

What is Allergic Rhinitis (Hay Fever)?

Allergic rhinitis (commonly known as hay fever) is one of the most common allergic conditions, affecting 1 in 5 adults, one in 10 teenagers and an estimated one in 20 young children. Symptoms are triggered by an immune response to otherwise harmless triggers such as pollen, house dust mite, mould or animal dander.

Signs and symptoms of hay fever may include a runny/itchy/blocked nose, lots of sneezing and watery/itchy eyes. One in five people with hay fever can also get symptoms of asthma with wheezing and shortness of breath. Those allergic to ryegrass are more prone to thunderstorm asthma, where sudden/severe attacks of asthma occur in spring and summer when pollen levels are high and storms occur nearby.

Hay fever is considered severe if your hay fever symptoms lead to you having one or more of the following:

- Disturbed sleep leading to daytime drowsiness
- Frequent waking due to breathing symptoms
- Restricted daily activities, sport or leisure
- Abnormal work and school performance

If symptoms are ongoing or difficult to control, even when taking medication, your doctor may refer you to a clinical immunology/allergy specialist for management. You can also request a referral. Your specialist will review your symptoms and treatment and may discuss long term treatment known as allergen immunotherapy.

Always follow the treatment plan as prescribed by your doctor. Contact your doctor if you have any questions or concerns.

For more information on allergy management contact Allergy & Anaphylaxis Australia.

**Call: 1300 728 000
Visit www.allergyfacts.org.au**

For more helpful information on immunotherapy visit the Australasian Society of Clinical Immunology and Allergy (ASCIA).

Visit: www.allergy.org.au

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**Is your Allergic Rhinitis (Hay Fever) difficult to manage?
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Immunotherapy for Allergic Rhinitis (Hay Fever)

What is Allergen Immunotherapy (AIT)?

Allergen Immunotherapy (AIT) has been used for over a 100 years and is a proven treatment providing long-term relief from hay fever symptoms. The aim of AIT is to help people react less to their trigger allergen/s (e.g. house dust mites/pollens) that cause symptoms. This means having no/less symptoms and a better quality of life.

Who can benefit from AIT?

AIT can benefit many people including;

- Those who have severe symptoms that are not being controlled by over the counter and prescribed medications.
- Those who wish to reduce the need for long term antihistamines and nasal sprays.
- Those who find it difficult to avoid their trigger allergen (e.g. house dust mites/grass pollens).
- Those who do not wish to avoid the trigger, such as those working with animals or who want a pet but are allergic to them.

Those wanting to know more about AIT should always seek medical specialist advice. In those with severe asthma, the option of immunotherapy needs to be carefully assessed with medical specialist advice. A medical specialist may carefully progress AIT in people with asthma as it may improve asthma control.

Treatment in women who are pregnant or planning a pregnancy should not be started, although it can be continued if a woman is on AIT and then becomes pregnant. AIT can be continued when breastfeeding.

AIT treatment is not common in children under five years of age, as often, they are not cooperative.

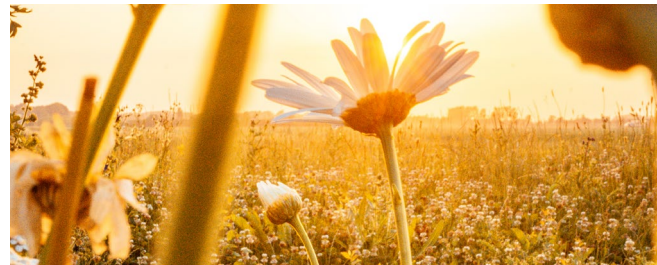
How is AIT delivered?

In Australia, AIT can happen using different methods including by injection (sub-cutaneous immunotherapy or SCIT) or by spray, tablet or drop left to dissolve under the tongue (sub-lingual immunotherapy or SLIT) before being swallowed.

Subcutaneous (injection) Therapy (SCIT)

- AIT injected just under the skin will usually be given via a small needle, starting with a very low dose and increasing gradually until a dose decided by your medical specialist (maintenance dose) is reached.
- Once a maintenance dose is reached, the injections will usually be given monthly, but this may vary depending on the doctor and the person. The injections are continued for 3-5 years.
- Some people may experience some redness, itching or swelling at the site of the injection. This can be managed with a non-sedating antihistamine, ice-packs and paracetamol if it is painful.
- A more serious allergic reaction such as anaphylaxis is very uncommon, but possible. The treating doctor will have the person stay in their clinic for about 30 minutes after the injection is given so they can be watched/observed. Injections are not given at home for safety reasons.

SCIT treatments to house dust mite, grass pollens, tree pollen, mould and pets are currently available in Australia.



Oral (sublingual) Therapy (SLIT)

- SLIT is usually taken at home, on a daily basis in the form of a tablet, spray or liquid.
- Once maintenance dose is reached, treatment is continued daily for 3-5 years.
- AIT SLIT treatment usually starts at a small dose and you normally reach a daily maintenance dose within a few days.
- People may experience local mild allergic reactions such as an itchy mouth or throat during the early treatment phase. These

reactions usually disappear with time. They can also be managed by a non-sedating antihistamine.

- If an individual experiences an allergic reaction that is more than a mild reaction, such as having trouble swallowing or breathing, they are to discontinue treatment immediately and contact their treating doctor. If they are concerned about serious symptoms like difficulty breathing or throat swelling, call triple zero (000) for an ambulance and seek medical attention. Severe reactions to SLIT are rare.

SLIT treatments to help manage hay fever and are currently available in Australia include those for grass pollens, tree pollens and house dust mite.

What is the cost of AIT?

A private health fund rebate may be obtained for some fully registered tablet and injected allergen immunotherapy products. This will depend on the type of private health insurance cover.

SLIT and SCIT treatments for allergens that trigger hay fever are not available as part of the Australian Government Pharmaceutical Benefits Scheme (PBS).

How long does AIT treatment take and how long does it last?

AIT should not be seen as a 'quick fix'. People will often see an improvement in symptoms after 4-5 months of treatment.

AIT treatment will typically take between 3-5 years of continuous use. You should always be under the care of a doctor who is trained in allergy/immunotherapy treatment. After undergoing a full course of treatment, many people are less reactive to the trigger allergen (e.g. house dust mite or grass pollen) with less or no symptoms. The benefit of this treatment has been shown to last several years in a number of studies. It is important that each dose of AIT is taken and that none are skipped. People need to make sure they have their appointments booked with their treating doctor ahead of time. People should still take their normal medications to control any hay fever symptoms while undergoing treatment. It is also essential for people to follow up with their allergy specialist at regular intervals, as stopping treatment too early can result in relapse. If treatment is ineffective, there may be other reasons that need to be examined.