

Is it safe to undergo OIT?

Some patients may experience mild allergic reactions or abdominal symptoms but this happens in less than 2% of all doses. Side effects are usually related to external factors, such as sickness and fever, exercise, and hot shower/bath. Safety tips on observing symptoms and related action plan will be explained during OIT.

In our Centre, a medication called omalizumab may be prescribed to patients with severe food allergies to suppress their allergic immune response temporarily. This will reduce the risk of adverse reactions while introducing increasing doses of food allergens. Research has shown that OIT proceeds faster with the use of omalizumab.

1. Wang et al. (2018), Increasing hospital presentations for anaphylaxis in the paediatric population in Hong Kong. *J Allergy Clin Immunol Pract*, 6(3): 1050-1052.e2

HKSH Lee Tak Hong Allergy Centre

Hong Kong Sanatorium & Hospital

9/F, Li Shu Pui Block

2 Village Road, Happy Valley, Hong Kong

Tel: (852) 2835 8430

Fax: (852) 2892 7565

Email: allergy@hksh-hospital.com

www.hksh-hospital.com

Service Hours

Mon, Tue, Thu & Fri: 9:00 am - 6:00 pm

Wed: Closed all day

Sat: 9:00 am - 1:00 pm

(except in the second and fourth week of each month, the Centre will open all day Saturdays)

Closed on Sundays and Public Holidays

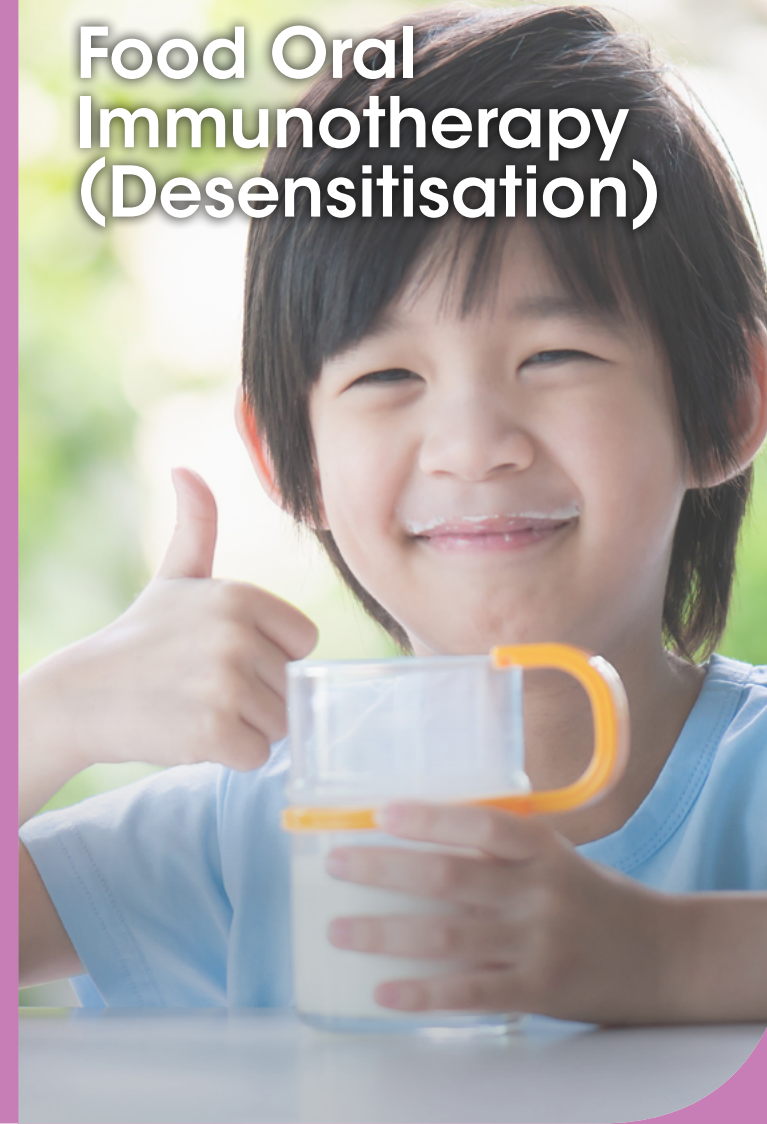
Consultation by Appointment



For enquiries and appointments,
please contact us



Food Oral Immunotherapy (Desensitisation)



養和李德康過敏病科中心

HKSH Lee Tak Hong Allergy Centre

www.hksh.com

The incidence of food allergy has increased in Hong Kong over the past 20 years. In many cases, milk, soy, egg and wheat allergy are outgrown as children grow up, while allergies to peanuts, tree nuts, shellfish and fish persist into adulthood and are rarely outgrown.

