

## Immunotherapy Consent Form

### What is Immunotherapy?

Allergen immunotherapy is a form of treatment aimed at decreasing your sensitivity to substances called allergens. These allergens are identified by allergy testing, and are the substances that trigger your allergy symptoms when you are exposed to them. There are two types of allergy immunotherapy: sublingual drops which can be administered at home and traditional allergy injections. Allergen immunotherapy involves injecting or dropping increasing amounts of an allergen to a patient over several months. Immunotherapy has been shown to prevent the development of new allergies and, in children, it can prevent the progression of the allergic disease from allergic rhinitis to asthma. Allergen immunotherapy can lead to the long-lasting relief of allergy symptoms after treatment is stopped.

### Who should be treated with Immunotherapy?

Immunotherapy is recommended for people who are allergic to an unavoidable plant or animal and take large amounts of medication to control symptoms but still have allergies. The decision to begin immunotherapy will be based on several factors including:

- Length of allergy season and severity of symptoms.
- How well medications and/or environmental controls control allergy symptoms.
- Desire to avoid long-term medication use.
- Time: immunotherapy shots will require a significant time commitment. Immunotherapy drops can be done at home.
- Cost-may vary depending on insurance coverage. The cost of one month of immunotherapy is often equal to the co-pay of one month of allergy shots.

### How does immunotherapy work?

Allergen immunotherapy works like a vaccine. Your body responds to the injected amounts of a particular allergen, given in gradually increasing doses, by developing an immunity or tolerance to the allergen(s). As a result of these immune changes, immunotherapy can lead to decreased, minimal or no allergy symptoms when you are exposed to the allergen(s) included in the allergy vaccine.

There generally are two phases to immunotherapy: a build-up phase and a maintenance phase.

- **Build-up phase:** involves receiving injections or drops with increasing amounts of the allergens. The frequency of injections (for those receiving shots) during this phase generally ranges from 1-2 times a week, though more rapid build-up schedules are sometimes used. The duration of this phase generally ranges from 3-6 months.
- **Maintenance phase:** This phase begins when the effective therapeutic dose is reached. The effective maintenance dose is different for each person, depending on their level of allergen sensitivity and their response to the immunotherapy build-up phase. Once the maintenance dose is reached, there will be longer periods of time between immunotherapy treatments. The intervals between maintenance immunotherapy injections generally ranges from every 2 to 4 weeks. If taking drops, you will follow the regimen determined by your physician at home.

The benefits of immunotherapy, in terms of reduced allergy symptoms, can begin during the build-up phase but may take as long as 12 months on the maintenance dose. Improvement with immunotherapy may

be progressive throughout the immunotherapy treatment period. Effectiveness of immunotherapy appears to be related to length of treatment and the dose of the allergen.

Failure to respond to immunotherapy may be due to several factors including:

- Inadequate dose of allergen in the allergy vaccine.
- Missing allergens not identified during the allergy evaluation.
- High levels of allergen in the environment
- Significant exposure to non-allergic triggers (i.e tobacco smoke)

If there is no improvement after a year of maintenance immunotherapy, possible reasons for failure to respond should be explored. If no apparent reason is found then discontinuation of immunotherapy should be considered and other treatment options should be pursued.

### **When should immunotherapy be stopped?**

If immunotherapy is successful, maintenance treatment is generally continued for 3-5 years. The decision to stop immunotherapy should be discussed with your physician after 3-5 years of treatment.

Some individuals may experience lasting remission of their allergy symptoms but others may relapse after discontinuing immunotherapy. Therefore, the decision to stop immunotherapy must be individualized.

### **What are the possible reactions?**

There are two types of adverse reactions that can occur with immunotherapy:

- **Local reactions**(allergy shots only): fairly common and present as redness and swelling at the injection site.
- **Systemic reactions:** much less common than local reactions. Systemic reactions are usually mild and respond rapidly to medications. Symptoms can include increased allergy symptoms such as sneezing, nasal congestion or hives. Rarely, a serious systemic reaction, called *anaphylaxis*, can develop after an immunotherapy injection. In addition to the symptoms associated with a mild systemic reaction, symptoms of an anaphylactic reaction can include swelling in the throat, wheezing or a sensation of tightness in the chest, nausea, dizziness or other symptoms.

Systemic reactions require immediate treatment. Most serious develop within 30 minutes of the allergy injections and this is why it is recommended you wait in the office for 30 minutes after your allergy injections.

If you have read the above information and agree to start either immunotherapy injections or sublingual immunotherapy(drops), please sign and date below.

Patient signature \_\_\_\_\_ date \_\_\_\_\_

Witness \_\_\_\_\_ date \_\_\_\_\_