SUBLINGUAL IMMUNOTHERAPY (SLIT) GENERAL INFORMATION

BACKGROUND  The substances that trigger a patient’s allergies are called allergens. Immunotherapy is a treatment of small amounts of allergens which are delivered by injection (needle) or sublingual (under the tongue via allergy drops) to alter a patient’s immunity. The goal is to develop tolerance to the allergens that cause your symptoms. The allergens used for the allergy drops are the same as those used for the injections. The FDA has specifically approved the allergens for injection use. Using them for SLIT is considered an “off-label” use. Off-label use in the U.S. healthcare delivery system is a legitimate, legal and common practice. The protocol we follow has been used in the United States for over 40 years and is endorsed by the American Academy of Otolaryngic Allergy (AAOA). SLIT has been used in Europe for more than 60 years.

PURPOSE  The purpose of sublingual immunotherapy (allergy drops) is to decrease your sensitivity to allergy causing substances, so that exposure to the offending allergen (pollen, mold, dust mites, animal dander, etc.) will result in fewer or less severe symptoms. This does not mean that immunotherapy is a substitute for avoidance of known allergens or for the use of allergy medications, but rather this is a supplement to those treatment measures. Allergy drops have been shown to alter your immune system’s response to naturally occurring allergens. These alterations may permit you to tolerate exposure to the allergen with fewer symptoms. You, in effect, become “immune” or desensitized to the allergen. The amount of this immunization is different for each person and is, therefore somewhat unpredictable. Improvement in your symptoms will not be immediate. It usually requires 3-6 months before any relief of allergy symptoms is noted. About 85-90% of allergic patients on immunotherapy notice significant improvement in their symptoms. This means that symptoms are reduced, although not always completely eliminated.

PROCEDURE  Allergy drops start at a very low dose. This dose is gradually increased on a regular basis until the therapeutic dose (often called the “maintenance dose”) is reached. The maintenance dose will differ from person to person. Drops are administered at home, daily. The first dose of every bottle will be administered in our office. Drops are placed under the tongue, held for two minutes, and then swallowed. They taste slightly sweet and are not unpleasant. No refrigeration is required.

Head & Neck Surgery ● Ear, Nose, Throat & Sinus Surgery ● Pediatric ENT ● Voice Analysis & Rehabilitation

Main Location Dayton Children’s Office Englewood Office Troy Office Centerville Office
1222 S. Patterson Blvd. One Children’s Plaza 9000 N. Main Street 1930 Prime Ct. 6601 Centerville
Suite 400 Lower Level / Area LC Suite 320 Troy, OH 45373
Dayton, OH 45402 Dayton, OH 45404 Dayton, OH 45415 Business Pkwy.
(937) 496-2600

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DURATION of TREATMENT

It usually takes several months to notice a difference in your symptoms. The time may be longer if there are reactions or if the drops are not administered on a regular basis. For this reason, it is important that the recommended schedule be followed. If you anticipate that regular use of the drops can not be maintained, immunotherapy should not be started. Immunotherapy may be discontinued at the discretion of your doctor. Most immunotherapy patients continue treatments for 3-5 years.

ADVERSE REACTIONS

Dozens of research studies show that allergy drops are a safe, effective form of immunotherapy. Local reactions for SLIT are uncommon and are usually restricted to mouth itching or stomach upset. Membranes under the tongue have fewer anti-inflammatory cells than the skin, making reactions far less likely. Dendritic cells under the tongue move the drops into the lymphoid tissue and then the immune response occurs. This process eventually creates allergen desensitization. Any mild reactions are more likely to occur at the very beginning of the treatment or as you reach the higher concentrations of antigens in your drops. The reactions usually occur immediately after taking a dose, but can occur hours after. Most of the time these reactions resolve themselves, or with simple dose adjustments. If needed, an antihistamine can be used as normally directed. As with the case of any type of immunotherapy, a severe allergic reaction known as anaphylaxis can occur. **Immunotherapy patients are required to have an emergency auto-injector of epinephrine.** Reactions are unpredictable and may occur with the first sublingual dose administration or after a longer time of taking the drops, with no previous warning. All generalized reactions require immediate evaluation and medical intervention. If a localized or generalized reaction occurs, the dosage of the drops may be adjusted for subsequent treatment. Please notify our office of any reactions.

MISSED DOSES and RESUMING TREATMENT

If more than one day of doses is missed, do not try to “catch up” by taking more than the daily prescribed dose. Call the Allergy office for instructions.
PREGNANCY and NURSING

Female of child-bearing potential: If you become pregnant while on immunotherapy, notify the office staff immediately, so your doctor can determine an appropriate dosage schedule for the drops during pregnancy. Immunotherapy doses will not be advanced during pregnancy or while nursing, but may be maintained at a constant level if approved by your OB physician.

NEW MEDICATIONS

Please notify the office staff immediately if you start any new prescription medication, particularly Beta Blocker medication for high blood pressure, heart problems, migraine headaches and glaucoma. Beta Blocker medications can not be used while on immunotherapy. Your drops will have to be discontinued.

Please call our Allergy office at 937-496-2620  Ext. 454