Naval Medical Center Portsmouth
Allergy/Immunology Referral Guidelines: Allergen Immunotherapy (aka- allergy shots)

Definition

- “Allergen immunotherapy is the repeated administration of specific allergens to patients with IgE-mediated conditions for the purpose of providing protection against the allergic symptoms and inflammatory reactions associated with these allergens.”
  - Immunotherapy may include pollens, dander, molds, cockroach, dust mite (AIT) as well as stinging insect venom (VIT).
  - Sublingual immunotherapy (SLIT) is not more effective and is not utilized.

Evaluation and Management

- **Candidates for allergen immunotherapy have poorly controlled asthma, rhinitis or life threatening reactions to stinging insects** with evidence of clinical sensitization based on skin testing to suspect allergens. **AIT is performed as young as 3 years of age.**
  - Blood allergy testing is not used to write an AIT prescription.
- Medical management of patients will continue under the supervision of the allergist.

Treatment objectives:

- At the end of 3-5 years, complete symptom remission and minimal or no medication use.
- Efficacy of therapy is long-lasting, on average 15-25 years or longer in some cases.

Indications for Specialty Evaluation:

- **Referring providers should document that the patient or parent are interested in AIT as a disease modifying therapy in the body of the consult. Ideal candidates:**
  - Persistent asthma, especially if poorly controlled.
  - Allergic rhinitis unresponsive to consistent use of antihistamines AND nasal steroids.
  - Multiple medications and avoidance measures have failed to adequately control symptoms OR patients desire to decrease their medication burden.
  - Immediate life threatening reactions to stinging insects (wasp, bees, hornets, yellow jackets or fire ants).
  - Atopic dermatitis patients with allergic rhinitis or asthma will be considered for AIT.
- **PCM’s may use blood allergy testing for patients not meeting above criteria.**
  - AHLTA: NC/VA panel < 3 years of age, Wide-RAST > 3 years of age. (Completely negative tests < 0.35 kUa/L effectively exclude allergy.)
  - [www.AAAAI.org](http://www.AAAAI.org) or [www.ACAAI.org](http://www.ACAAI.org) are websites with helpful patient information to guide avoidance measures.

Return to Primary Care:

- The patient does not meet criteria for AIT or is uninterested in treatment after education/counseling and initiation of maintenance therapy.