303 directly related to the affinity of the IgG-binding or the number of recognized epitopes.  
28  
29 304 Common IgE epitopes were also identified. In addition, the conformation of the protein seems  
30  
31 305 to be crucial for the IgE-binding, being recognized mainly under reducing conditions as  
32  
33 306 confirmed by IgE inhibition WB assays. However, the elucidation of which IgE epitopes were  
34  
35 307 recognized in both allergens was not feasible because the 3D structure and the epitope map of  
36  
37 308 Ole e 7 are still unknown, in contrast to the deep analysis so far performed for Pru p 3, whose  
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39 309 IgE-binding epitopes have been well characterized (37). Further structural and immunological  
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41 310 studies of allergens from the LTP protein family are required to determine which are the main  
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43 311 epitopes recognized by allergic patients sensitized to different LTPs.

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45 312 Remarkably, although an absence of recognition was observed by ELISA and WB, we  
46  
47 313 have identified Ole e 7-mono-sensitized patients whose basophils reacted against rPru p 3, which  
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49 314 was further supported using the RBL-H3 mast cell model. This could be due to the fact that  
50  
51 315 cellular assays are more sensitive than ELISA and WB; or alternatively because low affinity  
52  
53 316 epitopes not recognized by specific IgEs by ELISA or WB were able to trigger a cellular  
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55 317 response (38, 39). On the other hand, the absence of lipids in rPru p 3 could also partially affect  
56  
57 318 the detection of some sIgE levels from patients. In addition, none of the patients had clinical

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3 319 symptoms to peach or other *Rosaceae* members, as well as some allergens whose co-  
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5 320 sensitization had been diagnosed (37). The obtained results make us to raise the possibility that  
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7 321 these patients are in an early stage of the sensitization process to *Rosaceae* (Pru p 3), acting Ole  
8  
9 322 e 7 as the primary LTP sensitizer promoted by the high olive pollen exposure in **Andalusia**, as it  
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11 323 was described for *Artemisia* pollen in other regions (3, 7, 14, 22). A similar hypothesis was  
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13 324 proposed to explain the linking between food allergen and grass (40), or birch pollinosis (41).  
14  
15 325 On the other hand, we cannot discard a different sensitization route by airways instead of the  
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17 326 gastrointestinal *via* described for food allergens sensitization. Indeed, Pérez-Calderón et al.  
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19 327 suggested that occupational allergy to peach arises as a consequence of the inhalation of Pru p 3  
20  
21 328 present in the leaves of the plant, and not as a result of fruit ingestion (42). **In addition, the study**  
22  
23 329 **performed by Garcia et al. also supports these data. The authors also confirmed that Pru p 3**  
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25 330 **from peach leaves act as a respiratory allergen, causing occupational rhinoconjunctivitis and**  
26  
27 331 **asthma (43).** Marzban et al. also raised this alternative mechanism for allergy development in  
28  
29 332 their study of the sensitization to birch pollen and Mal d 1 and Mal d 3 allergens (44, 45). The  
30  
31 333 influence of other cofactors should also be considered because they are frequently involved in  
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33 334 the development of the allergic response and in the clinical expression of allergic symptoms  
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35 335 (46). Among these factors, the mucosa and the microbiome could also play an important role.  
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37 336 The mucosa immune system regulates the entrance of multiple antigens either pathogenic or  
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39 337 non-pathogenic, such as food and pollen allergens. Interestingly, it has been described that in  
40  
41 338 spite of the absence of food allergy, the oral mucosa could be compromised due to a respiratory  
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43 339 sensitization (47). A disrupted barrier could be responsible for food allergy development, which  
44  
45 340 support our hypothesis about the sensitization process in some analyzed patients. On the other  
46  
47 341 hand, in food allergy, there have been reported differences in the oral and intestinal microbiome  
48  
49 342 that may increase the susceptibility to develop sensitization to food allergens (48). Therefore,  
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51 343 **the microbiome of the oral mucosa**, a shared entrance place between pollen and food allergens,  
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53 344 could influence the co-existence of different allergenic processes. Further studies to clarify the  
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55 345 mechanism of the co-sensitization between these two allergens are required for a better  
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57 346 diagnosis and treatment.  
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3 347 In conclusion, our study demonstrates the cross-reactivity between the nsLTP from  
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5 348 olive pollen and peach, a subject of debate for years. Furthermore, data herein presented provide  
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7 349 new insights regarding the sensitization process to fruit nsLTP, particularly to Pru p 3. Our  
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9 350 results suggest that Ole e 7 could act as a primary sensitizer in regions with high olive pollen  
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11 351 exposure, probably leading the peach sensitization by a new route, the respiratory tract.  
12  
13 352 However, further studies are needed to determine which factors are crucial in the onset of the  
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15 353 allergic symptoms to peach.  
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20 355 **Author Contributions:** Conception and design: C.O-S., A. N., C.M-A., A.J., M.V., R.B.

21  
22 356 Development of methodology: C.O-S., A.N., S.B., L.V. Perform Research: C.O-S., A. N., S.B.,

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24 357 B.R-L., A.J. Analysis and interpretation of data: C.O-S., A. N., S.B., B.R-L., A.J., R.B., C.M.,

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26 358 M.V. Writing, review, and/or revision of the manuscript: C.O-S., A. N., A.J., C.M., M.V., R.B.

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28 359 Technical, obtaining and processing of samples, or material support: A.J., L.V., C. M-A., A. D-

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30 360 P., A.J., M.V., R.B.  
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### 56 373 **Supporting Information**

57  
58 374 Supporting information to this article can be found online.  
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5 376 **Conflicts of Interest Statement**  
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7 377 The authors declare no conflicts of interest.  
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For Peer Review

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**Tables**

Patient	Sex	Age (Y)	Olive pollen sensitization			Peach sensitization		
			Symptoms (RC/A/RCA)	SPT	IgE Ole e7 (CAP)	Symptoms (No/OAS/U/An)	SPT	IgE Pru p 3 (CAP)
9	F	41	RCA	+	201	No	-	0
12	F	23	RCA	+	42.9	No	-	0
16	F	22	RCA	+	58.9	No	-	0
36	M	48	RCA	+	125	No	-	0
37	F	18	A	+	178	No	-	1.13
38	M	22	A	+	25.8	OAS/U	+	25.8
44	F	44	RCA	+	8.71	OAS/U	+	20.8

**Table 1. Clinical characteristic of patients selected to perform BAT analysis.** M, male; F, female; RC, rhinitis; A, asthma; RCA, rhinitis and asthma; No, No symptoms; OAS, oral allergy syndrome; U, urticaria; An, anaphylaxis; SPT, skin prick test; IgE, immunoglobulin E.

