Ear, Nose, & Throat Consultants, Inc.

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INJECTION AND IMMUNOTHERAPY TREATMENT

The results of your allergy testing indicate you are a candidate for receiving allergy injections (immunotherapy). The key to successful allergy treatment is patient communication and awareness. Your weekly dosage is titrated based on your symptoms. Foods, chemicals, stress and environmental changes play a part in your allergy symptom management.

Some general information regarding your treatment

- 1. Treatment is most effective if given year-round. Every 7 days is the usual time between injections. Please try to be consistent, especially during build-up. After a maintenance dose is reached, you may miss up to 3 weeks without altering your dose (ie: vacation, sickness, etc.).
- 2. Allergy immunotherapy over a 3-5 year period is often necessary for optimal relief (and antibody formation). Immunotherapy is not a "cure" and varies with each individual.
- 3. Symptomatic improvement is usually noticed within 12 to 36 weeks from initial injections, but can take up to 1 year in very sensitive persons.
- 4. There is usually no significant reaction to your injections. Taking an antihistamine prior to your injection minimizes stinging, local itching and swelling at the site. You must wait **20 minutes** in the office after injections. If you have a large local reaction after the 20 minute wait, please notify us. In the case of a general or systemic reaction: Use immediate emergency medical treatment. Call 911.
- 5. If you are ill, have any skin rash, hives, poison ivy or are taking a new medication, please notify us **prior** to your injection.
- 6. Allergy injections are not known to interfere with any immunizations, but as a precaution, we recommend that you allow several days between your injection and any immunization (ie: flu, pneumonia).
- 7. If you become pregnant while undergoing immunotherapy, you need your obstetrician's written approval to continue desensitization.
- 8. If asthmatic, you are advised to do a peak flow prior to your injections. If peak flow decreases by 20% or more from your best peak flow, you should not get your injection, and need to schedule an appointment with your doctor.

A small percentage of patients may not respond well or at all to allergy treatment, or the treatment may even worsen symptoms or cause a reaction. In order of increasing severity, the following brief descriptions explain the nature of these potential reactions:

- A. LOCAL REACTIONS: Local reactions from injections are common and are usually restricted to a itching or redness, swelling. These reactions are more likely to occur at the very beginning of treatment, or as you reach the higher concentrations of antigens. The reactions usually occur immediately after taking a dose, but can occur hours after. Most of the time these reactions resolve themselves, or can be eliminated with simple dose adjustments. Antihistamine can be used as normally directed. You should notify your Provider if you have these reactions for over one hour.
- B. GENERALIZED REACTIONS: Generalized reactions occur very rarely, but are the most

important because of the potential danger of progression to more severe conditions. These reactions may include:

- (1) Urticaria reactions (hives) include varying degrees of rash, swelling, and/or itching of more than one part of the body. There may be mild to moderate discomfort, primarily from the itching. This uncommon reaction typically occurs within minutes of taking a dose.
- (2) Angioedema is rare, characterized by swelling of any part of the body,inside or out, such as the ears, tongue, lips, throat, intestine, hands, or feet, alone or in any combination. This may occasionally be accompanied by asthma symptom onset and may progress to the most severe reaction, anaphylactic shock. In the absence of shock, the principle danger lies in suffocation due to swelling of the airway. Angioedema may occur within minutes after the allergy injection is taken and requires immediate medical attention.
- (3) Anaphylactic shock is a serious event characterized by acute asthma, vascular collapse (low blood pressure), unconsciousness, and potentially death. The possibility of it happening does exist. For these types of reactions you are required to have an epinephrine injector available to you during injection immunotherapy.

The above reactions are unpredictable and may occur with the first injection or after many injections with no previous warning. All generalized reactions require immediate evaluation and medical intervention. If a localized or generalized reaction occurs, dosage will be adjusted for subsequent treatment.

Appropriate advice and treatment will always be available from our office staff at the time of any adverse reaction. Consult with your Provider immediately if these reactions occur, or if you decide to discontinue treatment for any reason.

Our testing and treatment is done very conservatively by trained medical assistants, nurses and physicians. Due to the injections of allergens (which you are allergic to) into your system, the potential of an anaphylactic reaction is always possible, although extremely rare.

I have read and understand this information:

Date:		
Name:		
Signature:		
Witness:	Date:	
Legal Guardian if under 18:		

Affiliated With Winchester Hospital And Massachusetts Eye and Ear Infirmary