



**Allergy & Asthma
Associates
of Southern California**

Leading-edge, personalized care you can trust

27800 Medical Center Road • Suite 244 • Mission Viejo, CA 92691
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www.SoCalAllergy.com



**The Food Allergy
Center**

AT ALLERGY & ASTHMA ASSOCIATES
OF SOUTHERN CALIFORNIA

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ORAL IMMUNOTHERAPY

QUESTIONS (AND ANSWERS) CONCERNING ORAL IMMUNOTHERAPY (OIT)

You or a family member may be starting treatment for food allergy, also known as oral immunotherapy (OIT). This handout is designed to help answer the most common questions about OIT. Please feel free to speak with one of our staff members if you have additional questions, or if new questions or problems arise. By working together on your treatment plan, we will have the best opportunity for good control of your allergy symptoms.

How long will the first visit take?

The first-day procedure will take between three to six hours. If there are no reactions during the escalation phase, your child may be eating a full serving of the allergenic food in six months or less.

Should routine allergy medications be stopped before the first-day procedure?

No. Patients should take all routine medications as they normally would during OIT.

What is the projected treatment protocol after the first day of OIT?

Progression of treatment is dependent on each individual patient's reaction to the allergens. If everything goes well, the amount of the allergenic food ingested during the second to third month will increase, with a whole serving of the allergenic food possibly being ingested between the fourth to sixth months.

How often can the dose be increased?

The interval between dose increases is a minimum of seven days but may be longer if needed.

What time of day should home doses of the allergenic food be given?

We prefer doses are given in the morning, allowing monitoring of the effect all day. However doses can be given in the evening as long as the patient is observed for at least 2 hours. Doses should be given approximately 24 hours apart.

Call our office at **949-364-2900** ext. 1879 and speak with Chanté at the Food Allergy Center to ask a question or to arrange for an appointment.



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How long should my child stay awake after the evening dose?

Children should be observed for at least two hours after the dose is given. They should not be allowed to sleep during this time.

What should be done at home, on the day of the office visit for dose increase?

NEVER increase the dose at home. On the day of dose increase, hold the normal dose given at home.

If there is a reaction at home, what should I do?

Treat the reaction the same way you would any food reaction; give an antihistamine if there is just itching and administer the Epi-Pen® if there are other symptoms of anaphylaxis such as swelling or shortness of breath. Call us after the appropriate immediate intervention. We will give instructions on future dosing.

What if we are flying when the dose is due?

Do not administer the dose while flying. If you can administer the dose at least two hours before leaving for the airport, that will allow enough time to determine any reaction to the food before your flight. A letter explaining the procedure and need for food solutions for the Transportation Safety Authority is available upon request.

Does the food solution need refrigeration?

There are no preservatives in the food solution, thus it MUST be refrigerated.

What do I do if refrigeration is not maintained or if it smells or tastes different?

If the sample sits out for more than 30 minutes, or if it appears to have spoiled, the solution must be replaced. Please call the office. If replacement is made during regular office hours, there is no charge. If replacement must be made at night or on a weekend or holiday, there will be a charge of \$150. This fee cannot be charged to your insurance and must be paid when you pick up the new solution.

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What if I will be out of town and will need additional doses?

Call as soon as you know you will need more doses. You must be able to tell us the concentration and amount of the current dose. If a staff member needs to come in at night or on a weekend or holiday, there will be an additional charge of \$150. This fee cannot be charged to your insurance.

What if my child is sick and can't take the doses on schedule?

Call us immediately if your child becomes ill. The dose should not be given if he/she is sick. We will typically reduce the dose or hold it until there are at least two full days when there is no illness. After that, the provider will determine how to resume dosing.

What can I do to mask the taste of the food solution?

Taste is personal, so feel free to experiment. The peanut solution may be mixed with Crystal Light® or cranberry-grape juice; please let us know the flavor your child would prefer at their first appointment. Try to give the dose in one bite to ensure that the entire dose of oral immunotherapy mixture is taken. Once your child is on solid peanuts, dark chocolate can help mask the taste.

What is the goal of this process?

The number-one goal is safety; to allow the patient to ingest foods that contain the allergenic without reactions or worry.

What is the follow-up schedule when maintenance dosing is reached?

It will take several months of weekly visits until you have reached the maintenance dose. When the full dose has been reached, there is a follow-up at one month (with lab) and then every three to six months. Food-specific IgE levels will be drawn before starting OIT and early in maintenance dosing.

Does my child need to avoid exercise during the oral immunotherapy process?

Exercise should be avoided for at least two hours after dosing and doses should not be given immediately following exercise. Exercise around the time of dosing increases the chance of a reaction. Exercise restriction applies to both escalation and maintenance dosing. If exercise cannot be avoided during this time, then your child is not a candidate for OIT.

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Can two oral immunotherapy foods, one on maintenance dose and one on increasing dose, be given at the same time?

Yes.

If my child is allergic to multiple foods, will completing OIT for one food help treat other food allergies?

Each OIT program is food-specific. Completing one program does not treat other food allergies. Ask your provider for more specific information for treating multiple food allergies.

How soon after completion of the oral immunotherapy process can a second oral immunotherapy program be performed for another food?

Your child may begin a second oral immunotherapy program after he/she has been stable on a maintenance dose for one month.

What if my child does not get immunizations or is behind on scheduled immunizations? Can he/she start the OIT program?

No. Your child must be up-to-date on all scheduled immunizations before starting any of the oral immunotherapy programs.

How is the oral immunotherapy program billed and what does it cost?

The cost to you will depend on your insurance coverage. The very first visit with the doctor is billed as a new consult and any skin testing that is needed may be done at that time. In addition, any lab work that is needed will be ordered at that time. All of the desensitization visits are billed as a follow-up visit with rapid desensitization (95180). The actual reimbursement varies by insurance plan. We strongly advise you to contact your insurance carrier to understand what your insurance coverage is and what your actual cost will be prior to the desensitization visits. Our office will be happy to assist you if needed.

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