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Questions and Answers about Immunotherapy

What is immunotherapy?

Immunotherapy, or allergy shots, is a treatment for allergies, which involves gradually increasing doses of an extract made from allergens to which the patient is allergic. These injections cause the body to make an immune response, or tolerance, to the offending allergens. Successful treatment results in fewer allergy symptoms and a reduced need for medication. Asthmatics with allergies will also usually find a reduced need for asthma medications. A board-certified allergist has the special training needed to select the proper allergens and dosing schedule as well as monitor the effect of the immunotherapy.

Who should receive immunotherapy?

Immunotherapy is not for everyone, but is a valuable option for selected allergic individuals. It is usually not needed if the patient can easily avoid the offending allergens or the symptoms are easily controlled with infrequent or small doses of allergy medications. Immunotherapy should be considered for the following reasons:

1. If symptoms are not easily controlled with small or infrequent doses of medications;
2. If the medications that are needed for symptom relief cause unwanted side effects;
3. If frequent complications of allergy, such as sinus infections, ear infections, or allergic asthma develop; and/or
4. If a patient has had or is at risk of developing anaphylactic shock (a very serious allergic reaction) from a stinging insect, such as a wasp or yellow jacket.

On-going evidence shows that children with allergies but without asthma who receive immunotherapy are less likely to develop asthma. Other studies have shown that immunotherapy can prevent the development of new sensitivities to other allergens.

How is immunotherapy given?

- ♦ Immunotherapy is given by injecting allergenic extracts, or vaccines, just beneath the skin.
- ♦ Small doses with weaker extracts are given initially, with gradual increases in both amount and extract strength.
- ♦ They are usually given once a week initially, but occasionally are given more often during the build-up phase.
- ♦ After approximately 6 months of build-up, the maintenance dose is reached and injection intervals are then increased quickly to being given every two, three, and eventually, four weeks.
- ♦ Maintenance doses are generally given monthly for 3 – 5 years, but occasionally longer for asthmatics.

How effective is immunotherapy?

- ♦ Up to 85-90% of patients who are receiving high-dose maintenance immunotherapy will have a significant reduction in their allergic symptoms, as well as a reduction in the need for medication.
- ♦ This improvement should not be expected immediately as the immune response is accomplished gradually. It may take 6 – 12 months for full benefits to occur.

Can allergy medications be taken while on immunotherapy?

Yes, there is no interference with allergy or asthma medications and immunotherapy. In fact, patients should stay on their prescribed medications because it takes time for the immunotherapy to become effective. Once maintenance has been reached, patients usually notice less need for allergy medications. Patients should always check with the doctor before reducing medications for asthma.

Can pregnant women receive immunotherapy?

Allergy injections have been shown to be safe and effective in pregnancy, but it is not recommended to start it during pregnancy. Should a patient become pregnant while receiving immunotherapy, it is very important to notify the allergy office, as each case is different. As long as there have been no reactions to the shots, immunotherapy can be continued, although the dose is not usually increased. Continuing immunotherapy may lessen allergy symptoms for the patient, but will not prevent allergies in the newborn.

What if injections are missed due to illness or vacation?

Missing one or two weeks of injections is not a problem, however, repeated absences will make it difficult to advance immunotherapy effectively to achieve the best results. After a few weeks of missing injections, the doses will be adjusted for safety reasons to a lower amount. If a patient will be away for an extended period of time, such as for college, arrangements can be made to have extracts and instructions sent to another physician.

Is a doctor visit necessary for each injection?

No. Nurses will administer the shots after asking a few questions to make sure there are no current health problems or reactions to the previous injection. However, the patients are asked to see the doctor at least every 12 months to be sure the immunotherapy plan is appropriate and effective. Asthmatics should see the doctor every 6 months or more frequently if the asthma has not been under good control.

Is immunotherapy safe?

Millions of injections have been given annually since the early 1900's. Allergy injections usually cause no immediate problem. But, because the injections contain the allergens to which the patient is allergic, local reactions (swelling and itching) and, rare systemic reactions (whole body itching/hives, swelling of the throat, lightheadedness, wheezing, drop in blood pressure) can occur. Risk of death is extremely rare.

Because there is a small risk of these more severe reactions, **allergy injections should be given at a medical facility, since reactions require immediate treatment. The patient must also wait 30 minutes after each injection so that immediate treatment can be given if needed.** Should a generalized reaction occur after leaving the office, the patient should return immediately or go to the nearest emergency medical facility. More sensitive patients may be asked to carry self-injectable epinephrine on injection days. Strenuous activity should be avoided for 2 hours after injections to decrease the chance of a reaction.

Are appointments necessary?

No, injections are given on a first-come, first-served basis. Because patients are required to wait 30 minutes, the last injections will be given 30 minutes prior to closing.

Any questions? Feel free to ask our staff at any time should concerns or questions arise.