



Allergic Rhinitis

How common is allergic rhinitis?

Allergic rhinitis is very common with estimates that it affects 10-40% of children. Children with allergic rhinitis commonly have asthma as well.

Are there different types of allergic rhinitis?

Allergic rhinitis has been classified as either perennial or seasonal ('hay fever'). In perennial rhinitis symptoms occur throughout the year while in seasonal rhinitis symptoms usually occur in spring and summer months due to seasonal exposure to grass pollens. Seasonal allergens include tree and /grass pollens and fungal spores; Common perennial allergens are dust mite and animal dander. More complex classifications which take into account the duration and severity of the symptoms have been proposed.

What are the symptoms?

Symptoms may be directly related to the nasal passages e.g. itchiness, sneezing, nasal blockage and nasal discharge. Other symptoms are caused by the nasal obstruction and include mouth breathing, snoring, learning problems and disturbed sleep.

Are allergy tests helpful?

Skin prick testing can be helpful in indicating an allergic cause. If the skin test is negative this suggests that the allergen is not the cause of the allergic rhinitis. However some children will have a positive allergy test but not develop symptoms. This complicates the interpretation of findings from allergy tests.

How can allergens be avoided?

If it were possible to completely avoid a relevant allergen this should result in reduced symptoms. However with common allergens such as pollens and dust mites it is usually not possible to completely avoid exposure to the allergen. Thus medications are usually required to reduce the symptoms.

What can be done about house dust mites?

Trials assessing HDM avoidance measures have proved disappointing, the steps taken include the use of special mattress and pillow covers which can lower the amount of dust mite allergen in the bed. However the use of these covers does not completely remove dust mites from the bedding. In addition dust mites occur at other sites in the home such as furniture and carpets.



What medications can be used?

Intranasal steroids are the most effective treatment available for allergic rhinitis. Most guidelines recommend their use as first-line agents in children with moderate to severe symptoms. Use in younger children is restricted. Some nasal steroids are recommended for children older than 2 years while in others use is suggested only in children greater than 12 years.

How do antihistamines help?

Antihistamines are effective for histamine-related symptoms such as itching, watery nose and sneezing, but not for nasal blockage, which is caused by substances other than histamine. For nasal blockage intranasal steroids are effective. Some antihistamines have been shown to be safe in babies in the first 12 months of life.

What should I do when giving intranasal steroids?

Nasal sprays should be administered with the nozzle just inside the nose and directed towards the outside wall of the nasal lining. Children should be instructed not to sniff hard as this reduces the equal distribution of the solution in the nose.

What about Immunotherapy?

Immunotherapy involves the exposure of a patient to small amounts of allergen in order to induce tolerance. Specific immunotherapy is the only treatment that modifies the immunological response to an allergen, rather than just treating symptoms. Immunotherapy may be considered in older children whose symptoms are not well controlled by antihistamines and steroid nasal sprays. A number of different routes of administration have been investigated; injection, oral administration and under the tongue (sublingual). Before commencing immunotherapy it is necessary to have clearly identified which allergens are causing the symptoms. A typical treatment course requires monthly injections over a period of 3–5 years or giving allergen orally in tablet or liquid form on a daily basis for 2–3 years. The effectiveness of immunotherapy in children is still under investigation.