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Local Immunotherapy in Allergy

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Foreword

Incidence and prevalence of allergies are an increasing phenomenon worldwide. The most efficient therapy is the avoidance of the allergen. This, unfortunately, is not practicable in most cases. Antihistamines provide a very well-acting and well-accepted symptomatic treatment, which in its recent form is liberated from most side effects and which can be easily applied locally or systemically over a long period. At present new promising and interesting methods of symptomatic treatment are available, such as antileukotrienes or anti-IgE.

The only accepted curative treatment is the immunotherapy, formerly known as hyposensitization or desensitization and recently called ‘vaccine’. The subcutaneous application undoubtedly has clinical efficacy, but it displays several inconveniences, such as the need to visit a doctor for its application, its invasiveness, which many patients, especially children, do not tolerate psychologically or the rare but possible side effects. Local immunotherapies were invented to avoid these inconveniences and some forms, namely the sublingual and the nasal application, seem to accomplish this goal successfully. Regarding the clinical efficacy, opinions still widely differ. An increasing number of international placebo-controlled double-blind studies demonstrate clinical and sometimes immunological efficacy, but direct comparisons between the subcutaneous and the local routes have thus far been very poor. Studies on the long-term efficacy of local immunotherapies are also rare, because this therapy has been in clinical use for not much longer than 10 years. Local immunotherapies, furthermore, need a better or at least more transparent standardization of, for example, applied allergen concentrations, application intervals and duration, or combination therapies with different allergens or other allergy medications.
In the first part of this volume, the reader will find information concerning general aspects of immunotherapy, its history, the allergen resorption and its biodistribution as well as aspects derived from clinical experience. In the second part, the most relevant international studies on sublingual and nasal immunotherapies are reviewed, possible side effects are discussed and some new original data are provided. In the last chapter, Prospects for the Future, I will give a critical overview regarding the most unresolved and troublesome aspects of local immunotherapies and would thereby like to motivate the scientific community to intensify their efforts to investigate and ameliorate this promising branch of potentially curative antiallergy therapy.

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