

BENGALURU ALLERGY FOUNDATION



NEWS LETTER

FOR THE MONTH OF OCTOBER

ALLERGEN IMMUNOTHERAPY

Can We Treat the Cause of Allergy?

Many allergy treatments focus on controlling symptoms such as sneezing, itching, nasal blockage, watery eyes and wheezing.

Allergen immunotherapy (AIT) is different. It involves giving a patient carefully selected doses of a specific allergen to gradually modify the body's response to that allergen.

For appropriately selected patients with allergic respiratory disease, allergen immunotherapy can provide benefits beyond temporary symptom relief. EAACI describes AIT as a treatment that targets the underlying allergic mechanism and may have disease-modifying effects.



What is Allergen Immunotherapy?

Allergen immunotherapy is a specialised treatment in which a patient receives controlled exposure to an allergen to which they are sensitised and which is clinically relevant to their symptoms.

The aim is to help the immune system become less reactive to that specific allergen.

It is sometimes described as “training the immune system.”

Simple example:

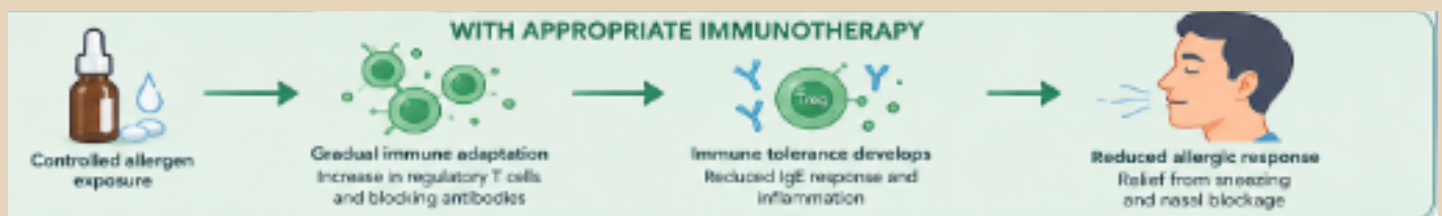
House dust mite allergy

House dust mite → exposure → allergic immune response → sneezing/nasal blockage



With appropriate immunotherapy:

Controlled allergen exposure → gradual immune adaptation → reduced allergic response



However, immunotherapy is not suitable for every patient. The allergen, diagnosis, severity of disease, treatment suitability and safety factors need to be assessed by an allergy specialist.

WHY IS IMMUNOTHERAPY DIFFERENT FROM ANTIHISTAMINES?

Antihistamines Primarily help control symptoms such as:

- Sneezing
- Itching
- Runny nose
- Hives

Nasal corticosteroids Can reduce:

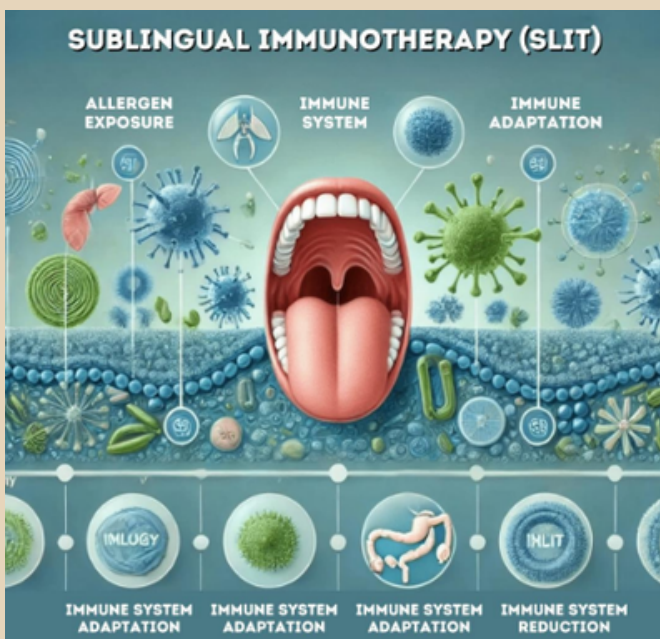
- Nasal inflammation
- Congestion
- Sneezing
- Runny nose



