

The background of the slide is a dark gradient with a dense field of golden bokeh lights of various sizes, creating a sparkling effect. A solid green horizontal bar is positioned in the upper right area of the slide.

OIT Patient Selection

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Who is the appropriate patient? Is there such a thing as too allergic?

4 main considerations:

- History
- Testing
- Co-morbidities
- Social/logistical



Gather clues to recreate the patient's crime scene

- Investigative questioning (History)
- Finding evidence (PE and Testing)
- What are we missing? (Co-morbidities)
- Is this feasible or reasonable? (Social and logistical issues)

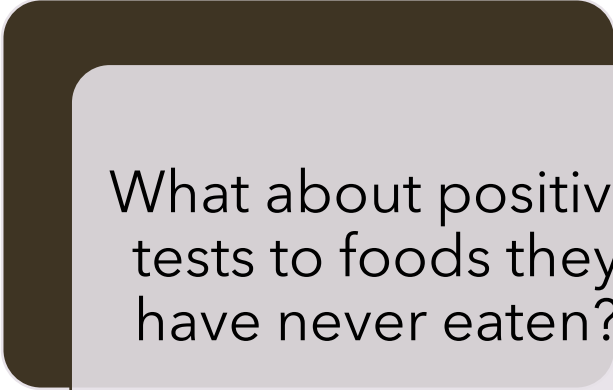
Patient's history

A 3D maze background with a green horizontal bar and a white horizontal line.

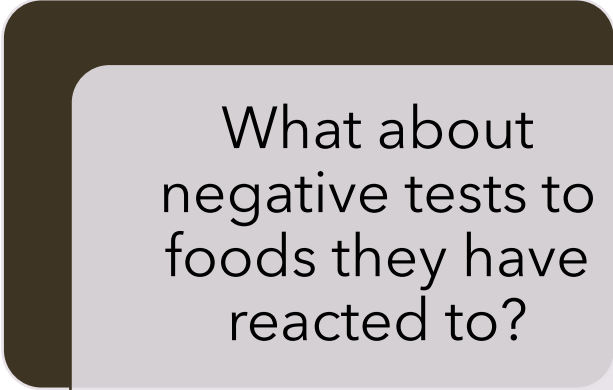
- **Timing**
- **Symptoms**
- **Objective measures**
- **Reproducible**
- **Confounding factors**
- **Alternative explanations**



Dilemmas to consider with standard tests



What about positive tests to foods they have never eaten?



What about negative tests to foods they have reacted to?



Proper testing

- Skin prick testing
- Standard blood testing:
 - Total IGE, sIGE, CBC w/diff
- Options/Variations:
 - Vitamin D, sIGG4, tryptase, ECP
- Newer
 - Basophil Activation Tests



When in doubt: Oral Food Challenge

Consider when poor history or tests and history are not congruent

OIT is a lifelong therapy so we want to make sure we discern true allergy and treat what needs to be treated and not unnecessarily treat foods they are not truly allergic to

Co-morbidities

GI history

- Vomiting
- Stomach pains
- GERD and hx of antacids
- EoE, FPIES

Eczema, asthma, or environmental allergies

- Need control of underlying factors
- Should this patient start AIT prior to OIT?

Any medication use?

- OCPs
- NSAIDs
- Immune suppressants

Teenagers

- Girls and hormones
- Boys and EoE
- Compliance

Relative contraindications

Anxiety in
the patient

Anxiety in
the parent

Psychiatric
diagnosis

Dietary
inflexibility

Uncontrolled
IBS or IBD

Uncontrolled
atopic
conditions

Eosinophilic
esophagitis

Social/logistical

Speak to both
parents and when
there are divorced
couples, consent
both of them

Ensure all children
are uptodate on
immunizations

Patients are
compliant and
motivated



Timing of starting

Social/logistical

- Age
 - Appropriateness may vary depending on food
 - Weigh stress of avoidance vs stress of the program and possibility of the food being outgrown
- AIT prior to OIT needed?

Goals and motivation






Social/logistical

- Discuss goals of the family/patient
 - Free eating vs protection against accidental ingestions and cross contamination
 - Number of foods to be treated
 - Difficulty in avoiding certain foods due to cultural preferences and eating habits



How many foods?
Goals of each food?



Single/multiple

- Age
- Desires of the patient
- Goals: Free eating or lowering risk from accidental ingestions
- Taste aversions
- Each food goal doesn't need to be the same
- Change as the program continues

Being flexible

Blessed are the flexible, for they
shalt not get bent out of shape

FAST publication

Strongly consider recommending food oral immunotherapy

- **Positive OFC to peanut/tree nut/seed**
- **Positive OFC to milk, egg, wheat >7 years old**
- **Proximate history (<2 years) of IgE-mediated reaction with +sIgE/SPT**
- **Remote history (>2 years) of IgE-mediated reaction with strongly +sIgE/SPT**

FAST Publication

Carefully weigh the option of food oral immunotherapy

- **Positive OFC to milk, egg, wheat <8 years old—discuss the possibility and tempo of spontaneous resolution**
- **Never eaten—sIgE/SPT both strongly positive—discuss the possibility of false-positive testing and risks of oral food challenge**
- **Never eaten—sIgE/SPT 1 or both weakly positive—oral food challenge is essential**



FAST Publication

Relative contraindication to food oral immunotherapy

- **History of nonadherence**
- **Parental conflict about FOIT**
- **Eosinophilic esophagitis**
- **Non-EoE eosinophilic gastroenteropathy**
- **Incompletely controlled comorbid atopic disease**

Impact and transformation

Be instrumental in helping others transform their dreams