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3 512 ***Legend to the Figures***  
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6 513 **FIGURE 1. Identification of non-specific lipid transfer proteins cross-reactive to Ole e 7**  
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8 514 **from different pollen and food-derived extracts. ELISA inhibitions were performed with**  
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10 515 **20 or 200 µg of pollen (A) or food (B) protein extracts as inhibitors. A pool of six Ole e 7-**  
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12 516 **positive sera from olive pollen allergic patients sensitized to Ole e 7 was used in the assay.**  
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14 517 **Experiments were performed in duplicate (p<0.05).**  
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20 519 **FIGURE 2. Physico-chemical and immunological analysis of recombinant Ole e 7 and Pru**  
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22 520 **p 3. (A) Analysis of 500 ng of the recombinant allergens by Coomassie Blue staining after**  
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24 521 **SDS-PAGE. (B-D) Analysis of common antigenic features of Ole e 7 and Pru p 3 allergens**  
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26 522 **by WB and ELISA. (B) Immunostaining of 500 ng of rOle e 7 and Pru p 3 using the**  
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28 523 **indicated polyclonal antisera (pAb). BSA nitrocellulose blotted was used as negative**  
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30 524 **control of the assay. Signal was developed for 30 seconds using ECL WesternBright™**  
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32 525 **QUANTUM (Advansta) reagent for Ole e 7 with anti-Ole e 7 pAb and Pru p 3 with anti-**  
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34 526 **Pru p 3 pAb, and for 3 min for the other determinations. (C-D) Analysis of 100 ng of**  
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36 527 **recombinant allergens coated in ELISA wells with indicated dilutions of Ole e 7- or Pru p**  
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38 528 **3-pAbs. All the experiments were performed in duplicate.**  
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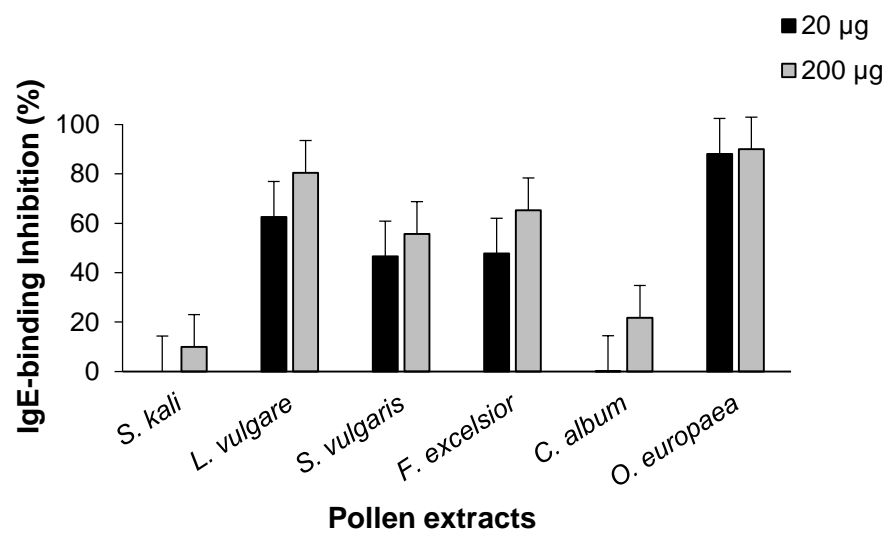
43 530 **FIGURE 3. IgE-binding inhibition assays using sera from bisensitized and Ole e 7-**  
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45 531 **monosensitized patients. (A-D) ELISA and WB IgE-binding inhibition assays using sera**  
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47 532 **from a patient bisensitized to Ole e 7 and Pru p 3. (E-F) WB IgE-binding inhibition assays**  
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49 533 **using sera from a patient monosensitized to Ole e 7. ELISA was performed coating 100 ng**  
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51 534 **of recombinant proteins using indicated amounts of inhibitors. WB was performed using**  
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53 535 **200 ng of Pru p 3 or 500 ng of Ole e 7 blotted in nitrocellulose membranes and 2 µg of the**  
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55 536 **indicated inhibitors under denaturing (C-E) or non-denaturing conditions (F). Inhibition**  
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57 537 **values (%) are indicated.**  
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3 538 **FIGURE 4. Basophils degranulation (% CD63<sup>+</sup>) by rOle e 7 and r Pru p 3. (A) 10 µg/mL**  
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5 539 **of rOle e 7, or (B) rPru p 3 in blood samples of the study cohort (n=48). Comparisons**  
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7 540 **between groups of patients of the study cohort (n=48) were performed using U Mann**  
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9 541 **Whitney test. Furthermore, basophil degranulation of the 6 selected patients was analyzed**  
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11 542 **using 0.1 µg/mL, 1 µg/mL and 10 µg/mL of rOle e 7 (C) or rPru p 3 (D). N-Formil-Met-**  
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13 543 **Leu-Phe was used as positive control and phosphate buffer saline as negative control.**  
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15 544 **Mean with standard error of the mean (SEM) bars are displayed.**  
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21 546 **FIGURE 5. β-hexosaminidase release assay of Hum RBL-2H3 cells. Hum RBL-2H3 cells**  
22  
23 547 **were tested at four different concentrations (10<sup>-3</sup> µg/mL, 10<sup>-2</sup> µg/mL, 10<sup>-1</sup> µg/mL, 1 µg/mL)**  
24  
25 548 **of rOle e 7 or r Pru p 3 using serum of indicated patients to sensitize the cells overnight.**  
26  
27 549 **Patients 9, 12, 16 and 36 were monosensitized to Ole e 7. Patients 37 and 38 showed**  
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29 550 **bisensitization to Ole e 7 and Pru p 3. An absence of β-hexosaminidase release was**  
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31 551 **observed without allergen stimulation (negative control).**  
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Allergy

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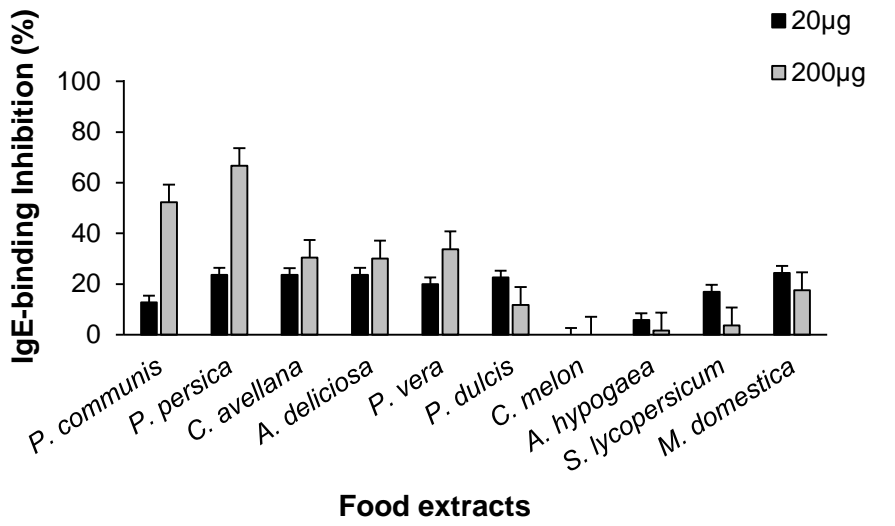


