

CLINICAL PRACTICE GUIDELINES

PLAIN LANGUAGE SUMMARY:

Allergic Rhinitis (Nasal Allergies or Hay Fever)

BACKGROUND

This plain language summary serves as an overview in explaining allergic rhinitis and how to manage its symptoms. Allergic rhinitis (pronounced Uh/lur/ jik Rye/ni/tis) or nasal allergies is often called "hay fever." Allergic rhinitis is swelling inside of the nose caused by allergies. Allergic rhinitis is common in both children and adults. The information in this summary is based on the 2015 Clinical Practice Guideline: Allergic Rhinitis. The guideline includes evidence-based research to support more effective diagnosis and treatment of allergic rhinitis.

WHAT IS ALLERGIC RHINITIS?

Allergic rhinitis is one of the most common illnesses that affects adults. It is also the most common long lasting illnesses in children. Symptoms include runny nose, stuffiness, sneezing, itchy nose, and red, watery eyes. Allergic rhinitis can be defined as swelling of the inside lining of the nose that occurs when a person inhales something he/she is allergic to. The symptoms can range from mild to severe. Symptoms are mild when they do not interfere with quality of life. Symptoms are more severe when they are bad enough to interfere with quality of life. Patients can have allergies at different times of year or when exposed to different allergens.

Allergic rhinitis can also affect a person's quality of life, by interfering with everyday activities. In children, allergic rhinitis can be linked to disorders of learning, behavior, and attention. Allergic rhinitis symptom frequency can be either intermittent or persistent. *Intermittent* means fewer than 4 days a week, or fewer than 4 weeks a year. *Persistent* means more than 4 days a week, or more than 4 weeks a year. Patients should work closely with their doctor to determine which treatment is best and most appropriate based on the frequency of symptoms.

WHAT CAUSES ALLERGIC RHINITIS?

Allergic rhinitis symptoms can be also be grouped into how frequently they occur. Symptoms can be year round (perennial) such as those caused by dust mites. Allergic rhinitis can also be seasonal, such as when pollen is the allergen. Symptoms can also occur from exposure to something in the environment (episodic), such as those caused by pet dander. Patients may experience symptoms at different levels of severity depending on their exposure to allergens and their sensitivity to them. Some people can be allergic to pollen or mold. Mold is considered to be both seasonal and perennial. The most common allergies in the U.S. are grass, ragweed pollen, and dust mites. Pollen can be year round in a tropical environment. Therefore, it can be difficult to figure out if symptoms are caused by pollen or dust mites. The key is to work closely with your doctor to help identify the cause of your allergies.

WHAT CAN YOU DO?

You should seek medical care after you notice symptoms as this may help avoid misdiagnosis or delayed diagnosis. Asthma is a related condition, which is swelling and narrowing of the lower airway that causes difficulty breathing. Asthma is a related condition, which may occur with allergic rhinitis. Asthma may *or* may not be allergy related and a doctor can help treat this. You may be able to better control your symptoms by avoiding what you are allergic to. If you have seasonal allergies, stay indoors when pollen counts are high. You should change clothes after being outdoors when you have been exposed to pollen. If you have dust mite allergies, you can also buy allergy control products for your home such as bed covers, air filters, or sprays that help kill dust mites. For dust mite allergies, using several of these avoidance measures has shown to be more effective than only using one. Avoiding pets is recommended for those who suffer from pet dander allergies. Washing pets twice weekly can also help reduce allergen levels, but may not reduce your symptoms.

HOW IS ALLERGIC RHINITIS DIAGNOSED?

A doctor can diagnose allergic rhinitis by reviewing your medical history and performing a physical examination. The examination may show you have allergic rhinitis if you have any of the following symptoms: stuffy head, red and watery eyes, clear drainage, or pale colored mucus. Your doctor may perform an allergy test when your diagnosis is uncertain. Your doctor may use the results to target therapy for a specific allergy. This testing can include skin or blood allergy testing. Your doctor

should <u>not</u> perform any imaging, or x-rays, if your symptoms are consistent with a diagnosis of allergic rhinitis. If you have any related conditions such as asthma, your doctor should review and document the conditions in your medical record. Your doctor should schedule follow up visits whenever asthma is suspected. If you have difficulty breathing during sleep, skin problems, sinus problems, or ear infections, your doctor will note these and refer you for treatment.

WHAT TREATMENTS ARE AVAILABLE?

Allergic Rhinitis is treated based on symptoms. Treatment depends on both how severe the symptoms are and how frequently they occur. Patients can be advised to avoid known allergens. Your doctor may prescribe steroid nose sprays if your symptoms are severe. A steroid spray can help with swelling in your nose and make breathing more comfortable. If your symptoms include sneezing and itching, your doctor may prescribe an oral antihistamine. If you have seasonal, perennial, or episodic allergic rhinitis, your doctor may prescribe nose spray antihistamines. Oral Leukotriene (LTRAs) are <u>not</u> recommended as a first line medication to treat allergic rhinitis, but may be helpful in those people who have both asthma and allergic rhinitis.

Your doctor can offer combination medication therapy. Your doctor may offer or refer you to a doctor who can offer allergy shots (subcutaneous immunotherapy), or under the tongue allergy tablets/drops (sublingual immunotherapy). Your doctor may offer or refer you to a surgeon when you have nasal airway blockage that does not respond to medications. This blockage treatment is called Inferior Turbinate Reduction, a surgical procedure, and can be done when you have not responded to medical treatment.

Studies show that acupuncture may be helpful for those with perennial allergic rhinitis. Your doctor may suggest acupuncture, especially if you are interested in non-drug approaches to control your symptoms. There is not enough evidence to either support or discourage using Chinese herbal therapy for treating allergic rhinitis.

WHERE CAN I FIND HELP?

Patients and healthcare providers should discuss the benefits and potential risks or harms of treatments for allergic rhinitis and engage in shared decision making for better health outcomes. To learn more about allergic rhinitis here are a number of resources available. Go to http://www.entnet.org/AllergicRhinitisCPG to see printable patient resources and tables. The tables include approved over the counter and prescription products, including common side effects.

This plain language summary was developed from the 2015 AAO-HNSF Clinical Practice Guideline: Allergic Rhinitis. The multidisciplinary guideline development group represented the fields of otolaryngology—head and neck surgery, including, pediatric and adult otolaryngologists, allergists, immunologists, internal medicine, family medicine, pediatrics, sleep medicine, advanced practice nursing, acupuncture and herbal therapy medicine, and consumer advocates. Literature searches for the guideline were conducted up through May 2014. For more information on Allergic Rhinitis, visit http://www.entnet.org/AllergicRhinitisCPG

SOURCE: Seidman, MD, Gurgel, RK, Lin, SY, et al. Clinical Practice Guideline: Allergic Rhinitis. *Otolaryngol Head Neck Surg. February 2015; 152(S1):S1-S43*

About the AAO-HNS

The American Academy of Otolaryngology—Head and Neck Surgery (www.entnet.org), one of the oldest medical associations in the nation, represents about 12,000 physicians and allied health professionals who specialize in the diagnosis and treatment of disorders of the ears, nose, throat, and related structures of the head and neck. The Academy serves its members by facilitating the advancement of the science and art of medicine related to otolaryngology and by representing the specialty in governmental and socioeconomic issues. The AAO-HNS Foundation works to advance the art, science, and ethical practice of otolaryngology-head and neck surgery through education, research, and lifelong learning. The organization's vision: "Empowering otolaryngologist-head and neck surgeons to deliver the best patient care."