Strict avoidance of allergens has been the cornerstone of treatment to prevent adverse reactions in food allergy, with the use of medications when there is an acute reaction. However, incidence of adverse reactions due to accidental exposure still exists, including potentially life-threatening anaphylaxis. The incidence rate of food-induced anaphylaxis in Hong Kong children has increased nine fold, i.e. from 0.21% in 2001-02 to 1.88% in 2014-15¹. The symptoms and adverse reactions may cause anxiety over/fear of food, affecting the quality of life of patients with food allergies.

What is Food Immunotherapy?

“Food Immunotherapy” is a new clinically-proven treatment for food allergy management. A known food allergen is introduced to the patient gradually to reduce his/her body sensitivity to the allergen concerned. Food immunotherapy can be introduced via three routes, i.e. orally (OIT, via mouth), sublingually (SLIT, under the tongue) or epicutaneously (EPIT, on the skin). “Oral” means taking the food allergen orally every day while sublingual means “under the tongue”. For food sublingual immunotherapy, the food allergen extract is dropped under the patient’s tongue on a daily basis. Our OIT and SLIT treatment services are clinically proven to be effective.

Our Centre’s OIT protocol comprises high-dose and low-dose treatments. Most patients can tolerate normal daily intake doses after high-dose treatment (e.g. 9 peanuts, 120ml of milk or 1 egg), while those with low-dose treatment can tolerate a small amount (e.g. 1 peanut), which can substantially reduce the risk of reactions from accidental intake. Some patients would be suitable for multiple food OIT at the same time. Your doctor and dietitian will explain in detail and discuss with you the proper treatment plan based on your allergic condition.

Why undertake OIT?

- Reduces risk of symptoms related to food allergy, especially due to accidental exposure to food allergens
- Promotes sustained tolerance for food allergens
- Allows more dietary choices*
- Improves the quality of life of patients and caregivers in the long term by reducing the fear of accidental allergen exposure and the need for absolute avoidance

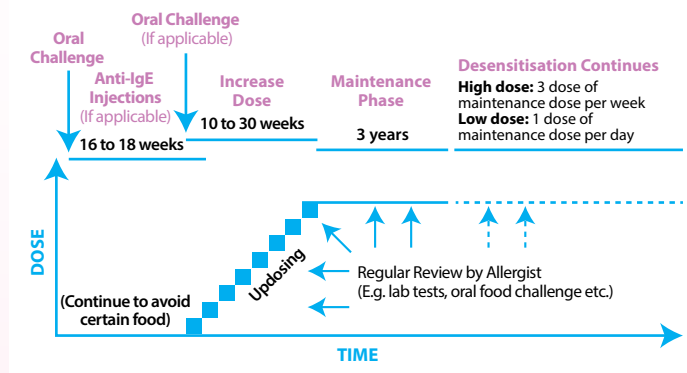
* Only for high-dose desensitisation

What types of food allergy can be treated with OIT?

Oral immunotherapy is suitable for egg, milk, peanut, tree nuts (e.g. cashew, walnuts and almonds) and wheat allergies diagnosed by an allergist. For other food allergies, please consult our Centre.

How is OIT implemented?

To ensure safety, all tests and dosage adjustments are done under medical supervision of an allergist and with assistance and education from registered nurses and dietitians at our Centre. It consists of three phases:



1. Threshold Determination – Oral Food Challenge (1 day)

- Oral food challenge (intake of increasing dose of food allergens under medical supervision) will be carried out to determine the threshold level for reaction of patients and the starting dose for OIT.

2. Build-Up Phase – Biweekly up-dosing (about 10-30 weeks in total)

- Dosage will be increased by one dose at a time at our Centre under medical supervision. Under guidance the patient will continue to take the same dose daily at home until the next visit.
- On next visit, our allergist will determine if further up-dose can be done.
- Eventually, the patient will be up-dosed to the maintenance dose and then progress to real food by the end of the build-up phase.

3. Maintenance Phase – Dose Maintenance (3 years)

- Patients will continue to consume the maintenance dose of food allergens daily.

What will happen after the Maintenance Phase?

Our allergist will review your case every 6 months after the maintenance phase and decide if it is necessary to adjust the dose and consumption regimen. Success is greatly determined by adherence to the eating regimen. Most patients can maintain desensitisation by continuing to consume the same maintenance dose of food allergens regularly. Patients often lose desensitisation if they discontinue consumption of the required dose.

OIT requires long-term commitment. Patients and relatives need to be prepared for long-term intensive treatment, with daily intake of prescribed doses.