Figure 1

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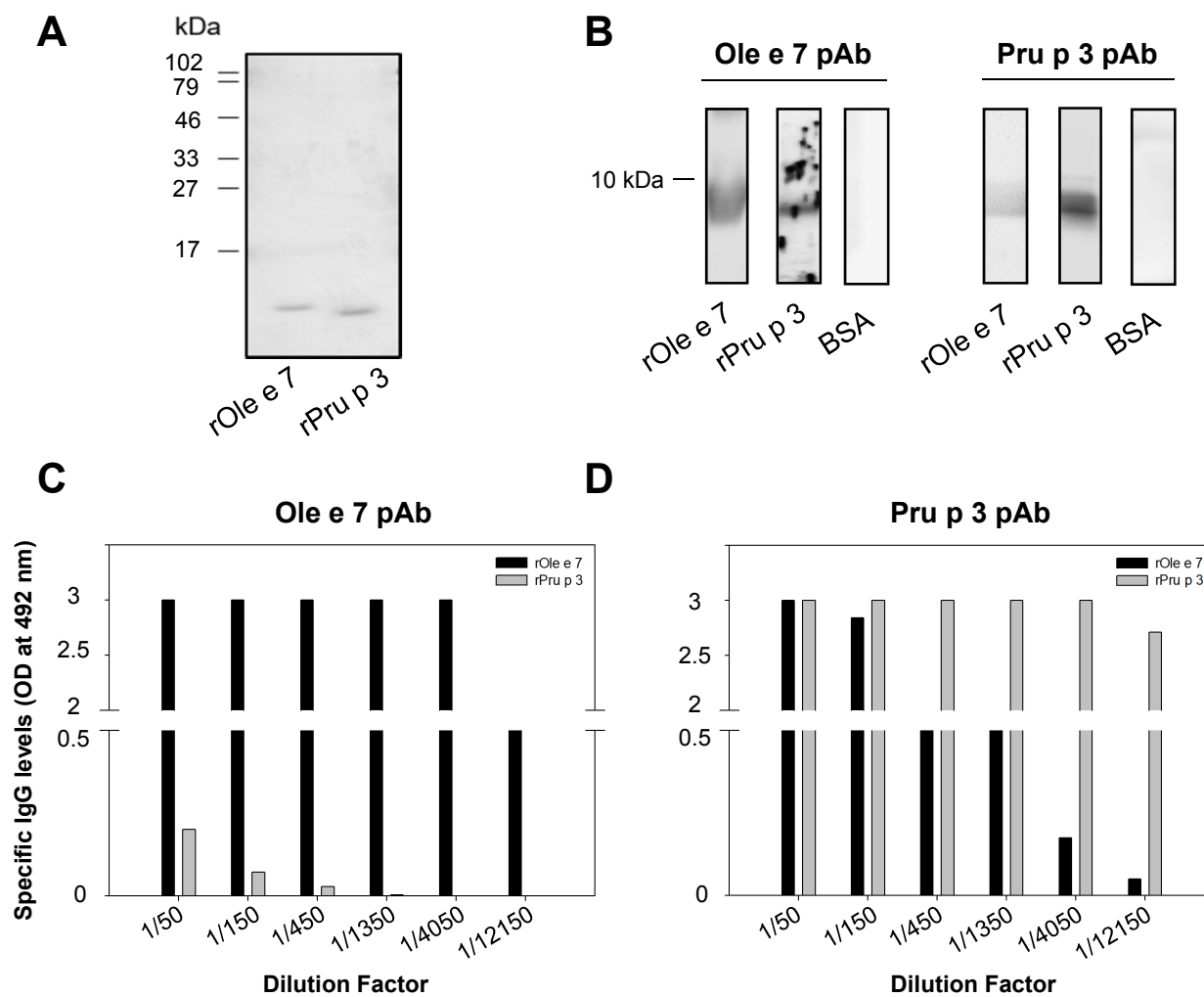
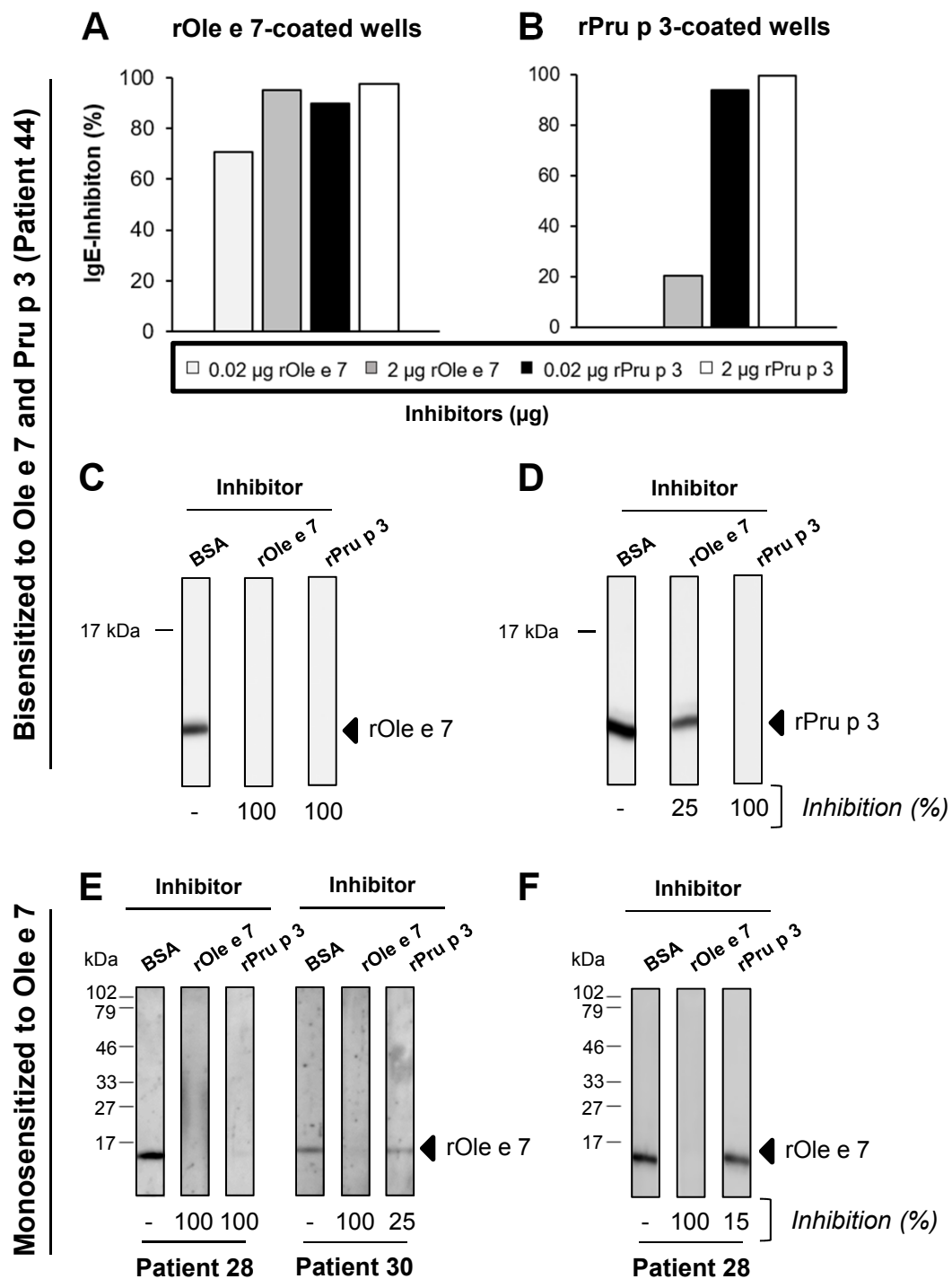