Allergen Immunotherapy

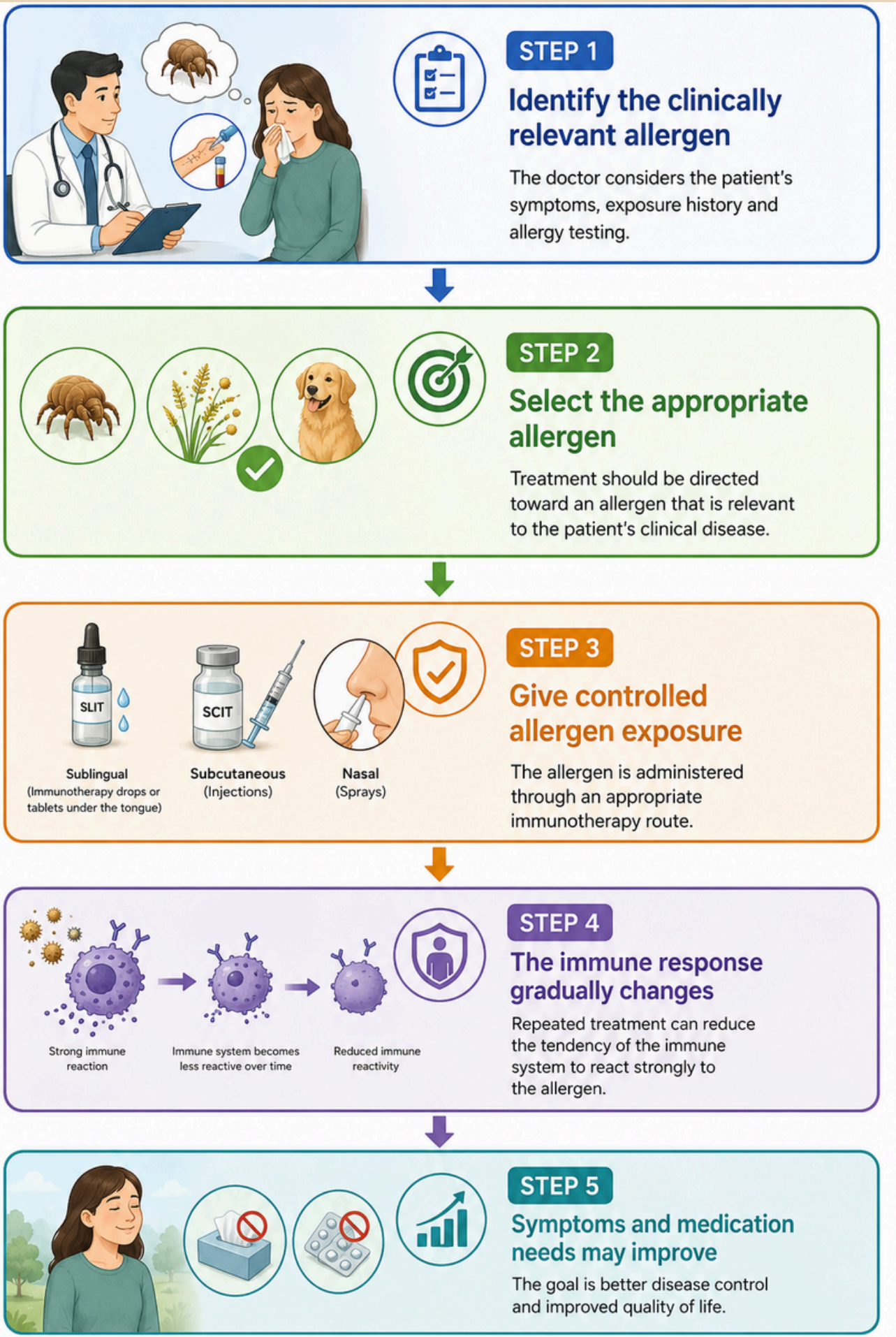
The objective is different:

It aims to modify the allergic response to the relevant allergen. Therefore, AIT should not simply be thought of as “another allergy medicine.” It is a longer-term treatment strategy for carefully selected patients.



HOW DOES IMMUNOTHERAPY WORK?

A simplified explanation for patients:



TWO IMPORTANT ROUTES OF IMMUNOTHERAPY

1. SCIT

Subcutaneous Immunotherapy

The allergen is administered by injection under medical supervision.

Commonly called: Allergy shots

SCIT is administered according to a structured treatment schedule and requires appropriate medical supervision.



