

FAMILY ALLERGY CENTER, P.C.

13890 BRADDOCK ROAD SUITE 206 • CENTREVILLE, VIRGINIA 20121-2437 • (703) 263-2333 • FAX (703) 263-0361

KENNETH R. BERGMAN, M.D.
CATHERINE THAL-LARSEN, F.N.P.

IMMUNOTHERAPY (INJECTION THERAPY)

Background Information

When an allergen cannot be avoided or when symptoms are severe, immunotherapy is used to lessen sensitivity. It consists of a series of injections usually called allergy shots. The allergy extract used in these injections contains small amounts of the things to which you are allergic. When injected, this extract causes your body to form antibodies which block the allergen. This treatment will result in fewer symptoms. In general, a successful response results in 80-90% decreased symptoms.

Frequency of Injections

Initially injections are given on a weekly basis until a *maximally tolerated dose* or *top dose* is reached. This dose then remains generally fixed at that level. Then over a period of time, and according to the patient's improvement, the interval between injections is gradually increased (i.e. every 2 weeks, every 3 weeks) until the patient can receive them once a month and continue to do well. The more regularly one receives the injections the more benefit one will receive. A number of individuals may be able to discontinue their immunotherapy after about 4 years, and do well without allergy injections.

Who Gives the Injections

Injections are started in this office and continued here, or at the office of a pediatrician or family physician who will continue to give the injections per direction of this office. Injections must be given in a physician's office, urgent care center, or other facility where a physician is present. **The patient must be observed for 20 minutes after receiving injection(s).** This is necessary since there is a possibility of experiencing an allergic reaction after injection (i.e. hives, throat tightness, wheezing, drop in blood pressure), and this reaction must be treated immediately. Swelling may occur where the injection was received. This may be treated with ice and antihistamines, and usually resolves within a few hours. If this occurs, please notify the nurse of your reaction before receiving your next injection. Dosages and reactions also must be recorded on a record sheet, which is to be returned to this office after completion of the initial set of vials.

Refills or Full Strength Vials of Allergy Serum

When you have completed your injection schedule, this office will supply you with "refills" as often as they are needed. The routine is as follows:

- 1.) You must notify this office that you need a refill of your allergy serum. Your serum will be ready in two weeks. If your insurance company requires a referral, your serum will be ready two weeks after your referral arrives in this office.
- 2.) You should then schedule a shot appointment at this office for your first injection from the new vial. You need an office visit with the doctor or nurse practitioner when you are ready for your maintenance vial (vial #5), and whenever the frequency of injections is due to be changed. At a minimum, this will be on a yearly basis.

- 3.) In order to lessen the chance of an allergic reaction, when receiving a new refill vial, we require that the dosage be decreased, and advanced *weekly* in scheduled increments until your maintenance dose is reached again. At that time you may resume your regular shot interval.
- 4.) All injections will be recorded on your "treatment/shot record". **Please remember to bring this record with you when you return here for your new serum.** This gives us factual data regarding your "allergic process" and enables us to make any corrective changes that may be indicated.
- 5.) New serum **will not** be released without shot records.
- 6.) Payment in full is required for all allergy serum before it can be released from this office. Additionally, since serum is unique for each patient, and requires both materials and professional time to compound, once it has been ordered and made, it is considered your financial obligation to provide payment for these services.

Thank you for your cooperation and understanding in all of these matters. We will be happy to answer any questions concerning your immunotherapy program.