Figure 2



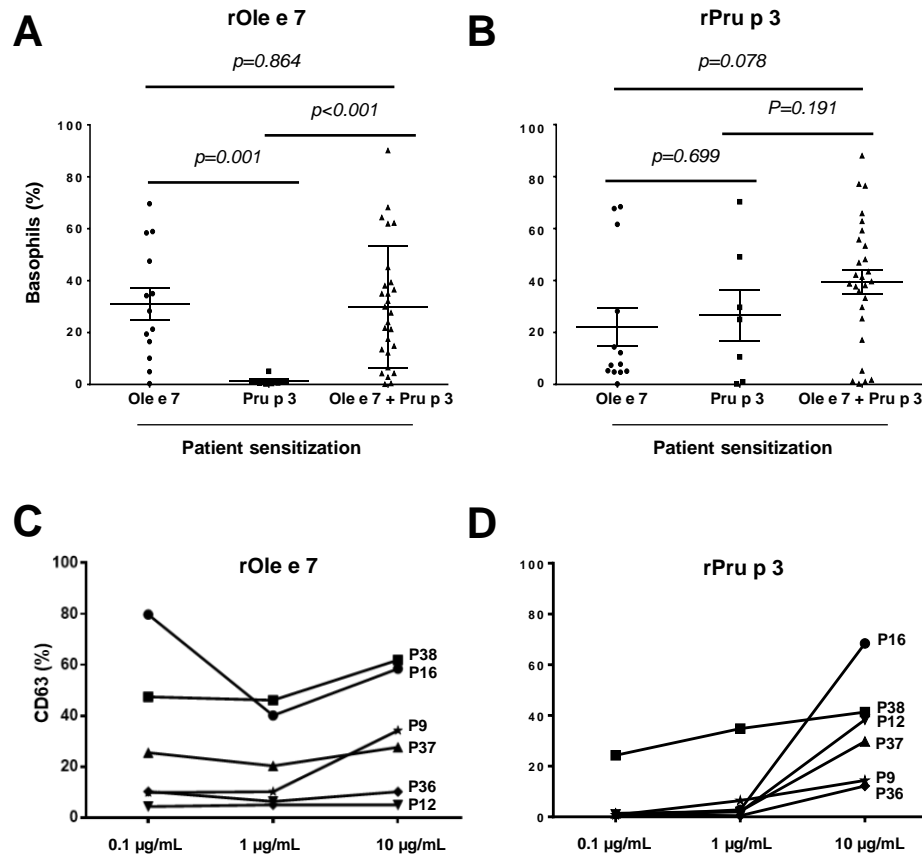
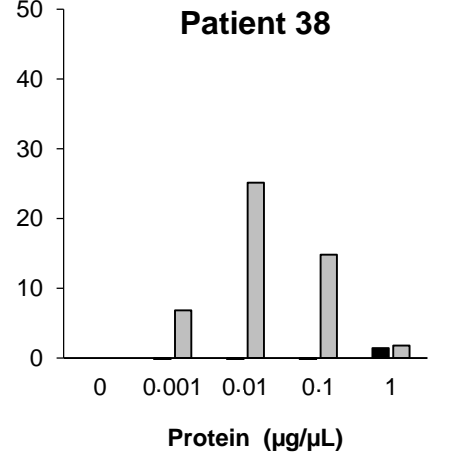
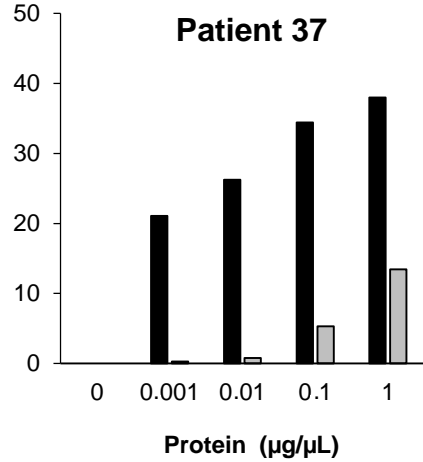
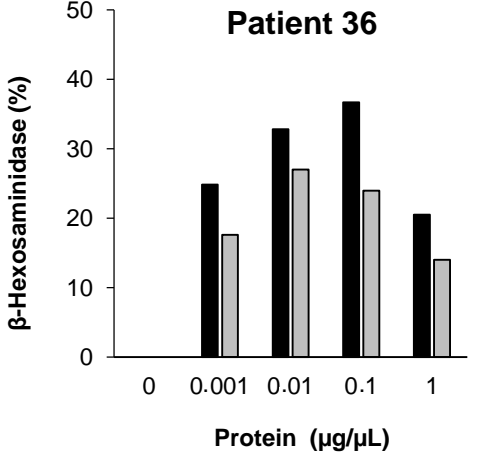
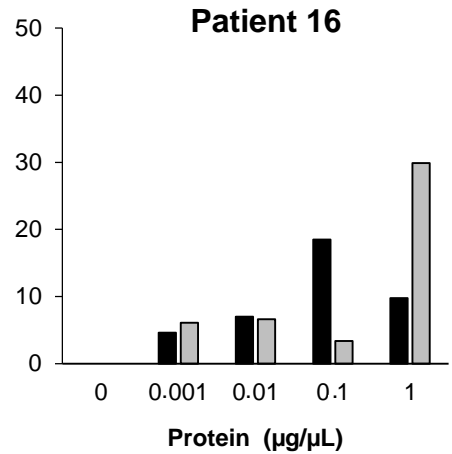
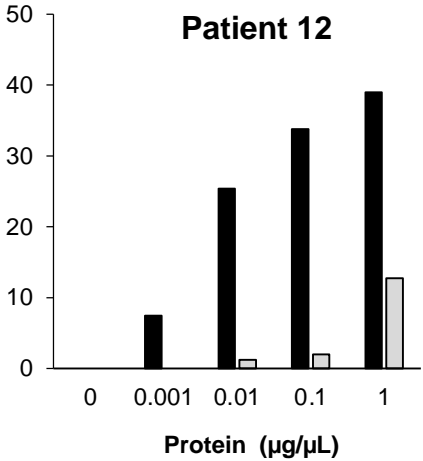
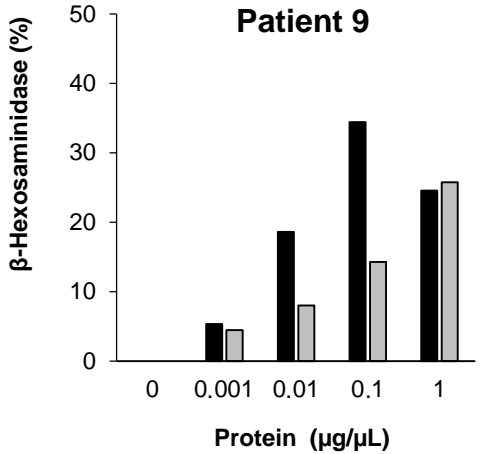