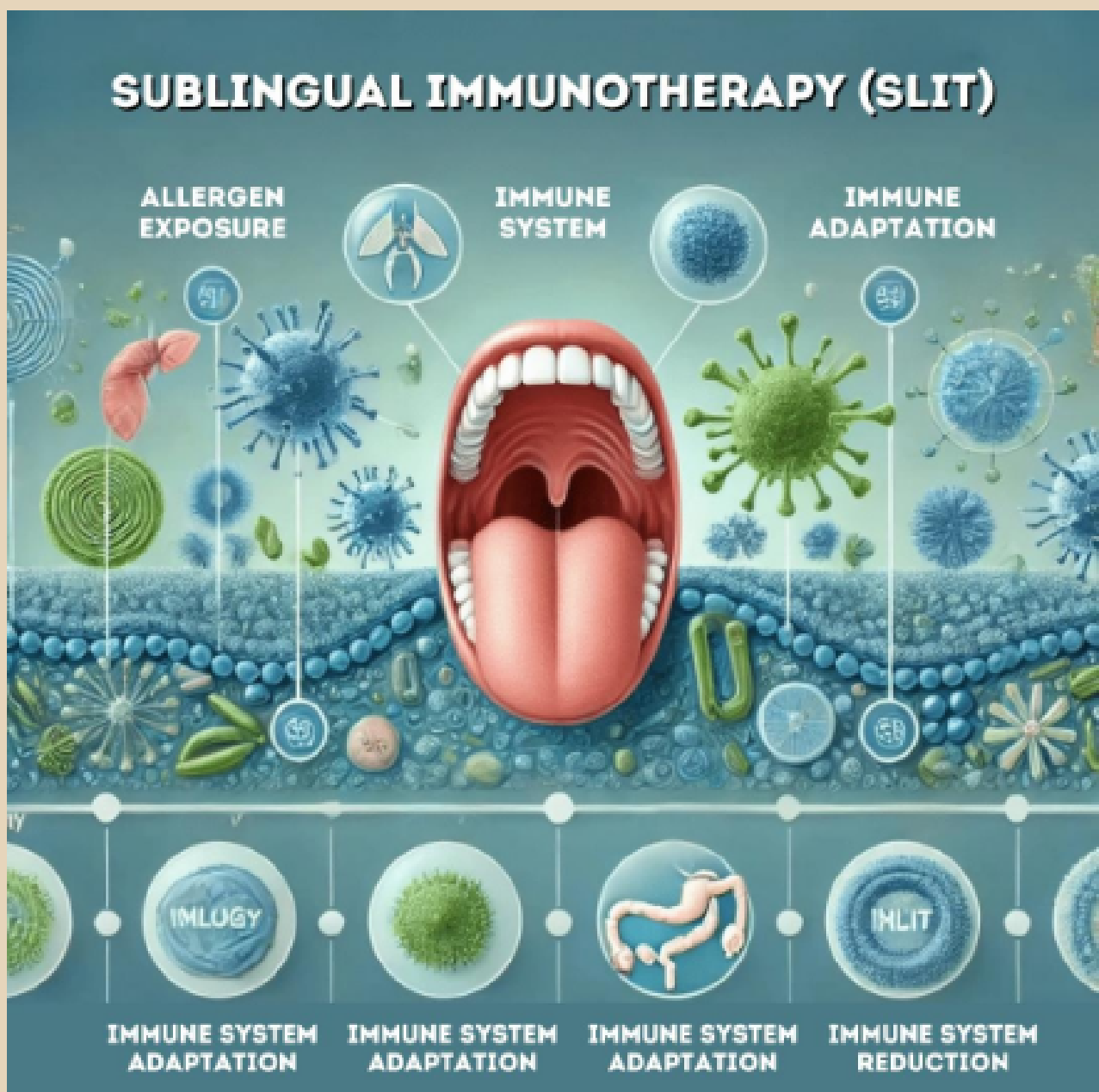
2. SLIT

Sublingual Immunotherapy

The allergen is administered through the sublingual route – under the tongue.

Depending on the product and treatment plan, SLIT may be available as tablets or other formulations.

For allergic rhinoconjunctivitis, both SCIT and SLIT have evidence supporting their use in appropriately selected patients



WHO MAY BENEFIT?

WHO SHOULD CONSIDER IMMUNOTHERAPY?

Immunotherapy may be considered when a patient has:

1. Confirmed allergic disease

The patient's symptoms should be consistent with an allergic condition.

2. A clinically relevant allergen

The allergy test result should make sense in relation to the patient's symptoms and exposure.

3. Persistent or troublesome symptoms

Patients who continue to have significant symptoms despite appropriate conventional treatment may be considered.

4. Significant impact on quality of life :

Allergic symptoms can interfere with:

Sleep

School

Work

Exercise

Daily activities

5. A suitable treatment profile

The doctor must determine whether immunotherapy is appropriate and safe for that individual.

Important:

A positive allergy test alone does not automatically mean that immunotherapy is required.

The diagnosis should be based on the patient's history + clinical symptoms + appropriate testing + allergen relevance.

HOW LONG DOES IMMUNOTHERAPY TAKE?

Patients often ask:

“How quickly will I get better?”

Immunotherapy is a long-term treatment, not a quick-relief medicine.

The response can vary between individuals and allergens.

For allergic rhinoconjunctivitis, EAACI guidance notes that a minimum of about 3 years of therapy is generally recommended when the goal is long-term efficacy.

Patient message:

Do not stop treatment simply because you feel better.

The duration and stopping decision should be discussed with your treating allergist.



IS IMMUNOTHERAPY SAFE?

Immunotherapy is generally considered a well-established treatment when:

- The patient is appropriately selected
 - The correct allergen is used
 - The treatment is prescribed appropriately
 - The patient follows instructions
 - Monitoring and safety procedures are followed
- Mild reactions can occur.

