



Food Allergy Treatment Options for Babies and Young Children

For enquiries and appointments, please contact us

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Service Hours

Mon, Tue, Thu & Fri 9:00 am – 6:00 pm

Wed Closed all day

Sat 9:00 am – 1:00 pm (except in the second and fourth week of each month, the Centre will open all day Saturdays)

Closed on Sundays and Public Holidays

Consultation by Appointment

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養和醫療集團成員 Members of HKSH Medical Group

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HKSH Lee Tak Hong Allergy Centre

Understanding Your Advanced Food Allergies Treatment Options



Food allergies affect millions of people worldwide. While conventional treatment involves absolute avoidance to prevent reactions, in recent years new treatment approaches offer hope for those affected. More importantly, these treatments are more effective in toddlers and young children. At HKSH Lee Tak Hong Allergy Centre, advanced treatments for food allergies include Food Ladders, Sublingual Immunotherapy (SLIT) and Oral Immunotherapy (OIT)*.

Food Ladders

Food ladders offer a safe approach to gradually introduce allergenic foods into your diet, and are particularly effective for egg and milk allergies. Related foods are categorised by “stages” according to their allergenicity.

How It Works

1. Food ladders begin with a food challenge using extensively cooked foods that contain small amounts of allergen. This approach works because heating modifies allergen proteins and can lower the risk of reaction, establishing a safe starting point for your allergen introduction.
2. Gradual exposure helps your immune system develop tolerance. Your body learns to recognise these proteins as harmless, and often becomes better able to tolerate less-cooked versions of the foods later.
3. For example, most children with egg or milk allergies can tolerate baked forms of these foods. Regular consumption of baked milk or egg products accelerates the development of tolerance to regular milk or eggs.

Doctor Notes

Food Ladders

Sublingual Immunotherapy
(SLIT)

Oral Immunotherapy
(OIT)

* Food immunotherapy is also commonly known as food desensitisation.

The table below shows common food ladders:

Food Type	Egg	Milk
Stage 1	Well-baked goods (cookies, cakes)	Baked goods with milk
Stage 2	Pancakes, muffins	Yogurt, cheese
Stage 3	Scrambled/ hard-boiled eggs	Heated milk in foods
Stage 4	Soft-boiled and raw eggs	Fresh milk, ice cream

Who Can Benefit from Food Ladders?

- High-risk Infants and toddlers beginning solid foods under medical supervision
- Young children with mild to moderate egg or milk allergy
- Those who can already tolerate small amounts of the allergen in processed forms



Sublingual Immunotherapy (SLIT)



SLIT involves placing small amounts of the food allergen extract under your tongue to increase your tolerance to the allergen.

How It Works

1. SLIT works by placing food allergen extracts under your tongue (oral mucosa) for 1 to 2 minutes before swallowing.
2. The allergen will be absorbed via specialised cells. It helps your body develop tolerance instead of reaction to the allergen.
3. Over time, your body learns not to overreact to the foods.
4. Your treatment will begin with taking these “allergen drops” under medical supervision, followed by repeating the same dose daily at home.
5. You will regularly return to our Centre for gradual dose increases.
6. Your SLIT treatment for foods usually lasts around 2 to 4 months, after which you may proceed to oral immunotherapy (OIT) with real foods.

Who Can Benefit from SLIT?

SLIT may be most appropriate for:

- Children and adults who are anxious about consuming actual food allergens
- Those who prefer a gentler approach to allergen desensitisation
- Individuals who cannot make frequent clinic visits due to busy schedules
- Patients who have experienced adverse reactions to other forms of immunotherapy

Oral Immunotherapy (OIT)



OIT involves eating small amounts of the food allergen, and gradually increasing the dose as you tolerate it. This can help increase your tolerance to the allergen.

How It Works

1. The process typically begins with small amounts of the problem food, i.e. less than a 100th.
2. You often need to do a food challenge to determine the first dose, which systematically increases over months until reaching a target maintenance dose.
3. You will visit our Centre approximately every two weeks for each new increased dose (up dosing), and afterwards you continue taking the same dose daily at home until your next visit. The process of up dosing continues until reaching the target amount.
4. After reaching the target dose, you will be consuming the same dose daily for 3 to 5 years in order to maintain the desensitisation with regular clinical monitoring of progress.
5. Your doctor and dietitian will discuss with you your target dose based on your age and current lifestyle needs.
6. For severe cases, or patients aiming for a high target dose or treating multiple allergens at the same time, your doctor may suggest an injectable medication called "anti-IgE" to allow a safe treatment journey.