Figure 4

Allergy



**Figure 5**

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## Supporting Information

### New insights into the sensitization to non-related nsLTPs from pollen and food

**Carmen Oeo-Santos, BS<sup>a\*</sup>, Ana Navas, BS<sup>b, c\*</sup>, Sara Benedé, PhD<sup>a</sup>, Berta Ruíz-León, MD, PhD<sup>b, c, d</sup>, Araceli Díaz-Perales, PhD<sup>e, d</sup>, Lothar Vogel, PhD<sup>e</sup>, Carmen Moreno-Aguilar, MD, PhD<sup>b, c, d</sup>, Aurora Jurado, MD, PhD<sup>b, c, d</sup>, Mayte Villalba, PhD<sup>a, d, ^</sup>, Rodrigo Barderas, PhD<sup>f, ^</sup>.**

\* Both authors contributed equally.

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<sup>g</sup> UFIEC, Chronic Disease Programme, Instituto de Salud Carlos III, Majadahonda 28220, Madrid, Spain.

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[mvillalb@ucm.es](mailto:mvillalb@ucm.es)

## 35 **Materials and Methods**

### 37 *Protein extracts, allergens and antibodies*

38 Olive pollen was obtained from ALK-Abelló (Madrid, Spain). Pollens from other  
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9 66 horseradish peroxidase-labeled polyclonal antibody (1:3000). Chemiluminescent signal was  
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13 68 QUANTUM (Advansta) reagents.  
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#### 17 18 70 *Specific IgE binding to Ole e 7 and Pru p 3*

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24 73 and ELISA, respectively, were considered positive. Indirect ELISA was performed in duplicate  
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26 74 in 96-well plates (Corning™) coated with 0.1 µg of recombinant protein per well, according to  
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28 75 previously optimized protocols (1, 3, 7). Binding of human IgE was detected by a horseradish  
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30 76 peroxidase-labeled mouse anti-human IgE Fc (1:1000) (Southern Biotech). Peroxidase reaction  
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32 77 was detected by using 50 µL per well of 0.63 mg/mL o-Phenylenediamine in 0.1 M sodium  
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34 78 citrate 4% methanol containing 1.6 µL/mL 30% H<sub>2</sub>O<sub>2</sub>. The reaction was stopped with 50 µL 3N  
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36 79 H<sub>2</sub>SO<sub>4</sub>. Signal was measured at 492 nm in an iMark microplate absorbance reader (Bio-Rad).  
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#### 40 41 81 *Cell-based allergic mediator release assays*

42  
43 82 Evaluation of specific cell mediators of allergic response against Ole e 7 and Pru p 3  
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45 83 was determined by Basophil Activation Test (BAT) and RBL-2H3 activation cells. BAT was  
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47 84 performed using rOle e 7 and rPru p 3 allergens obtained as described above. Briefly, 100 µL of  
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51 86 Stimulation Buffer (ref. 339664, BD Biosciences, CA, USA) for 10 minutes at 37 °C. Then, 100  
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53 87 µL of phosphate buffer saline (PBS) was added as negative control and 50 µL of N-Formyl-  
54  
55 88 Met-Leu-Phe (f-MLP) at 2 µM concentration as positive control. Either rOle e 7 or rPru p 3  
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57 89 allergens were also added at 0.1 µg/mL, 1 µg/mL and 10 µg/mL in separate tubes. All tubes  
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59 90 were incubated for 30 minutes at 37 °C. Basophil degranulation was stopped by transferring

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3 91 sample tubes to an ice bath for 5 minutes. Cell staining was performed using CD63-  
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5 92 FITC/CD123-PE/anti-HLA-DR-PerCP cocktail (ref. 341068, BD FastImmune™, Becton,  
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7 93 Dickinson and Company, San Jose, CA, USA). After lysing cells with 2 mL of 1x BD FACS™  
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9 94 lysing solution and washing twice with PBS, stained cells were acquired in a BD FACS™  
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11 95 cytometer (Becton Dickinson and Company, San Jose, CA, USA) using BD FACS™ as  
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13 96 acquisition and analysis software. The specificity of the response to rOle e 7 and rPru p 3 was  
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15 97 ascertained using a cohort of non-allergic donors.

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18 98 RBL-2H3 cell experiments were developed as previously described (3), with slight  
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20 99 modifications. Briefly, cells were sensitized overnight at 37°C with 5 or 10% of sera from  
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22 100 allergic patients. After 12 h, cells were stimulated with either rOle e 7 or rPru p 3 at four  
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24 101 different concentrations ( $10^{-3}$  µg/mL,  $10^{-2}$  µg/mL,  $10^{-1}$  µg/mL and 1 µg/mL).

