Disclosures:

- I have nothing to disclose in relation to this topic.
Objectives- By the end of the session

• Participants will be able to list the questions that are raised which require shared decision making during implementation and maintenance of oral immunotherapy.

• Participants will be able to discuss and implement relationship centered skills to guide discussions before and during oral immunotherapy.

So many questions! Who has the answers?

• Am I allergic?
• Should I start OIT?
• What ages can be treated?
• Who wants to do it?
• Who will help take doses?
• Comorbid conditions increasing risk?
• What food is treated?
• One food or multiple foods?
• Commercial or prepared?

• Initial dose?
• Frequency of up dosing?
• Wait time during up dosing?
• Bite proof or free eating?
• When to give epi?
• How to deal with GI side effects?
• When to dose during day?
• How to check for Sustained Unresponsiveness?
• Can I take a hot shower?
So many questions! Who has the answers?

• Am I allergic?
• Should I start OIT?
• What ages can be treated?
• Who wants to do it?
• Who will help take doses?
• Comorbid conditions increasing risk?
• What food is treated?
• One food or multiple foods?
• Commercial or prepared?
• Initial dose?
• Frequency of up dosing?
• Wait time during up dosing?
• Bite proof or free eating?
• When to give epi?
• How to deal with GI side effects?
• When to dose during day?
• How to check for Sustained Unresponsiveness?
• Can I take a hot shower?


Do I need OIT? To challenge or not to challenge

• Does the patient need OIT?
• PALISADE Study- PALFORZIA DBPCFC before study entry-
  • Required clinical history and non negative testing
  • At least 176/842 (21%) were excluded due to tolerating peanut during challenge.

Do I need OIT? To challenge or not to challenge

- If the clinical history and testing is equivocal-
  - Who decides if a challenge is required or not?
Choosing Wisely - Picking the right patient?

- Who asked about it first?
- Do you offer it to everyone?
- Are all allergic patients good candidates?
- Is it possible to pick the right patient?
- How do we unconsciously nudge patients?

Who wants to do it?
## Consent and Assent

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Consent</th>
<th>Assent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meaning</td>
<td>Giving permission to be involved with an activity</td>
<td>Agreeing with something, a request, or to participate in an activity</td>
</tr>
<tr>
<td>Age</td>
<td>Obtained from adults (People above the legal age)</td>
<td>Obtained from people who are not of legal age to give consent</td>
</tr>
<tr>
<td>In Clinical practice/Research</td>
<td>Legally entered agreement to participate in a therapy/study</td>
<td>Willingness to participate in a therapy/study</td>
</tr>
<tr>
<td>In law</td>
<td>Legally binding permission</td>
<td>Not a legally binding permission</td>
</tr>
</tbody>
</table>

### Shared decision making conversations

- **Goal- Informed Decisions**
- **Not a monologue**
- **Not Doctor centered NOR Patient centered**
- **Should be a dialogue**
  - VIEW
  - Values
  - Knowledge

---

Shared decision making conversations - Tools for OIT

• Generally no validated tools exist.
• One tool is available.
  • Developed and assessed acceptability in a small (24), narrow patient population (In studies
  • Focused on peanut allergy
  • Choosing between avoidance EPIT, OIT

Factors affecting Health Management/Adherence

• Motivation
• Who chooses
  • Time of day?
  • Vehicle?
  • Top dose?
• Frequency of up dosing?
• Cost- Money and time.
Understanding Patient/Parent Perspective

V.I.E.W

• V Vital Activities
• I Ideas
• E Expectations
• W Worries


V.I.E.W- Vital Activities

How would OIT affect them?

For better?
• More confidence
• Less fear
• Concern about going to restaurants
• Precautionary labels
• Regular ingestion of serving sizes based on maintenance dose

Or worse?
• When to take the dose?
• How do I integrate the 2 hour wait period into my schedule?
• Can I take a hot shower?
Ideas/Expectations
Assess what the patient thinks about OIT?

• Benefits
• Time
• Risks
• Cost
• Other...

Worries
Assess what worries they have about OIT?

• “If you treat every situation as a life and death matter, you’ll die a lot of times.”
  – Dean Smith
Goals- Patient/Parent vs Evidence

• Asking the patient’s perspective will answer this question
• Communication challenges?
  • Mismatched expectations
  • Strong emotions
  • Low health literacy
  • Difficult health management

What OIT does not treat?

• Anxiety/Fear
• Need to read labels
• Need to avoid eating the food in regular meals (At least at first)
• Need to recognize and be ready to treat reactions
• Epinephrine deficiency.
Give them time

- Time to learn
- Time to think about it
- Time to ask questions
- Time to decide


When and how to slow down, back up or stop

**IgE Side Effects**

**Stomach Side Effects**
When and how to slow down, back up or stop
Demonstrating Empathy

**PEARLS**

- Partnership
- Empathy
- Acknowledgement
- Respect
- Legitimization
- Support

**Examples**

- We will work this out together.
- You seem worried, most people would feel that way.
- This is hard.
- I appreciate your willingness to share your concerns.
- What you are feeling is common
- I am here to help.

When to stop due to side effects?
There is no right answer to hard questions

I’m somewhere
Between
Giving up and
Seeing how much
More I can take
The Decision To Start OIT is difficult

• Relationship Centered Care
• Partnership and Dialogue
• Understand Patient perspective
• Demonstrate Empathy
• Truly Shared Decision Making

Shared decision making conversations
There is no right answer

• Thank you!