

SAY GOODBYE TO ALLERGIC RHINITIS

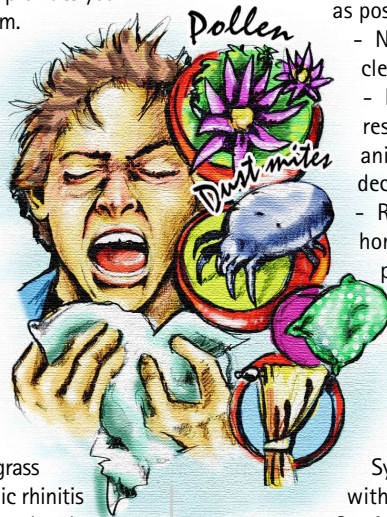
Allergic rhinitis is not a life threatening disease, but the symptoms can be very uncomfortable and unpleasant. It is an allergic reaction (nasal) to trigger factors (allergens) that affects up to 25% of the population. The allergic salute – the repeated rubbing of the nose with the palm of the hand – characterises this condition. This article looks at the symptoms and provides you with tips on how to alleviate them.

Symptoms

- itchy, runny, sneezy or blocked nose
- itchy, watery eyes
- itchy ears, throat and palate
- loud breathing through the mouth, nasal speech and snoring
- swelling and dark discolouration of the lower eyelids ("allergic shiners")

Trigger factors

- Airborne allergens (tree and grass pollens) cause seasonal allergic rhinitis (hay fever) during springtime and early summer.



- Indoor irritants (dust mites, fungal spores, feathers and animal dander) cause perennial (all year) allergic rhinitis.

How can allergens be avoided?

- Avoid outside activity during the pollen season.
 - Keep your house and workplace as clean as possible:
 - Never sweep – use a vacuum cleaner only
 - Remove house dust mite reservoirs such as stuffed animals, heavy drapes and decorative pillows
 - Remove pets from the home/confine them to a particular area
 - Keep doors and windows closed and use air conditioning

What treatment is available?

Symptoms can be controlled with the following medication:

- Corticosteroids nasal sprays (e.g. Flixonase, Ventrane) act by preventing the

allergic reaction. These agents are very effective, safe to use and are the treatment of choice of most patients.

- Antihistamines (e.g. Clarityne, Zyrtec) are effective in relieving hay fever symptoms, but may cause drowsiness and other side-effects.
- Decongestant nasal sprays (e.g. Iliaden, Drixine) relieve nasal stuffiness, but the effect is short-lived and these agents can cause rebound congestion worse than the original problem.

The treatment of allergic rhinitis should be neglected for the following reasons:

- It may exacerbate co-existing asthma and atopic dermatitis (eczema).
- Patients may develop chronic middle ear infection, sinusitis, nasal polyps and conjunctivitis.
- The condition may also contribute to learning difficulties, sleep disorders, fatigue, and drowsiness.

Most patients can experience an improved quality of life with appropriate environmental control measures and medication.