### 25 26 27 28 103 *Inhibition assays*

29  
30 104 Inhibition assays were performed by ELISA and WB. For ELISA inhibition tests, 0.1  
31  
32 105 µg of purified proteins were coated overnight at 4°C to Corning™ 96 well plates. Samples were  
33  
34 106 coated in duplicates. Individual human sera (diluted 1:10) or an equivolumetric pool of human  
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36 107 sera (n=6), previously incubated with 0.2 µg or 2 µg of the specific recombinant protein, or with  
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38 108 20 µg or 200 µg of pollen or food-derived extracts as inhibitors. IgE-binding was detected by a  
39  
40 109 horseradish peroxidase-labeled mouse anti-human IgE Fc (1:1000) (Southern Biotech).

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43 110 For WB inhibition assays, allergenic proteins were alternatively transferred under  
44  
45 111 denaturing and non-denaturing conditions to analyze the relevance of epitope conformation in  
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47 112 IgE-binding. Hence, under denaturing conditions, proteins showed mostly linear epitopes, while  
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49 113 under non-denaturing conditions binding to conformational epitopes may be determined.  
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51 114 Immunodetection on membranes was achieved by incubating with individual human sera (1:10),  
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53 115 previously incubated with 2 µg of inhibitor, and a horseradish peroxidase-labeled mouse anti-  
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55 116 human IgE Fc (1:1000). Chemiluminescent signal was developed using ECL-Western blotting  
56  
57 117 reagent (Amersham Bioscience) or WesternBright™ QUANTUM (Advansta) reagents.  
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Ole e 7 AFSCSTVTAKLITSCVSYLDDKSAKPTSDCCAGVKIVLAQATSKPDKLATCNCLKSALAIVGNKVDLGRVSSLPKKCGMSVLDLPPLDKNYDCSKVP 95
Pru p 3 -ITCGQVSSALAPCIPYVRGGGAVPPA-CCNGIRNVNLIARTTPDRQAACNCLKLSASV-PGVNPNNAALPGKCGVHIPYK-ISAATNCATVK 91
Pyr c 3 AITCSQVSANLAPCINIVRSGGAVPPA-CCNGIKTINGIAKTTTPDRQAACNCLKNLAGSV-SGVNPGNAESLPKCGVNVIPYK-ISTSTNCATVK 92

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	<i>Identity (%)</i>			<i>Similarity (%)</i>		
Ole e 7	100	31	30	100	51	46
	Ole e 7	Pru p 3	Pyr c 3	Ole e 7	Pru p 3	Pyr c 3

**Supporting Fig 1. Comparison of the amino acid sequence of Ole e 7 with Pru p 3 and Pyr c 3.** Identity and Similarity percentage values among indicated allergenic nsLTPs are shown. Dialign was used to align the amino acid sequences of the proteins. Genedoc was used for visualization and calculation of Identity and Similarity percentages.

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3 **Supporting Information**  
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7 **New insights into the sensitization to non-related nsLTPs from pollen and food**  
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19 \* Both authors contributed equally.  
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18 98 RBL-2H3 cell experiments were developed as previously described (3), with slight  
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20 99 modifications. Briefly, cells were sensitized overnight at 37°C with 5 or 10% of sera from  
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22 100 allergic patients. After 12 h, cells were stimulated with either rOle e 7 or rPru p 3 at four  
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24 101 different concentrations ( $10^{-3}$  µg/mL,  $10^{-2}$  µg/mL,  $10^{-1}$  µg/mL and 1 µg/mL).

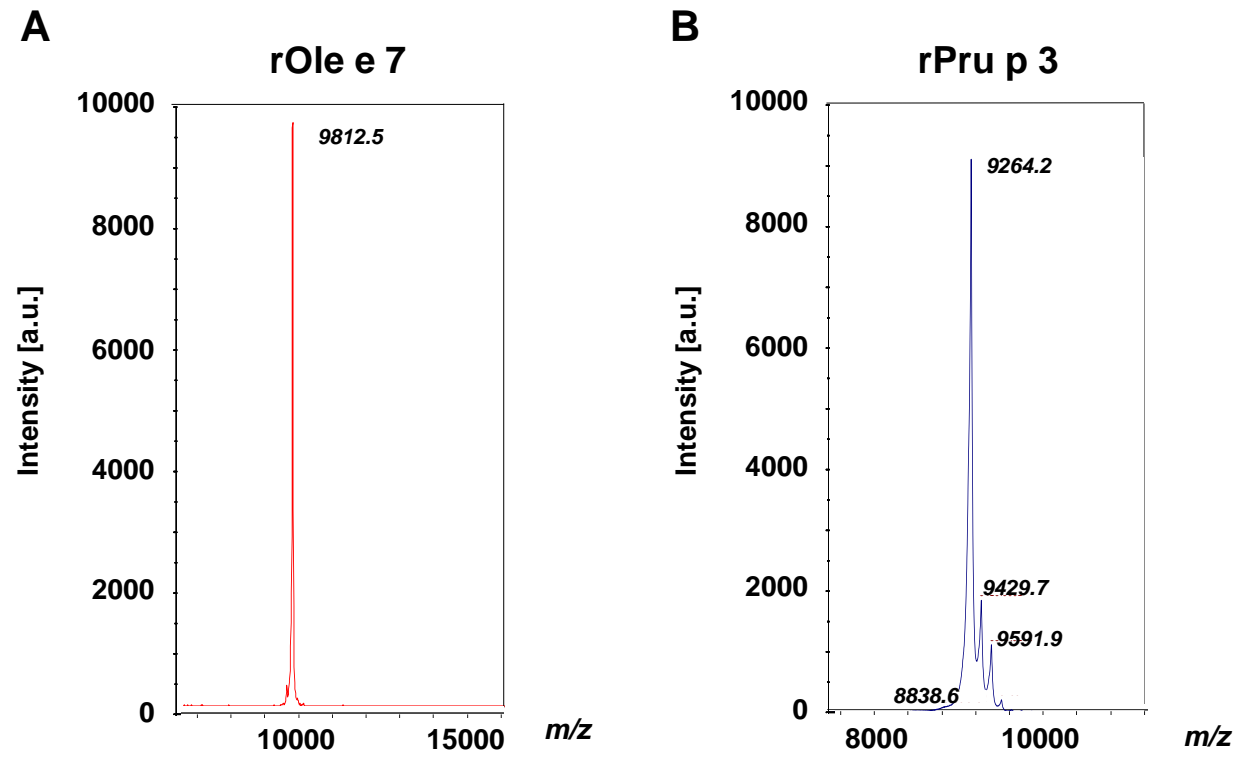
### 25 26 27 28 103 *Inhibition assays*

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30 104 Inhibition assays were performed by ELISA and WB. For ELISA inhibition tests, 0.1  
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32 105 µg of purified proteins were coated overnight at 4°C to Corning™ 96 well plates. Samples were  
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34 106 coated in duplicates. Individual human sera (diluted 1:10) or an equivolumetric pool of human  
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36 107 sera (n=6), previously incubated with 0.2 µg or 2 µg of the specific recombinant protein, or with  
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38 108 20 µg or 200 µg of pollen or food-derived extracts as inhibitors. IgE-binding was detected by a  
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40 109 horseradish peroxidase-labeled mouse anti-human IgE Fc (1:1000) (Southern Biotech).

