

The Pollen

Issue N°12 - After your IT injection: Why the wait?

Why are patients required to wait in the office after immunotherapy injections? Is there any safety reason for this? Do we just like to keep people in office for the fun of it? In this issue of The Pollen we will look at the reason behind the 30 minute waiting period. But first, some background on immunotherapy schedules.

Like all medications, allergen immunotherapy can induce an adverse reaction. However, the risk of an adverse reaction varies depending upon the immunotherapy schedule and amount of time it takes a patient to reach their therapeutic maintenance dose/ highest dose. As a result, all immunotherapy regimens like UAS, Conventional, Cluster or RUSH have safety protocols. Quicker build-up schedules such as RUSH have a higher propensity for adverse events, thus patients are required to be in their doctor's office for every injection. The UAS protocol has a slower build-up schedule therefore its safety protocol requires patients to stay in the office only after injections from new vials.

Regardless of the build-up schedule, all offices require the patient to remain in the office for 30 minutes after an IT injection. Let's review why.

Study results show that the majority (up to 80%) of all adverse events associated with IT occur within the first 30 minutes after administration. In a study by Epstein TG, 90% of moderate and severe reactions occurred within the first 30 minutes. ¹ Table 1 below shows various study results that confirm a high correlation between a < 30 minute time of onset and number of adverse reactions. Based on these results, both the Academy and College of Allergy Asthma and Immunology recommend that a patient remain under the supervision of a medically trained professional for 30 minutes. ² Although no one wants to have a reaction, your doctor's office would be the safest place to have one if it happens.

It's important to understand that reactions can and do occur outside of this 30 minute window. This is why it is imperative to always carry an epinephrine auto-injector with you for at least 3 hours after receiving an immunotherapy injection.

Although 30 minutes can seem like a long time for your patient to wait, when you use that time effectively it can be very valuable for them. Together you can review the common signs of local and systemic reactions and what they should do in case of an adverse event. And it is always helpful to re-familiarize them with how and when to deploy their particular epinephrine auto injector.

Author	Patients	Adverse Events	Onset ≤ 30 minutes	Onset > 30 minutes
Matloff SM	Not Indicated	143	103	40
Ragusa VF	4600	141	141	0
Kin MS	4810	139	70	69
Gastaminza G	1212	79	58	21
Winther L	1038	341	171	170
Epstein TG*	Not Indicated	5392	1816	289
UAS	23614	37	19	18

*Not all reactions report had accompanying reaction details

1. Epstein TG, Liss GM, Murphy-Berendts K, et al. Immediate and delayed-onset systemic reactions after subcutaneous immunotherapy injections: ACAAI/AAAAI surveillance study of subcutaneous immunotherapy-year 2. *Ann Allergy Asthma Immunol.* 2011; 107: 426-431.

2. Cox L, Nelson H, Lockey R. Allergen Immunotherapy: A practice parameter third update. *J Allergy Clin Immunol.* 2011. S1-S55.