

Evidence-based drug withdrawal times for allergen-specific IgE serological and intradermal testing

Update: April 2024

Product	Dosage	Optimal Withdrawal Times			
		IgE serology	Ref.	Intradermal Test	Ref.
H1R antihistamines (hydroxyzine, cetirizine)	standard	likely none	a	7 days	1
Oral glucocorticoids (prednisolone, methylprednisolone)	anti-allergic	none	1, b	7 days	1
Long-acting injectable glucocorticoids (methylprednisolone acetate)	approved	< 28 days	1	28 days	1
Topical glucocorticoids (hydrocortisone aceponate)	approved	likely none	1, c	14 days	1, 2
Otic glucocorticoids (hydrocortisone aceponate)	approved	likely none	1, c	14 days	1
Essential fatty acids (Pet's Relief Atopi-3; fish oil)	standard	none	1	none	1
Oral ciclosporin	approved	none	1, d	none	1, d
Topical tacrolimus	standard	none	1	none	1
Oral oclacitinib	approved	none	3-5, e	none	3-5, e
Injectable lokivetmab	approved	none	6, f	none	6

- (a) Although not tested, there is no mechanism by which H1R antihistamines could affect the results of an allergen-specific IgE serology.
- (b) No studies have been conducted on the withdrawal times needed for dosages higher than 1 mg/kg/day or an administration longer than 8 weeks.
- (c) No studies have been conducted on the effect of a topical and otic glucocorticoid for cutaneous use on allergen-specific IgE serology. The recommendation herein is derived from the optimal withdrawal time for prednisolone.
- (d) No studies have been conducted on the withdrawal times needed for dosages higher than 5 mg/kg/day or an administration longer than 8 weeks.
- (e) No studies have been conducted on the withdrawal times needed for dosages higher than 0,4-0,6 mg/kg/day or an administration longer than 30 days.
- (f) No studies have been conducted on the withdrawal times needed for dosages higher than 3.3 mg/kg or more than one injection.

References:

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