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43 110 For WB inhibition assays, allergenic proteins were alternatively transferred under  
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45 111 denaturing and non-denaturing conditions to analyze the relevance of epitope conformation in  
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47 112 IgE-binding. Hence, under denaturing conditions, proteins showed mostly linear epitopes, while  
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49 113 under non-denaturing conditions binding to conformational epitopes may be determined.  
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51 114 Immunodetection on membranes was achieved by incubating with individual human sera (1:10),  
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53 115 previously incubated with 2 µg of inhibitor, and a horseradish peroxidase-labeled mouse anti-  
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55 116 human IgE Fc (1:1000). Chemiluminescent signal was developed using ECL-Western blotting  
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57 117 reagent (Amersham Bioscience) or WesternBright™ QUANTUM (Advansta) reagents.  
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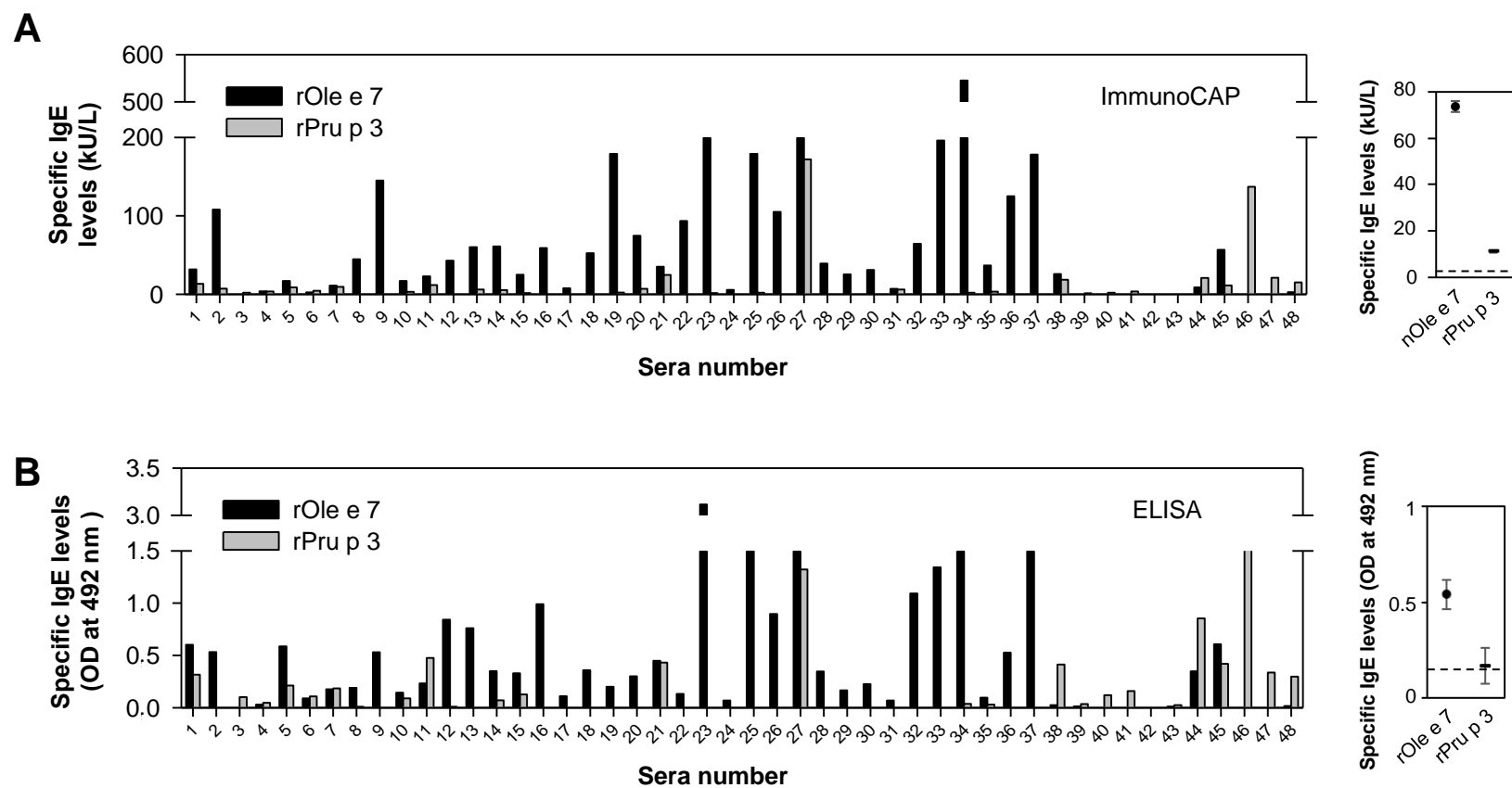
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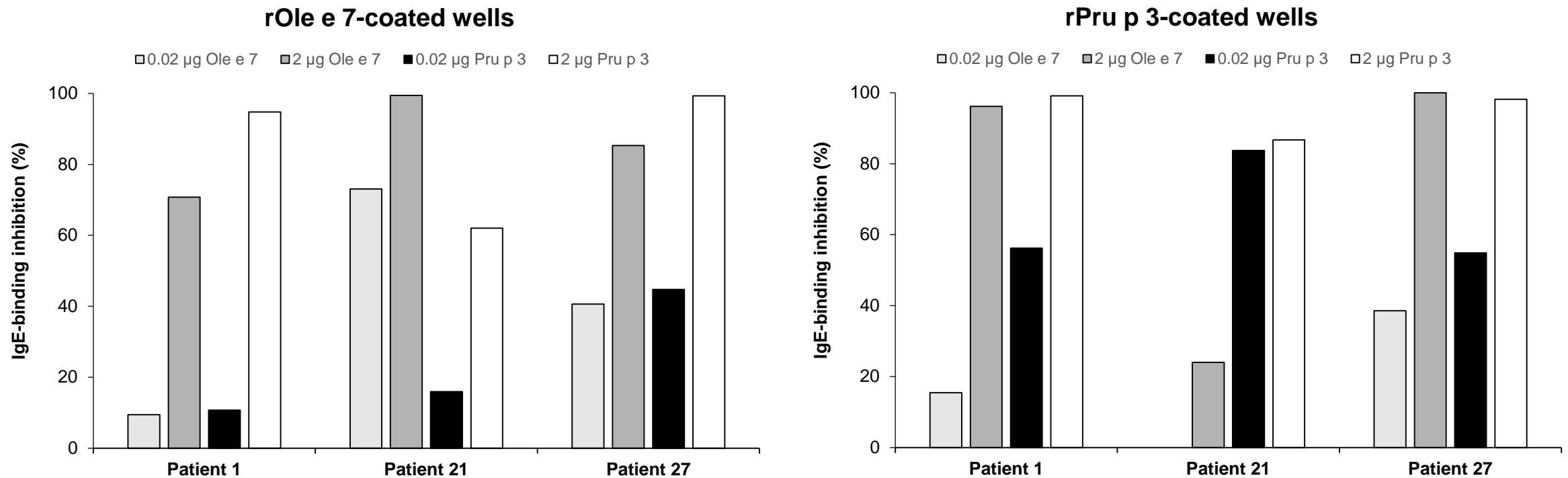


