CLINICAL PRACTICE GUIDELINES

IMMUNOTHERAPY FOR INHALANT ALLERGY FLOWCHART

KAS - Key Action Statement  |  AIT - Allergen Immunotherapy  |  AR - Allergic Rhinitis  |  SCIT - Subcutaneous Immunotherapy  |  SLIT - Sublingual Immunotherapy

Age ≥ 5 years with AR

Do NOT initiate AIT

Pregnant, uncontrolled asthma, or unable to tolerate injectable epinephrine?

Educate patients about benefits of AIT

Symptoms inadequately controlled by medical therapy or allergen avoidance or both?

Educate patients about SLIT vs. SCIT

Patient preference for immunomodulation?

Offer or refer for AIT

Relative Contraindications to AIT
Shared-decision making with patient and other specialists about whether to proceed with AIT

Decision to proceed with AIT?

Signs or symptoms of asthma or uncontrolled asthma?

Decision to use SLIT?

Limit AIT to clinically relevant and confirmed antigens

Option to treat with limited number of allergens

Do NOT proceed with AIT

Local reactions to AIT allergens?

Start AIT

Clinician can diagnose and manage anaphylaxis?

Change in environmental exposures or loss of control of symptoms?

Repeat allergy testing

Patient benefit of AIT?

Continue escalation or maintenance dosing

Continue ≥ 3 years while monitoring treatment response

Repeat allergy testing

Do not repeat testing

Educate patients about SLIT vs. SCIT

Limit AIT to clinically relevant and confirmed antigens

Symptoms inadequately controlled by medical therapy or allergen avoidance or both?

Repeat allergy testing

Do not repeat testing

KAS 1

KAS 2A

KAS 3

KAS 4

KAS 5

KAS 6

KAS 7

KAS 8

KAS 8

KAS 9

KAS 10

KAS 11

KAS 12

KAS 1

KAS 7A

KAS 8A

KAS 8B

KAS 8C

Stop