

Sublingual Immunotherapy (SLIT)



The FDA has recently approved several new medications for the treatment of allergic rhinitis known as sublingual immunotherapy (SLIT).

Current "allergy shots" are also known as subcutaneous immunotherapy (SCIT). SCIT works by causing immunologic changes that allow a patient to be exposed to allergens without symptoms. This applies to environmental allergens such as trees, grasses, weeds, molds, dust mites, cockroach, pet danders, and insect venoms. SCIT is effective in treating allergic rhinitis, but is also the only therapy which actually modifies the course of asthma. The major limitations of SCIT are the need for repeated clinic visits and the very rare risk of severe allergic reactions.

HOW DOES IT WORK?

Sublingual immunotherapy (SLIT) induces tolerance to the offending allergens by the same mechanism as SCIT, but the allergens are given orally in a dissolvable tablet. Currently, there is no known benefit in modifying asthma. These tablets are available for grass and ragweed pollen and dust mites. SLIT is approved for adults up to 65 years of age and in some cases in children as young as 5 years of age. The grass tablets do not treat two of our major southern grasses, Bermuda and Bahia. These tablets are also not helpful for patients with allergies to tree pollen, pet dander, or molds.

WHEN CAN IMMUNOTHERAPY BE HELPFUL?

SLIT is an addition to currently available treatment options for allergic rhinitis and is not a replacement for SCIT. Allergic rhinitis is a complex disease, and not all patients will benefit from SLIT. Discuss with your doctor to find out if this therapy is right for you. Insurance may cover SLIT to some degree.

RISKS

The major side effects of SLIT are oral itching, throat irritation, mouth swelling, and ear itching. Oral itching occurs in over 50% of patients at one time or another, but severe life threatening reactions are very rare. The tablets must be taken daily. For pollen, it works best if started 12 weeks before the allergy season. The first dose must be given in a clinic followed by at least 30 minutes of observation. An EpiPen must be kept available at all times in the rare case of an allergic reaction. If several doses of SLIT are missed, the patient must return to clinic to restart the therapy. SLIT may be associated with an increased risk of eosinophilic esophagitis, which causes narrowing of the esophagus.

PRACTICAL TIPS FOR SLIT

- Tablet should be taken once daily
- Tablet should be placed under the tongue, NOT chewed or swallowed whole
- Do not swallow for at least one minute after use
- Do not brush teeth or eat/drink for 5 minutes after use
- Have injectable epinephrine (EpiPen, Auvi-Q) available at all times
- Hold the dose if asthma is unstable/ actively wheezing
- Contact your doctor if several doses are missed