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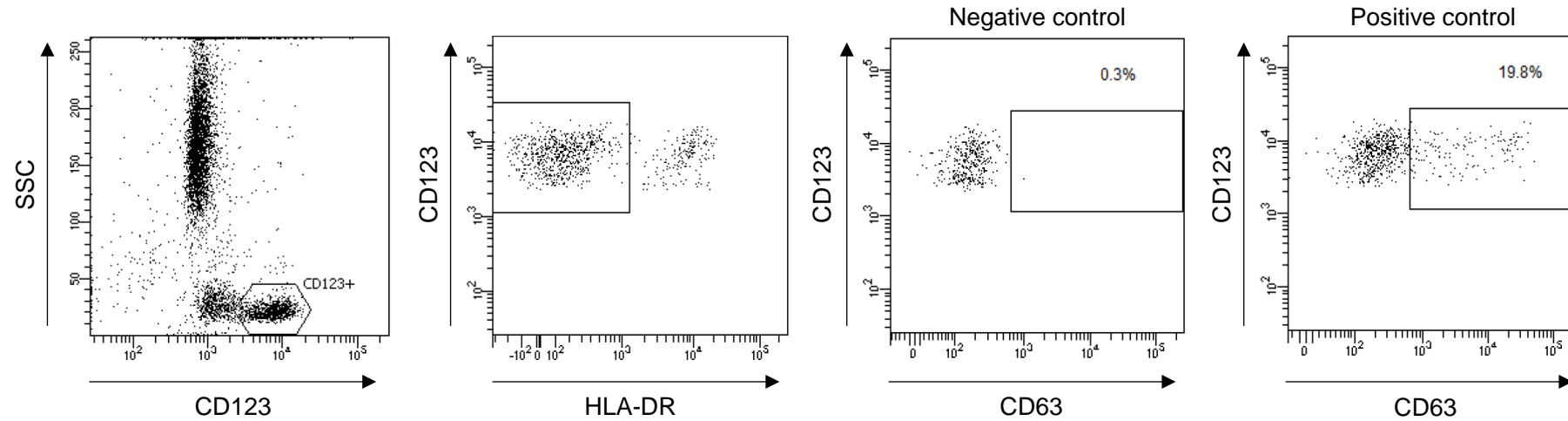
**Supporting Fig 2. Quality control of the recombinant proteins of the study after expression and purification.** Purity of rOle e 7 and rPru p 3 was confirmed by mass spectrometry (MALDI-TOF-TOF).



**Supporting Fig 3. Detection of specific IgE levels from serum of patients to Ole e 7 and Pru p 3 by ImmunoCAP (A) and ELISA (B).** Values above 0.1 OD by ELISA and 0.35 kUA/L by ImmunoCAP were considered positive. Right, Mean  $\pm$  standard error of the mean (SEM) of the IgE binding to Ole e 7 (natural or recombinant protein for ImmunoCAP and ELISA, respectively) and rPru p 3 for all positive serum from Córdoba are also represented.



**Supporting Fig 4. IgE-binding inhibition assay by ELISA from bisensitized patients to Ole e 7 and Pru p 3.** Inhibition of the IgE-binding to 100 ng of rOle e 7 or rPru p 3 was determined by ELISA in comparison to the IgE-binding signal without inhibitor. Amounts of inhibitor ( $\mu\text{g}$ ) are also indicated in the figure.



**Supporting Fig 5. Gating strategy. SSC, side scatter.** Basophils were identified according to the expression of CD123 and HLA-DR markers (CD123+HLA-DR-). Degranulated basophils were identified according to the expression of CD63 marker (CD63+). Results from healthy individual blood cells stimulated with phosphate buffer saline (negative control) and N-Formil-Met-Leu-Phe (positive control) are shown.

	<b>Monosensitized to Ole e 7 (n=13)</b>	<b>Monosensitized to Pru p 3 (n=7)</b>	<b>Bisensitized (n=28)</b>
<b>Age, mean (SD)</b>	36.7 (10.14)	42.14 (14.49)	31.46 (10.27)
<b>Female, (%)</b>	46.15	85.71	60.71
<b>Habitat</b>			
Rural (%)	46.15	14.29	50
Urban (%)	53.85	85.71	50
<b>Respiratory clinical symptoms</b>			
Rhinitis (%)	15.38	28.57	21.43
Asthma (%)	0	14.29	7.14
Both (%)	84.62	42.86	64.29
<b>Clinical symptoms after Rosaceae consumption</b>			
Cutaneous (%)	0	28.57	14.29
Cutaneous and OAS (%)	0	0	14.29
OAS (%)	0	42.86	14.29
Anaphylaxis (%)	0	28.57	42.86
No symptoms (%)	0	0	7.14
<b>Positive SPT to <i>Olea europaea</i> (%)</b>	100	0	92.86
<b>Positive SPT to Pru p 3 (%)</b>	0	71.43	60.71
<b>IgE to Ole e 7 by ImmunoCAP, mean (SD)</b>	62.37 (42.50)	0.11 (0.08)	97.39 (142.11)
<b>IgE to Pru p 3 by ImmunoCAP, mean (SD)</b>	0.08 (0.12)	23.65 (50.51)	12.92 (31.84)
<b>IgE to rOle e 7 by ELISA, mean (SD)</b>	0.49 (0.35)	0.06 (0.13)	0.71 (0.97)
<b>IgE to rPru p 3 by ELISA, mean (SD)</b>	0 (0)	0.22 (0.30)	0.25 (0.45)

**Supporting Table 1. Clinical characteristics of all recruited patients to whom Basophil Activation Test (BAT) was performed. OAS, oral allergy syndrome; IgE, immunoglobulin E. IgE values are indicated in kU/L for ImmunoCAP or in DO (arbitrary units).**

## Supporting Table 1