

After a thorough assessment, your clinician has recommended immunotherapy to best treat your allergic conditions. You will need to return to this office on the date & time below to begin your treatment plan:

Date & Time: _____

Why immunotherapy?

Among the wide variety of treatment possibilities available today, allergy immunotherapy is the only treatment that targets the cause of allergies and alters the natural course of the disease¹, which for many patients may lead to:

- ★ An improved quality of life
- ★ An end to discomfort and feeling ill
- ★ Lower costs of symptomatic drugs
- ★ Freedom to enjoy outdoor activities during allergy season
- ★ Fewer problems having pets at home or visiting family or friends with pets.

Clinical studies have shown that for the majority of patients, their allergies improve and this effect is maintained years after completing treatment.²

What is immunotherapy?

Allergies are caused by your immune system overreacting towards harmless substances the same way it would react towards something harmful like bacteria or a virus. Allergy immunotherapy slowly “trains” your immune system so you can tolerate these substances upon exposure. Allergy immunotherapy is a clinically documented treatment that may reduce or completely remove your allergy symptoms and the need for traditional, symptom-relieving medication. This kind of treatment has been in use worldwide for many decades and clinical studies have shown that it is both safe and effective.²

What goes into my immunotherapy medication?

Your treatment team will review your skin or blood test results and determine which allergy triggers should be selected for immunotherapy. The most commonly treated allergens include house dust mites, pollens (from grasses, trees, and weeds), dander from pets and other animals, and molds. The products mixed for your allergy immunotherapy are called allergenic extracts. These are natural, purified preparations made from the actual allergen source and are approved for clinical treatment.

How does immunotherapy work?

Immunotherapy occurs in two distinct phases: build-up and maintenance. The build-up process begins with the administration of a weak concentration of an allergen extract. Your immunotherapy dose will become increasingly stronger until you reach the maximum dose. This phase can be as short as 1-7 days (tablets), a few weeks (drops) or several months (shots) but can also vary based on your sensitivity to the allergens and your specific treatment plan. Once you have reached your maximum dose, you enter the “maintenance” phase of treatment. Immunotherapy is recommended for 3 - 5 years.² However, the length of treatment, is determined by your degree of symptom relief and your physician’s recommendation.

How is immunotherapy given?

Your provider will work with you to develop a treatment plan. This plan will determine the frequency of your visits. Depending on numerous factors, you might receive shots or sublingual drops.

- ★ For allergy shot patients, immunotherapy will begin with 1-2 visits per week until reaching the maintenance phase. After reaching maintenance, shot appointments will be less frequent occurring once every 4-6 weeks. Following each injection, you will be asked to wait for 30 minutes in your doctor’s office to be observed for an allergic reaction.
- ★ For sublingual immunotherapy (drops), only the first dose is given in your doctor’s office with the remainder of treatment administered at home. Most sublingual medications are given daily and are to be taken at the same time of day.

When will I begin to feel better?

Many patients begin to see results as early as 3 - 6 months or shortly after reaching maintenance. Your need for antihistamine drugs may decrease and your symptoms may become less severe. Some studies have even shown that allergy shots may prevent the onset of other allergies and the development of asthma. Also, the treatment has a long-standing effect after it is discontinued. The most recent findings show that the benefits of allergy immunotherapy are maintained years after completing treatment. For some people, symptom relief may persist indefinitely.² The key to success is BE PATIENT and CONTINUE TREATMENT. Your chances of seeing improvements in your allergy symptoms drastically increase the closer you follow your physician’s treatment plan.

What are the possible side effects?

Although immunotherapy has been shown to be highly effective in treating the underlying cause of allergies, patients being treated may have side effects. Mild, local reactions are fairly common for all forms of immunotherapy. Specifically:

- ★ Injections, you may experience minor discomfort from the injection, and some swelling at the injection site can be persistent, but the nursing staff will have topical treatments to lessen any irritation or pain following a shot.
- ★ Sublingual treatment, many patients report minor itching of the lips and tongue, which tends to occur at the higher doses, and in most cases resolves without concern.

Any reaction, no matter how minor, should be described to your physician so it can be documented appropriately. Some patients experience systemic reactions following immunotherapy. These types of reactions will involve symptoms that occur in a part of your body different from where the dose was given. This often resembles the type of allergy reaction that you experience when you encounter the actual allergy trigger. Common systemic responses include sneezing, redness and itching, or hives. These types of reactions are rare, but can lead to more severe symptoms that need to be treated immediately. It is important to always inform your treatment staff if they ever occur. Some systemic reactions can progress rapidly to anaphylaxis and urgent care may be required. Your treatment team may request that you obtain, and be trained on the use of an auto-injectable epinephrine device.

Sources:

1. Bousquet J, Lockey RF and Malling HJ. WHO Position Paper. Allergen immunotherapy: therapeutic vaccines for allergic diseases. Allergy 1998; 53 (Suppl 44): 1-42.
2. Cox, L, et al. Allergen immunotherapy: a practice parameter third update. J Allergy Clin Immunol. 2011 Mar;127(3):840. 3. Canonica, W, et al. Sublingual Immunotherapy WAO Position Paper 2013 Update. World Allergy Organization Journal 2014, 7:6.