Background: Sublingual immunotherapy (SLIT) has been shown to be effective and well-tolerated for the treatment of young and old patients allergic to a variety of airborne allergens. The current understanding of clinical efficacy, safety and indications for the use of sublingual immunotherapy in the treatment of allergies has been documented in various studies and publications.

SLIT is used worldwide comprising more than 60% of the European immunotherapy treatments. The World Health Organization indicated its use for the second time in 2007. A Cochrane Review, the most trusted independent, evidence-based meta-analysis organization in the world, released their analysis in 2003 and determined SLIT to be both safe and effective.

There is a growing consensus on the benefits of sublingual immunotherapy in the treatment of allergic diseases.

OBJECTIVE

The primary objective of this open label study was to (1) monitor the safety and (2) efficacy in patients receiving one drop TID of Pollenguard™ Ragweed Extra Strength in the 2008 ragweed pollen season compared to patient recalled assessment of symptoms and medication use in the 2007 ragweed pollen season.

METHODS

This open label study - participants ranging from ages 6 to 43 years with documented history of allergic rhinoconjunctivitis - were assigned to receive sublingual immunotherapy (SLIT) during ragweed season. The active treatment included standardized extract of ragweed allergen (Pollenguard™ Ragweed Extra Strength) administered sublingually at a dose of 0.05 ml SAU (Standard Allergen Unit) TID before meals shortly before the pollen season starts. This study was conducted at 3 Canadian allergy centres.

Maintenance doses continued daily during the complete ragweed pollination period of 12 weeks.

Efficacy variables included a global assessment of efficacy (patient/investigator), symptoms and medication scores.

RESULTS

The study involved 18 patients; 72% of the patients agreed to stay on the treatment for next year, 17% didn’t use any concomitant allergy medication while using Pollenguard™ Extra Strength Ragweed. 28% dropped out of the study due to various reasons (1 subject left the country, 4 subjects stopped the treatment & didn’t want to participate further due to no significant improvement in the symptoms as assessed by themselves and the doctor). Symptom scores for sneezing, runny nose, nasal blockage, itchy nose and eyes, redness and watery eyes were recorded periodically throughout the study. Uses of other allergy medications, assessment of efficacy were measured by the physician and participants.

CONCLUSION

This study confirms the efficacy and safety of sublingual immunotherapy and suggests those taking ragweed SLIT (Pollenguard™ Ragweed Extra Strength) had significant reduction in sneezing, runny nose, nasal blockage and tears in the eyes. More than 72% of participants felt that SLIT led to significant improvement in hay fever symptoms. During this study no one receiving ragweed SLIT (Pollenguard™ Ragweed Extra Strength) had any serious adverse effects nor did their symptoms worsen while taking the treatment.