

Sub-Lingual Immunotherapy (SLIT)

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Disclosure Statement

- Advisory Board-Speaker's Bureau Teva Pharmaceutical
- There is no commercial bias in this presentation

Immunotherapy

- Involves giving gradually increasing doses of the substance, or allergen, to which the person is allergic
- “The incremental increases of the allergen cause the immune system to become less sensitive to the substance, probably by causing production of a "blocking" antibody IgG), which reduces the symptoms of allergy when the substances is encountered in the future” ACAAI website

SLIT

- Goal is the same as with injections however the antigen is administered sublingually
- First dose administered under medical supervision and patient monitored for 30 minutes
- Subsequent therapy is done at home

Oralair®

- Indicated in patients 5-50 years
- For treatment of moderate to severe seasonal grass pollen AR with or without conjunctivitis
- For patients who have had symptoms for at least two pollen seasons
- For patients who have not adequately responded to conventional pharmacotherapy

Oralair®

- AR confirmed by clinically relevant symptoms and a positive cutaneous test or a positive in vitro testing for the specific IgE to ANY of the following:
 - Perennial rye grass
 - Orchard grass
 - Timothy grass
 - Blue grass
 - Sweet vernal grass

Oralair®

- Should only be prescribed and initiated by physicians with adequate training and experience in the treatment of allergic diseases
- In adults should be discontinued if no improvement is noted after three seasons
- In pediatrics discontinue if no improvement after one season

Oralair® Dosing

- Peds (5 to 17) 100 IR day 1 200 IR day 2 and 300 IR daily thereafter
- Adults 300 IR daily
- Begin treatment 16 weeks prior to estimated season and continue through season
- Place under tongue, hold there for at least 1 minute or until fully dissolved
- Nothing to eat or drink for 5 minutes after ingestion

Oralair® Adverse Effects

- Oral pruritus (25%)
- Throat irritation (22%)
- Ear pruritus (8%)
- Mouth edema (8%)

- Product WAS NOT studied in patients with moderate or severe asthma OR patients requiring daily controller therapy

Grastrek®

- Timothy grass only
- Timothy cross reacts with
 - Sweet vernal
 - Orchard
 - Perennial rye
 - Kentucky (blue) grass
 - Meadow grass
 - Redtop grass

Grastek®

- Indicated for ages 5 to 65 years
- For treatment of moderate to severe seasonal grass pollen AR with or without conjunctivitis
- Contraindicated in patients with:
 - Severe, unstable or uncontrolled asthma
 - A history of any severe systemic or local allergic reaction
 - A history of eosinophilic esophagitis (EoE)

Grastek® Dosing

- One tablet (2800 BAU) dissolved under the tongue starting at least 12 weeks prior to season and continued throughout the season
- No food or water for 5 minutes after taking
- May be taken daily for three consecutive years for sustained effectiveness for one season after stopping

Grastek® Adverse Effects

- Ear pruritus
- Oral pruritus
- Tongue pruritus
- Mouth edema
- Throat irritation
- Epinephrine auto-injector should be prescribed

Grastek® Warnings and Precautions

- Beta blockers
- ACE inhibitors
- Other drugs that may potentiate effects of epinephrine
- Upper airway compromise
- EoE
- Asthma - not studied in patients with moderate to severe asthma
- Not studied with other SLIT therapies

Ragwitek™

- Indicated for ages 18 to 65 years
- For treatment of moderate to severe seasonal ragweed pollen AR with or without conjunctivitis
- Contraindicated in patients with:
 - Severe, unstable or uncontrolled asthma
 - A history of any severe systemic or local allergic reaction
 - A history of eosinophilic esophagitis (EoE)

Ragwitek™ Dosing

- One tablet (12 Amb a 1-U) dissolved under the tongue starting at least 12 weeks prior to season and continued throughout the season
- No food or water for 5 minutes after taking

Ragwitek™ Adverse Effects

- Ear pruritus
- Oral pruritus
- Tongue pruritus
- Mouth edema
- Throat irritation
- Oral paraesthesia
- Epinephrine auto-injector should be prescribed

Ragwitek™ Warnings and Precautions

- Beta blockers
- ACE inhibitors
- Other drugs that may potentiate effects of epinephrine
- Upper airway compromise
- EoE
- Asthma - not studied in patients with moderate to severe asthma
- Not studied with other SLIT therapies