Age Matters Intervene Early

Studies have shown that children who begin treatment before age 5 generally have higher success rates than those who start treatment later. For children with food allergies, it is recommended to maintain consumption of tolerated foods and consider immunotherapy as part of food allergy management. As children's immune systems are more adaptable and responsive to immunotherapy, early intervention may prevent the development of additional allergies. Given that successful treatment outcomes have been documented across all age groups, it is never too late to explore treatment options.

Low-dose OIT vs High-dose OIT

OIT protocols typically fall into two main categories: low-dose and high-dose approaches. Low-dose OIT aims to achieve a protective level of desensitisation that guards against accidental exposures, typically targeting maintenance doses of e.g. one peanut. High-dose OIT, on the other hand, pushes for greater tolerance levels, often reaching maintenance doses of 9 peanuts.

While high-dose protocols may offer more dietary freedom, they generally carry a higher risk of reactions during treatment and may require longer build-up phases, with some requiring anti-IgE injection.



Which Treatment is Most Suitable for Me?

Food ladders, SLIT and OIT are not mutually exclusive and may be used complementarily in food allergy management. Your allergist and dietitian will carefully assess which food allergy treatment is most appropriate for you, and decide when you should advance to different treatments. The table below compares these advanced food allergy treatments:

	Food Ladder	SLIT	OIT
Best suited for	Mild to moderate allergies, high-risk infants for safe introduction	Various food allergies, a good stepping stone to OIT	More severe allergies, after other methods
Typical allergen types	Milk, egg, wheat	Nuts and seeds	All food allergens
Usual follow-up frequency	Every 1 to 3 months	Every 2 to 4 weeks	Every 2 weeks
Usual duration to reach target dose	Various	4 months, then continues with OIT	9 to 12 months
Typical target dose	Age-appropriate portion of the allergen	2mg protein of the allergen, may also continue with OIT	300mg protein or more of the allergen
Advantages	Will be able to eat as long as tolerable	Very low risk of adverse reaction; easy maintenance	Allows protection against cross-contamination; may work up to freely consume the allergen in maintenance; can eat all forms of the food; needs to maintain at higher dose
Disadvantages	May not be able to eat uncooked forms of the allergen (e.g. fresh milk, raw egg, pudding, ice cream)	Lower protection compared to OIT	Higher risk for adverse reaction; needs planning

Frequently Asked Questions

How long does the entire treatment process typically take?

Treatment duration varies by individuals and the method chosen. Food ladders can take several months per stage; SLIT typically runs 2-4 months; OIT usually requires 6-12 months or longer to reach maintenance phase.

Can I stop consuming the allergens once I reach maintenance phase?

No. Regular consumption of the allergen is necessary to maintain desensitisation. If you stop treatment, you may lose protection against allergic reactions. During the maintenance phase, your allergist will review your progress and may adjust allergen dosages as needed, e.g. reducing how often you need to consume them.

Will these treatments cure my food allergies?

These treatments can significantly increase tolerance to allergens, but ongoing maintenance is typically required to maintain protection. Further testing during maintenance may be needed to determine if the food allergy has resolved completely.

Is it important to take OIT doses every day at the same time?

Yes. Consistency is important and daily dosing is required. We recommend:

- Taking doses at approximately the same time each day;
- For OIT, taking doses with a meal or substantial snack; for SIT, avoid eating or drinking 15 minutes before and 30 minutes after dosing.

How will treatment affect my daily activities?

During treatment, you may need to modify some of your daily activities, particularly around dosing times. Exercise should be avoided 2 hours before and after doses, and you will need to be available for regular clinic visits during the build-up phase. Our dietitians will provide further education once the treatment begins.

Are these advanced treatments covered by medical insurance?

Coverage varies by insurance providers and insurance plans. Some insurance companies now cover food allergy treatments, especially when medically necessary. However, coverage levels, requirements, and out-of-pocket costs differ significantly. It is important for parents to check with your insurance provider about specific coverage details and pre-authorisation requirements before starting treatment.

Can I travel while undergoing these advanced treatments?

You can travel with careful planning. Avoid dosing 4 hours before and after flights to reduce the risk of reactions during travel. Long-haul travels are not recommended during the escalation phase due to changes in routine, stress, and limited access to medical care. If you must travel long distances, you may need dose adjustments and should be prepared for potential delays in your treatment progress. Always consult with your allergist before travelling.