dbv technologies

Early Intervention and Epicutaneous Immunotherapy in Peanut Allergy

Harnessing the Skin's Immune Potential

DBV Technologies is a Global, Late-Stage Biopharmaceutical Company Committed to Transforming the Lives of Children and Families Living With the Daily Challenges of Food Allergy

We are working to address today's unmet treatment needs:



Reduce the frequency and severity of allergic reactions[1,2]



Improve safety[1,2]



Minimize treatment burden[1,2]

To learn more about DBV Technologies, visit **dbv-technologies.com**

Timing Matters: Early Intervention Can Improve Outcomes

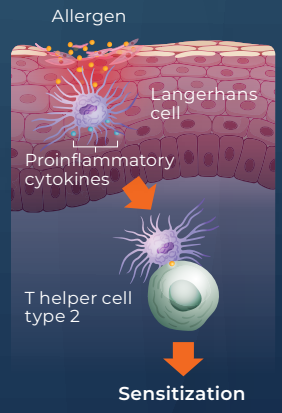
Peanut allergy reactivity can intensify as children get older: older children are more likely to have lower reaction thresholds and have an anaphylactic reaction[3-5]

Early childhood offers a period of greater immune plasticity: peanut- and Ara h2-specific IgE increase consistently over time in children with peanut allergy[6]

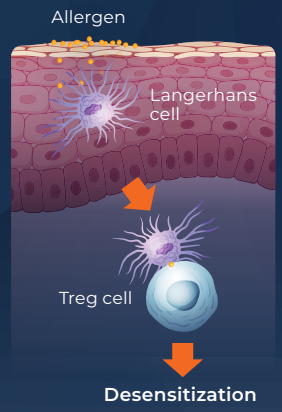
Earlier intervention with immunotherapy is associated with better outcomes: treating peanut allergy in younger children can lead to higher rates of desensitization[7]

Skin: Friend or Foe? The Answer Depends on Context[8,9]

Although the skin has been viewed as a route through which allergic sensitization occurs, emerging research indicates that the skin can play a role in either sensitization or desensitization.[8,9]



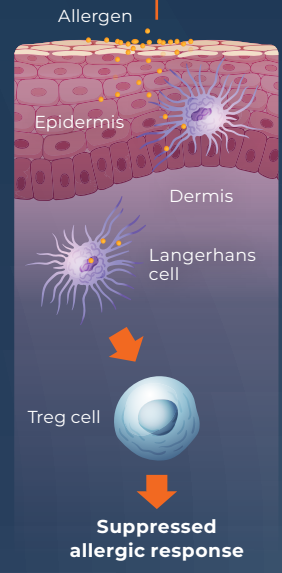
Inflamed or damaged skin: may favor an immune response that leads to allergic sensitization[8,9]



Healthy, intact skin: can support immune responses associated with desensitization[8,9]

Leveraging the Immune Properties of the Skin: How EPIT Works

Epicutaneous immunotherapy (EPIT) is an innovative approach, leveraging Nobel Prize–winning science, that aims to induce allergen desensitization by using the immune properties of the epidermis.[2,10,11]



EPIT introduces a tiny amount of allergen to healthy, intact skin[2]

Antigen-presenting cells capture allergen and induce unique Treg cells which retrain the immune system to **suppress the allergic response**[2]

Preclinical data show that EPIT has the potential to be disease modifying[2]

EPIT is currently being evaluated in a clinical program for the treatment of peanut allergy[12]

Contact Us

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1. Anagnostou A. *Ann Allergy Asthma Immunol*. 2024;132(3):313-320. **2.** Ravindran M et al. *Allergy*. 2025;80(1):63-76. **3.** van der Zee T et al. *J Allergy Clin Immunol*. 2011;128:1031-1036. **4.** Bondorevsky O et al. *World Allergy Organ J*. 2026;19:101459. **5.** Arkwright PD et al. *Pediatr Allergy Immunol*. 2018;29:754-761. **6.** Foong R-X et al. *Allergy*. 2024;79(10):2775-2786. **7.** Smeekens JM et al. *Pediatr Allergy Immunol*. 2025;36(10):e70193. **8.** Bird JA et al. *World Allergy Organ J*. 2018;11(1):38. **9.** Hervé PL et al. *Front Allergy*. 2023;4:1290003. **10.** Advanced Information. NobelPrize.org. Accessed October 26, 2026. https://www.nobelprize.org/prizes/medicine/2011/advanced-information/ **11.** Popular information. NobelPrize.org. Accessed October 26, 2026. https://www.nobelprize.org/prizes/medicine/2025/popular-information/ **12.** ClinicalTrials.gov. NCT05741476. Updated January 22, 2026. Accessed October 10, 2026. https://clinicaltrials.gov/study/NCT05741476

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