



Allergy Shot Information

Allergy shots are a form immunotherapy. Your shots are designed to treat the cause of your allergies by increasing your tolerance to them. Immunotherapy has been shown to prevent new allergies from developing and may lower the risk of children with allergic rhinitis developing asthma.

If allergy symptoms are not well controlled with environmental avoidance measures or medications your doctor may recommend customized allergy shots to reduce and control your symptoms.

How Do Allergy Shots Work?

Patients will receive shots of allergens based on their allergy test results and health history. These may include environmental allergens such as pollens, molds, dust mites, cats, dogs. Allergy shots do NOT include foods.

In most cases, after 6 to 12 months of shots, symptoms improve. A gradual increase in tolerance to allergens occurs and more shots lead to more improvement over time.

- About 60 to 90% improvement in symptoms is expected after the first 18 months.
- Over the next year, an additional 30 to 35% improvement in symptoms may occur.
- If there is no improvement within 24 months, then stopping immunotherapy may be considered.

Two phases of immunotherapy:

1. **Build-up phase:** Patients will get shots with increasing amounts of allergens 1 or 2 times a week until they get to the strongest maintenance vials. The first phase lasts 3 to 6 months, depending on how often shots are received. Vials have varying expiration dates based on their concentration. It is important patients come as directed for their shots so that their vials do not expire before reaching maintenance, otherwise new vials will have to be made and billed.
2. **Maintenance phase:** During the maintenance phase, patients will get shots every 2 to 4 weeks. The time between shots is different for each person.

Length of Treatment

Immunotherapy usually takes 3 to 5 years. Allergy shots should not be stopped until symptoms are minimal or stable for 1 year while getting maintenance shots. Stopping treatment earlier may result in symptoms returning. The duration of benefit varies after allergy shots are stopped. In some people, improvement lasts forever. For others, mild symptoms may return but can be controlled with medications. For a few people, symptoms get worse, and more allergy shots are needed.

Reactions to Allergy Shots

Because allergy shots contain the allergens a patient is allergic to, they can sometimes cause reactions. Most of the time, a mild reaction occurs within 2 hours but can also occur 1 to 2 days later. Severe reactions usually begin within minutes of getting the shot.

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Types of reactions include:

- **Local allergic reaction:** Redness, itching, and/or swelling may occur at the site of the shot. Swelling up to the size of a palm that lasts no more than 48 hours is normal.
- **Systemic allergic reaction:** Rarely, a serious systemic reaction can occur. Symptoms may include itching, hives, nasal congestion, sneezing, coughing, wheezing, possible chest tightness, and/or asthma. In rare cases, reactions can be life-threatening. Serious systemic reactions can occur in people with poorly controlled asthma. Factors that can make severe reactions more likely are intense exposure to pollen during a pollen season and exercising after a shot.
- **Delayed allergic reaction:** Local reactions may occur 24 hours after an allergy shot. These reactions can be treated with an antihistamine and an ice pack.

Quick Facts

- **You must wait in our office for 30 minutes after each shot in case you have a reaction.**
- **You will be required to bring your prescribed up to date autoinjector epinephrine (EpiPen or AuviQ) with you to every shot visit. If you do not bring it, we will have to reschedule your shot.**
- Do not participate in strenuous activities 30 minutes before and 2 hours after your allergy shot. Do not scratch/rub your arm where the shot was given. This can cause local swelling.
- Do not get your allergy shot if you: are having a severe episode of hay fever or asthma without first checking with your doctor, have a bad respiratory infection with a fever over 100 degrees, or have used your albuterol in the past 24 hours (other than as scheduled before activity).
- Let our office know **immediately** if you get pregnant. Allergy immunotherapy **should not be started or escalated during pregnancy**. Well tolerated maintenance therapy can continue during pregnancy.
- **Oral beta blockers cannot be taken while on allergy immunotherapy.** Emergency treatment with epinephrine can be less effective when patients are on beta blockers. Let the staff know if you have been diagnosed with a new medical condition or are taking any new medications.
- **If any symptoms of a serious systemic allergic reaction occur within the first 30 minutes after your shot, immediately tell office staff. If they occur on your way home, go to the nearest emergency facility.**
- If any symptoms occur after your shot, please tell the allergy staff before your next shot. Your condition will be assessed which may alter your shot schedule.
- If you have any questions about these instructions or your allergy symptoms, please talk to your doctor.

Allergy Shot Billing

- Call your insurance company and ask what your expected out of pocket costs will be. They may ask for these billing codes (CPT):
 - **Allergy Vials for Allergy Shots = 95165** (Build-up – usually 80 units, maintenance – usually 20 units) *commercial insurance
 - **Allergy Shot Visits = 95115** (1 shot) or **95117** (2 shots – most common)

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