

Next Century Medical Care

Sublingual Immunotherapy Background Information for Patients

Immunotherapy

Specific allergen immunotherapy is prescribed for patients with allergic rhinitis (e.g. nasal allergies or hay fever) who may or may not have asthma. Immunotherapy is given as injections under the skin (i.e. subcutaneous immunotherapy or SCIT), liquid under the tongue (i.e. sublingual immunotherapy liquid or SLIT liquid), or as rapidly dissolving tablets under the tongue (i.e. sublingual immunotherapy tablet or SLIT tablet). Immunotherapy is the only medical treatment that can potentially cure or improve allergic disease long-term. In patients who have nasal allergies, injectable immunotherapy might prevent them from developing asthma. Research is ongoing to see if this holds true for SLIT as it is a newer form of immunotherapy. SLIT is considered for long-term control of allergen-induced rhinitis with or without conjunctivitis when the symptoms are not adequately controlled by environmental control measures and/or medications. SLIT has not been studied in individuals with moderate or severe asthma, or in subjects who required daily medication to treat asthma. SLIT is contraindicated in individuals with severe, unstable, or uncontrolled asthma. If SLIT tablets are not a covered service with your insurance, SLIT liquid may be a more cost-effective option. SLIT liquid is off-label, not FDA approved, and is not covered by insurances.

Effectiveness

Allergen immunotherapy can "turn down" allergic reactions to common allergens such as ragweed and grass. In most cases, taking sublingual immunotherapy is effective in reducing symptoms during the pollen seasons to which an individual is allergic. Sublingual immunotherapy may decrease sensitivity to allergens, resulting in improved symptoms and decreased need for medications. It is important to remember to take the SLIT daily. Missing your daily dose may decrease the effectiveness of SLIT and increase the risk for medication-related side effects. If you miss one dose of the medication, do not take double the SLIT dose the next time. It is important to only take one SLIT dose daily as prescribed. Please contact us if you miss your sublingual allergy medication so that dose adjustments or appropriate monitoring in our office can be initiated.

How is SLIT started and stopped?

There are generally two phases to immunotherapy: an initial phase and a maintenance phase

- **Initial phase:** The treatment is started at least 2-3 months before the season for which you are being treated. Expect to take your first dose of SLIT in our office. You will be observed for at least 30 minutes to ensure there is no allergic reaction. Dosing for SLIT liquid is different than SLIT tablets. Your healthcare provider will review dosing when starting.
- **Maintenance phase:** You will take SLIT at home every day at the same time each day. Continue to use the medication daily at least until the season for which you are being treated is over. In some cases, your healthcare provider may recommend that you continue taking SLIT perennially, especially if you are taking SLIT for dust mite allergy. You will take SLIT either seasonally or perennially for 3-5 years.

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Reactions to SLIT:

- It is possible to have an allergic reaction to the sublingual medication itself. Reactions can be local (i.e. swelling and or itching in the mouth) or systemic (i.e. affecting the rest of the body). The most common symptoms, which are most likely in the initial few days after starting the treatment, include throat irritation, mouth, tongue or ear itching, mouth swelling and for some individuals mild abdominal discomfort.
- Systemic reactions include nasal symptoms, hives, flushing, lightheadedness, and/or asthma-like symptoms, and very rarely, life-threatening reactions. Serious systemic reactions can occur in patients with worsening asthma not well-controlled on recommended medications. Therefore, if you have noted worsening of your asthma symptoms, notify your healthcare provider before continuing your sublingual medication. Although systemic reactions to SLIT are highly unlikely, it is important that you have self-injectable epinephrine with you (or your parent) at each daily dose. It is important that you understand how to self-administer this medication should it be needed.

How is SLIT taken?

Liquid:

Wash your hands prior to starting the dose administration.
Drop the specified number of liquid drops under your tongue.
Hold the liquid under your tongue for at least one minute.

DO NOT

- Swallow the liquid without holding it under your tongue for the specified time,
- Take the liquid with food or drink,
- Eat or drink within 5 minutes of taking the liquid.

Wash your hands after handling the liquid.

Tablet:

Wash your hands prior to starting the dose administration.
Hold the tablet under your tongue for at least one minute.

DO NOT

- Swallow the tablet whole,
- Take the tablet with food or drink, or
- Eat or drink within 5 minutes of taking the tablet.

Wash your hands after handling the tablet.

You are not a good candidate for SLIT if you:

- Have had anaphylaxis or a severe generalized or systemic allergic reaction to immunotherapy (i.e. allergy shots or a previous course of SLIT)
- Have uncontrolled or severe asthma
- Have eosinophilic esophagitis
- **Please inform our office if you notice any of these reactions.**