Our Physicians

The physicians of Allergy & Asthma Associates are all Board-Certified (from left): Kathy Sonenthal, M.D., Salmon Goldberg, M.D., David Chudwin, M.D., J.K. Lawson M.D., and Irma Oliff, M.D.

“Curing” Allergies By Immunotherapy

Allergic reactions occur when the body mistakenly recognizes a substance (called an allergen) as a threat and mounts an inflammatory reaction which can cause itching and redness, as well as swelling of the nose, eyes, throat, lungs or skin. Common allergens which cause allergic reactions in susceptible people include pollens, dust mites, molds, foods, antibiotics, and insect venoms.

While medications can reduce the symptoms, they do not change the underlying allergies. The only way to “cure” allergies is to desensitize affected individuals to their specific allergens. This happens by having the immune system build up a tolerance to the allergens.

Two methods are currently available to achieve specific desensitization—allergy shots (known as SCIT, or subcutaneous immunotherapy) or allergy tablets that dissolve under the tongue (SLIT, or sublingual immunotherapy).

Allergy shots have been used since 1911 to desensitize patients allergic to pollens, molds, mites and venoms; however, they are not effective for food or antibiotic allergies. A patient receives weekly injections of a mixture containing their specific allergens at increasing doses. Over a period of time that takes months to a few years, that patient develops tolerance to those allergens. For example, a patient with a late spring grass allergy or fall ragweed allergy will experience fewer symptoms, require less medication, and feel better after a course of allergy shots since their sensitivity to the allergens is reduced. This is demonstrated by clinical improvement and reduced skin test reactions.

Allergy shots are very effective, however the process to build up tolerance is a slow and methodical one. Patients begin to notice improvement after four to six months of weekly treatment. They often achieve a full “maintenance” dose by a year of shots, after which the frequency is then reduced to monthly. An average course of allergy shots runs between three to five years, although very sensitive patients may be required to continue monthly shots indefinitely.

A newer means of desensitization (SLIT) involves dissolving tablets, which contain a specific allergen, under the tongue daily. While this method has been successful in Europe for many years, it has been licensed in the U.S. for only about three years. In America, the only allergens available in 2016 are ragweed tablets (Ragwitek) and grass tablets (Oralair or Grastek). This allergen treatment is usually seasonal and starts three months before the grass or ragweed season begins.

We accept most health insurance plans, including many PPOs, and are Medicare participants.
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This SLIT treatment is more convenient than allergy shots, as the latter usually require an office visit for the injections. SLIT also avoids the shot’s discomfort and appears to act more quickly. There is also less risk of severe allergic reactions to the treatment when the SLIT method is used.

At this time, the main disadvantage of SLIT is the lack of available tablets to treat common allergens like mites, molds, tree pollen, etc.

The most effective way to determine the best treatment for a particular individual, is to consult a Board-Certified allergist.

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DIAGNOsing FOOD AllERGIES

triggered by foods, and lymphocyte transformation by foods are other blood tests that are not in common clinical use in the U.S.

Food challenges are considered the gold standard to confirming food allergies. During these challenges, the patient ingests increasing doses of a very small quantity of a specific food, then is monitored for signs of food reactions, such as itching, hives, diarrhea, throat swelling, wheezing or coughing. Food challenges are very time consuming, however and carry the risk of anaphylaxis, the most severe type of allergic reaction.

Board-certified allergists are best equipped to diagnose and treat food allergies.

Watch out for OTC drug side effects

The Food and Drug Administration has recently approved many allergy medications for sale over-the-counter (OTC). There is often a cost savings when medications are switched to an OTC status. However, these drugs may have significant side effects. A Board-certified allergist can guide patients when they need to determine the OTC or prescription medications best suited to them. Some examples of side effects of OTC drugs include:

- Vasconstrictor OTC nose sprays such as Afrin, Neo-synephrine or Equate can actually worsen nasal congestion if they are used for more than a few days. When the spray starts to wear off, the nose gets even more stuffy, creating a “rebound” phenomenon. Some patients actually become “addicted” to the sprays as they use them more frequently to keep their nasal passages open.

- With chronic use, steroid OTC nose sprays including Flonase or Rhinocort can cause nose bleeds by either drying the nasal passages too much or by thinning the nasal lining.

- Some of the OTC anti-histamine tablets can cause drowsiness which can affect performance while driving, at work or at school. While this is more common with older anti-histamines such as Benadryl, some of the newer ones, including Zyrtec, also may cause drowsiness in some people.

- Decongestant tablets sold OTC can cause dangerously high blood pressure in certain individuals. The two most common decongestants are PE (phényléphrine) and Sudafed (pseudoephedrine), which are available without a prescription. Sudafed is kept behind the counter at pharmacies because it includes one of the ingredients used to make crystal meth.

- When OTC allergy eye drops such as Visine “take the red out,” their effects are just temporary and there may be “rebound”-an increase in redness when the drops wears off. Anti-histamine allergy eye drops also can worsen glaucoma and dry eyes out in some people.

Allergists have the training and experience to direct patients to make the best choice of medications, whether these medications are by prescription or OTC.