

Allergen immunotherapy injections or "allergy shots" are prescribed for patients with allergic rhinitis (hay fever), asthma, eczema, or life-threatening reactions to insect stings. Immunotherapy is the only medical treatment that could potentially modify allergic disease. Immunotherapy is considered for individuals who have moderate or severe symptoms not adequately controlled by environmental control measures and/or medications. Immunotherapy is also appropriate for individuals who cannot avoid their allergens or who wish to avoid medications to treat their allergic rhinitis symptoms.

Efficacy

Allergen immunotherapy (allergy shots) may reduce allergic reactions to common allergens including pollens, molds, animal dander and dust mites. The injections do not cure patients but may diminish sensitivities, resulting in improved symptoms and reduced need for medications. It is important to maintain shots at the proper time interval, so please maintain your schedule and speak with us about any lapses. Eighty percent of patients experience improvement in symptoms in about 12 months on regular allergy shots, and continuation of injections leads to further improvement.

How Long Are Shots Given?

There are two phases to immunotherapy: the build-up phase followed by the maintenance phase. During the build-up phase, the dose is increased with every injection. Shots cannot be given on consecutive days during the build-up phase. The maintenance phase begins once the effective therapeutic dose is reached, and the dose is then constant for each injection.

- Build-Up Phase: injections 1 to 2 times a week for 4 to 8 months
- Maintenance Phase: injections every 1 to 4 weeks for 3 to 5 years (typically every week in year one, every 2 weeks in year 2, every 3 weeks in year 3, every 4+ weeks in year 4+)

Though it is important to remain on a schedule with allergy shots, missing 1-2 weeks for vacation or illness will not significantly impact progress.

Reactions to Allergy Shots

It is possible to have an allergic reaction to the allergy injection itself. Reactions can be local (swelling at the injection site) or systemic (affecting the rest of the body). Systemic reactions include hay fever type symptoms, hives, flushing, lightheadedness, and/or asthma, and rarely, life threatening reactions. The risk of systemic reaction is about 1%. Some conditions can make allergic reactions to the injections more likely such as increased natural exposure to pollen and vigorous exercise 2-3 hours before and after the injection. Allergy shot patients should take antihistamine 1-2 hours before injections. Serious systemic reactions can occur in patients with asthma that has worsened and is not well controlled on recommended medications. Therefore, if you have noted worsening of your asthma symptoms, notify your nurse or physician before receiving your scheduled injections. Reactions to injections can occur, however, even in the absence of these conditions, so injection patients are required to remain in the office for 30 minutes after allergy shots. You are welcome to apply anti-itch medication or ice to an injection site as needed.

Please inform the nursing staff if you have been diagnosed with a new medical condition or prescribed any new medications since your last visit. If any symptoms occur immediately or within hours of your injection, please inform the nurse before you receive your next injection.

Medical Conditions

- Allergy shots cannot be initiated during pregnancy
- Allergy shots may be continued if a woman becomes pregnant while already on shots
- Beta-blocker medications (ex: Atenolol, Propranolol, Metoprolol) can increase risk associated with allergic reactions to allergy shots. Please bring this up to your allergist if you take a beta blocker.
- Patients will not receive allergy shots when sick with an infection or asthma symptoms
- If you are on antibiotics for an infection, please complete two days of antibiotics before receiving an injection

Will My Insurance Cover Allergy Shots?

Please call your insurance company to check on coverage for the following codes: 95165 (allergy immunotherapy serum vials), 95115 and 95117 (allergy injections). Insurance may ask you for the diagnosis code: J30.1 (allergic rhinitis) and for the requested number of units: up to 76 Units total, billed at under 30 units per day.

Initial maximum out of pocket cost of serum vials: \$1,368, with a refill within 6-9 months

Maximum out of pocket cost of shots: \$20.00 per visit

If you have not met your deductible, you will be responsible for the full cost of the vials and shots until your deductible is met, and need to pay for the serum before it is mixed.

When a patient consents to do allergy shots, the serum vials are mixed for the patient based on the patient's specific allergies. Therefore, allergy shot serum vials cannot be used for anyone other than the patient for whom they were mixed. As a result, the patient is responsible for the cost as dictated by insurance, even if the patient changes his or her mind and does not receive any allergy shots.

Please note that insurance companies require vials to be mixed on separate days, resulting in separate insurance claims. We usually do this over three separate days, resulting in three separate claims.

Allergy Shot Appointments:

Allergy shots are given by appointment only. Appointments can be made in the office, by phone, or by request via the patient portal. Because we must allow for the 30-minute observation period after all shots, patients who present for injections outside of our shot hours will be rescheduled. Patients who schedule shots at the end of our shot hours must be in the office no later than 30 minutes before our lunch/closing time for the day. Please see our website for hours.