For example:

SCIT

Possible reactions may include local swelling or other allergic symptoms.

SLIT

Patients may experience local symptoms such as itching or discomfort in the mouth, particularly early in treatment.

Severe reactions are uncommon but can occur, particularly with injectable immunotherapy, which is why appropriate medical supervision and patient selection are important. Real-world EAACI data found adverse events in a minority of adults receiving AIT, with severe reactions being rare.

IMPORTANT MESSAGE

IMMUNOTHERAPY IS NOT “ONE TREATMENT FOR EVERY ALLERGY.”

It should be:

Diagnosed → Selected → Prescribed → Monitored
by an appropriately trained allergy specialist.

1. DIAGNOSED



Patient's symptoms, medical history, exposure history and allergy testing are evaluated to identify the relevant allergen.

2. SELECTED



The clinically relevant allergen is selected based on the patient's symptoms and disease.

3. PRESCRIBED



Appropriate allergen immunotherapy (SCIT or SLIT) is prescribed according to the patient's needs.

4. MONITORED

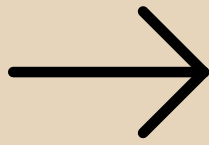


The patient is regularly monitored for treatment response, symptom improvement and any adverse effects.

GOAL: Better disease control, fewer symptoms and improved quality of life.

BENGALURU ALLERGY CENTRE HAS MOVED

A New Location, With the Same Trusted Allergy Care



We are pleased to inform all our patients that Bengaluru Allergy Centre (BAC) has relocated from Jayanagar to Vasanthapura, Bengaluru.



Our new centre provides a more spacious and comfortable environment for our patients while continuing the same dedicated allergy care and services you have trusted us with over the years.

OUR NEW ADDRESS

Bengaluru Allergy Centre (BAC)
26, 1st Main, 6th Cross, Ward No. 197
Vasantha Vallabha Nagar, Vasanthapura
Bengaluru – 560061, Karnataka



ABOUT BAF

BENGALURU ALLERGY FOUNDATION (BAF) IS A CHARITABLE TRUST TO ENHANCE QUALITY OF LIFE IN PEOPLE WITH ALLERGY! IT WAS SET UP IN THE YEAR 2017, AS AN OFFSHOOT OF BANGALORE ALLERGY CENTRE IN A BID TO GIVE BACK TO THE SOCIETY IN WHATEVER WAY POSSIBLE.



TO SERVE HUMANITY FOR ENHANCING QUALITY OF LIFE (QOL) BY MEANS OF ALLERGY AWARENESS PROGRAMS GLOBALLY.



TO ENHANCE THE QUALITY OF LIFE FOR PEOPLE WITH ALLERGIC DISEASES THROUGH EDUCATION, ADVOCACY AND RESEARCH.

BAF organizes various public welfare activities, to name a few: Asthma camps, Patient Support Group Meetings, Counselling to Allergy patients, Inhaler Bank, Award ceremonies to recognize the professionals for their scientific and clinical contributions in the field of Allergy.

TRUSTEES



DR NAGENDRA PRASAD KOMARLA
CONSULTANT ALLERGIST,
BENGALURU ALLERGY CENTRE



DR PARANJOTHY KANNI
HE SERVES AS RESEARCH
DIRECTOR AT BAF
ACADEMY, BENGALURU.
PRINCIPAL SCIENTIST &
SENIOR PHARMACIST, BAC
PHARMACY



DR. PUNEET K NAGENDRA
ASSOCIATE PROFESSOR,
RESPIRATORY MEDICINE,
CDSIMER



MRS. SUDHA NAGENDRA
SENIOR COUNSELLOR &
PSYCHOTHERAPIST.
SHE IS ASSOCIATED WITH SUGAMYA
ACADEMY FOR COUNSELLING, BENGALURU.
SHE IS ALSO PRESIDENT OF SWAMI
VIVEKANANDA SHIKSHANIK SAMSTHE,
BENGALURU.



MR. GOPINATH K S
DEPUTY GENERAL MANAGER AT HCL
TECH (BANGALORE), LEADING
TELECOM BSS DELIVERY IN THE ASIA
PACIFIC REGION, WITH OVER 30
YEARS OF IT EXPERIENCE AND
EDUCATION INCLUDING AN MS AND
IIM CERTIFICATE.



MR. SATYANARAYANA KASI:
SEASONED BANKER
SERVED VIJAYA BANK FOR OVER
FOUR DECADES, LEADING
OPERATIONS AND TECHNOLOGY,
AND HOLDS CREDENTIALS FROM
ICMAI AND CAIIB.



MRS. RAKI K NAGENDRA
ADMIN - BAC
SOCIAL WORK