



1-877-604-8366  
www.dermatologyforanimals.com

## Atopy

Atopy or environmental allergies are quite common in dogs and cats. Environmental irritants may include pollens, molds, house dust mites, and even human dander. Some pets may have an allergic flare-up for only short periods in the spring and fall, while others show symptoms all year long.

Typical allergic signs in pets are scratching, face rubbing, obsessive licking of the feet, ear inflammation and infections, skin rash, pigmentation change and patchy hair loss. Allergies can also allow the skin and ears to become infected with bacteria or yeast. These secondary infections will then increase the overall “itch” level of the skin.

Unfortunately we cannot usually permanently “cure” allergies, but we can control and treat the symptoms. Pets with a short allergy season can be treated with low doses of steroids, fatty acids, antihistamines, frequent bathing, and wipe downs to remove pollens from the skin. This may be all that’s needed to keep your pet comfortable. Often times an antibiotic or anti-fungal agent will be added to combat a concurrent infection. Apoquel, Cytopoint, and Atopica (cyclosporine) are all non-steroidal options that can significantly ease your pet’s discomfort. These medications have been proven to be highly effective when used along with immunotherapy.

Pets who are seasonally allergic for longer periods may need intradermal allergy testing and immunotherapy or desensitization. This is the injection of allergens underneath the skin administered at home, or drops in the mouth daily. Desensitization stimulates the T-lymphocyte suppressor cells, blocking the immune system, which is hyperactive in an allergic patient. Immunotherapy is highly effective in seventy five percent of treated pets. Fifty percent of these pets respond to treatment in 3 to 6 months and twenty five percent of pets respond within 12 months. Most pets will need lifelong booster injections to continue immunotherapy. To begin immunotherapy, your pet must first be allergy tested. Testing is done by injecting different allergens common in your area under the skin and evaluating the reaction.

Please do not hesitate to contact us if you have any other questions about your pet’s allergies or the treatments we can offer.



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## Allergy Discharge Sublingual

### Post Intradermal Allergy Testing Instructions

- Due to the sedation, give only small amounts of water when arriving home and a light meal later in the evening.
- Topical steroids can be applied to the test patch if the area becomes irritated. We can prescribe or suggest an appropriate medication. A t-shirt may be helpful if your pet is severely itchy. Use sunscreen if the pet is a sunbather. The hair on the test patch area should grow back in 2-4 months.

### Sublingual Allergen Instructions

- Keep the allergen vial refrigerated. Do not freeze.
- Gently roll the allergen vial to mix the allergens prior to administration. Administer 1 pump under the tongue behind the bottom teeth (incisors) or in the lip margin. No food should be given 10 minutes before or after the allergen is given.
- Monitor your pet for 30 minutes after allergen administration for the first 7 days to watch for any rare reaction. Allergic reactions to watch for include: facial swelling, difficulty breathing, vomiting, diarrhea, hives, or increased itching. These kinds of reactions occur in less than 1% of pets. If you have an emergency situation, please contact your veterinarian or an emergency veterinarian's office. Please inform us of any adverse reactions.
- If you notice increased itching consistently after the allergen is administered, please call for further instructions.
- Please schedule a recheck examination in 6-8 weeks after skin testing, and at the end of the first vial of allergen.

A large number of pets will improve with immunotherapy; however the response is not immediate and every pet responds differently. We generally see a response within 2-18 months and most pets will continue to improve with time. Many pets will improve to the point of only requiring immunotherapy and others may need a low dose of steroids, Atopica (Cyclosporine modified), Apoquel, or Cytopoint. These medications do not interfere with the immunotherapy.