Northside Allergy Associates

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Sublingual Immunotherapy: An alternative to allergy shots

Sublingual immunotherapy (SLIT) is a method of treating allergies by desensitizing individuals to allergens over time (1). Unlike medications, which only treat the symptoms, immunotherapy treats the underlying cause of allergies. The goal of SLIT is that the patient will develop a tolerance to the allergens that are in the serum.

Sublingual immunotherapy (SLIT) is similar to subcutaneous immunotherapy (SCIT), also known as allergy shots. With both methods, the allergies are treated with low doses of allergens in order to train the body not to react to them. The difference being that SLIT is a method of treatment that uses drops given under the tongue, rather than injections. SLIT is often called allergy drops. Allergy drops are less intrusive than allergy shots, and are therefore more tolerable, especially for children.

Although it may seem to be fairly new treatment option in the United States, SLIT has actually been in practice since the early 1900s (1). SLIT gained wide acceptance in the United States during the late 1990s. SLIT has an excellent safety profile and is generally considered safer than allergy shots. In 1998 the World Health Organization concluded that SLIT was a viable alternative to allergy injections and that its use in clinical practice is justified (1).

Allergy drops are given under the tongue daily. They can be given at home. The dose is gradually increased over the first 10 days, and then the patient will reach their maintenance dose. With allergy shots, it can take the patient a year to reach the maintenance dose.

At this time, SLIT is not covered by insurance. However, since it is much easier to administer and is generally done at home, SLIT is often cheaper and more convenient for patients when compared to SCIT. The patient reduces his/her out of pocket expenses in the form of co-payments, travel, and time missed from work or school (2).

REFERENCES

- 1. Combiths, S. (2011). Sublingual immunotherapy offers hope of a cure for allergies. Retrieved July 8, 2011 from http://
- www.achooallergy.com/slit-allergy-cure.asp 2. Garcia-Ibanez, R. & Pollina, D. (2008). Sublingual immunotherapy (SLIT) in a standard American allergy practice. The Internet Journal of Asthma. Allerey and Immunology. Volume 6(2).

9 Things you can do to minimize exposure to allergens:

- 1. Keep windows and doors closed, keep air filters and ducts clean and use a dehumidifier to minimize mold growth.
- 2. If you're driving, keep the windows closed and use the air conditioner.
- 3. Try to stay indoors during hours that pollen counts are highest (between 5-10am).
- 4. Avoid mowing the lawn and freshly cut grass.
- 5. When working around the yard, wear a filter mask.
- 6. Machine dry your laundry or hang it inside to dry. It may collect pollen if hung outside.
- 7. Vacuum instead of sweeping.
- 8. Shower immediately after coming in from outdoors.
- 9. Avoid areas with lots of allergens like basements and barns.

An excerpt from: DoctorSolve Healthcare Solutions, Inc. (April 2010). Allergy season is here. Retrieved July 8, 2011, from http://www.doctorsolve.com/Newsletters/03-10AllergyNewsletter.html

Get to know us...



Dr. Oliver is a board certified otolaryngologist and head and neck surgeon at Rochester General Hospital. He is also a Fellow of the American Academy of Otolaryngic Allergy and directs the allergy portion of his practice, Northside Allergy Associates. He completed his residency training at Yale University and medical school at the University of Rochester. He received his Bachelors of Science in Biochemistry from the State University of New York at Stony Brook.



Melissa Orman is a Registered Nurse, and is in charge of allergy testing and treatment. Melissa graduated from Nazareth College in 2007, with a bachelor of science in nursing degree. Melissa is a member of the American Academy of Otolaryngic Allergy (AAOA) and the Society of Otorhinolaryngology and Head-Neck Nurses (SOHN).



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