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Sublingual Immunotherapy Tablets (SLIT)

Immunotherapy

Specific allergen immunotherapy is prescribed for patients with nasal/eye allergies who may or may not have asthma. Immunotherapy is given as injections under the skin, or as rapidly dissolving tablets under the tongue for **grass & ragweed** (known as SubLingual allergen ImmunoTherapy or SLIT). 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.

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 sublingual pills 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 two pills the next time. It is important to only take one tablet 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 and for how long are the tablets given?

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

- **Initial phase:** The treatment is started at least 3 to 4 months before the pollen season for which you are being treated. Expect to take your first dose of the sublingual tablet in our office, You will be observed for at least 30 minutes to ensure there is no allergic reaction.
- **Maintenance phase:** You will take a sublingual tablet at home every day at the same time each day. Continue to use the medication daily at least until the pollen season for which you are being treated is over. In some cases your physician may recommend that you continue taking sublingual tablets year round.

How are the tablets taken?

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.

DO 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 (allergy shots or a previous course of SLIT)
- have uncontrolled or severe asthma
- have Eosinophilic Esophagitis

Reactions to SLIT:

- It is possible to have an allergic reaction to the sublingual medication itself. Reactions can be local (swelling and or itching in the mouth) or systemic (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 nurse or physician 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.
- **Please inform our office you notice any of these reactions.**