Nasal decongestant sprays can be used for up to five days, only occasionally, but never regularly, because they cause rebound congestion which causes swelling inside the nose when the spray is no longer used.

Steroid nasal spray treatment works best when:

- started before symptoms usually start, early in the hayfever season
- when used regularly

If you are pregnant or breastfeeding, steroid nasal sprays is the usual treatment of choice. It is advisable to avoid antihistamine tablets and treatment should always be discussed with your doctor.

Antihistamine medication will reduce symptoms of irritation but are not good at reducing a blocked nose. They can be taken as a tablet or syrup for children and also come as nasal sprays and eye drops. One dose usually works within half an hour and therefore if symptoms are mild or come and go, can be taken as required. If your symptoms are continuous you can also take this medication daily.

There are several brands of antihistamines. Non-sedating antihistamines are commonly used, but are not good at reducing a blocked nose. They can be taken as a tablet or syrup for children and also come as nasal sprays and eye drops.

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There are several brands of antihistamines. Non-sedating antihistamines such as Loratadine or Cetrizine, which are taken once a day, are advised, rather than the older, cheaper ones which cause drowsiness or psychomotor retardation and can cause reduced performance in examinations or driving. Ask your pharmacist for advice. If your regular treatment is no longer effective try switching to another brand.

Alternatively, some people will need medication that requires a prescription from the GP. Recent advances include a spray which contains both antihistamine and topical steroid. Some patients with asthma and hayfever benefit from antiallergic tablets.

Homeopathy treatments, herbal remedies, nasal creams and powder sprays are available, but these treatments are not recommended as there is no scientific proof that they work.

Doctors do not generally recommend injection steroid therapy for hayfever sufferers as this has severe side effects. They do sometimes prescribe short courses of steroid tablets for severely affected patients.

3. Disease altering immunotherapy

For patients with severe hay fever symptoms that cannot be controlled by medications, your GP may refer you to an Allergy Specialist for allergen-specific immunotherapy. This may also be relevant for allergies to pets, insect stings and house dust mites.

Immunotherapy or “desensitization” can reduce allergy to pollen and therefore a reduction in hayfever symptoms. It is done by a series of injections (subcutaneous immunotherapy), or by daily medication under the tongue (sublingual immunotherapy). The relief of symptoms continues for some years even after cessation of treatment.

Immunotherapy is used mainly for patients whose symptoms are severe and not helped by other treatments. You should discuss with your GP or allergy specialist whether you are suitable for this treatment. It should start well before the pollen season begins and be continued for 3 years. Most patients will have some reduction in allergy symptoms from the first year onwards. There is evidence that immunotherapy also reduces the progression of rhinitis to asthma in some patients.

Monitoring the hayfever sufferer

A yearly review by your GP is advisable particularly in children, which should include growth assessment where appropriate. Immunotherapy treatments are used regularly. An annual review before the pollen season starts allows your GP to provide early and therefore more effective prescriptions, before the airborne pollen causes troublesome symptoms.

Uncertainties

- Why not everyone with a positive allergy test to pollen has symptoms
- Why some hayfever sufferers grow out of their disease, whilst others progress to more persistent problems.

Further source of information:

Met Office UK: www.meteoffice.gov.uk
British Society for Allergy and Clinical Immunology: www.bsaci.org
ARIA - Allergic Rhinitis and Its Impact on Asthma: www.aria.org
Allergy UK: www.allergyuk.org

Disclaimer: This publication is designed for the information of patients. Whilst every effort has been made to ensure accuracy, the information contained may not be comprehensive and patients should not act upon it without seeking professional advice.

This leaflet has been authored by Janette Bartle, Glenis Scadding and Matthew Yung. ENT UK would like to thank the authors and reviewers for their contributions.

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Hayfever

ENT UK is the professional Association for British Ear, Nose and Throat Surgeons and related professionals. This leaflet provides some background information about hayfever. It may be helpful in the discussions you have with your GP or specialist when deciding on possible treatment. This information leaflet is to support and not to substitute the discussion between you and your doctor. Before you give your consent to the treatment, you should raise any concerns with your GP or specialist.

If you have any problems or questions, please contact:

Please insert local department name and emergency contact details here

If you would like to know more, visit our website at www.entuk.org

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End
What is Hayfever?
Hayfever is the common name given to cold-like symptoms caused by inhaling plant pollens at certain times of the year.

The UK pollen season:

<table>
<thead>
<tr>
<th>Pollen Type</th>
<th>Season</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tree Pollen</td>
<td>March – April</td>
</tr>
<tr>
<td>Grass Pollen</td>
<td>May – July</td>
</tr>
<tr>
<td>Weed Pollen</td>
<td>June – August</td>
</tr>
<tr>
<td>Mould Spores</td>
<td>September – October</td>
</tr>
</tbody>
</table>

Plants release their pollen at the same time every year, when the weather is dry. Wet weather conditions will influence pollen dispersal and will affect how long it remains in the air. Throughout the pollen season, specialist pollen monitoring centres trap pollen and calculate the daily concentration of the various airborne pollens. The daily pollen count is broadcast by media outlets, along with the weather forecast and is reported as low, medium or high.

Highly sensitive individuals can suffer hayfever symptoms even when the pollen count is low. When the pollen count is high, most people sensitised to the pollen are likely to have symptoms.

Symptoms of hayfever include:
- Itchy nose, with or without itchy ears, throat and eyes
- Sneezing
- Watery discharge from the nose and sometimes eyes
- Blocked nose
- Some people who are allergic to tree pollen also experience irritation in the throat when eating certain raw fruit and vegetables, such as apples and celery. This is due to a cross-reaction with pollen and is referred to as oral allergy syndrome.
- Some sufferers have poor quality sleep, reduced ability to concentrate and function effectively at work or at school. Examination performance is reduced especially if the sufferers are on sedating antihistamine medication.
- Some sufferers are so severely affected that they cannot go outdoors during the pollen season.

How to diagnosis hayfever?
The regular seasonal pattern of symptoms often allows self-diagnosis. For some people, however, symptoms may be less defined or even persistent for several months, and therefore allergy testing may be required. Allergy skin prick testing at an NHS allergy clinic is the most reliable way to confirm hayfever.

A skin prick test is carried out by placing a small drop of fluid containing an allergen on the skin. The skin is then pricked through the liquid. If a person is sensitised to the allergen the body releases a chemical called histamine at the site of the prick causing a red itch bump to occur. This reaction indicates that a person is likely to have symptoms of allergy to that particular allergen.

There are also blood tests for people on whom skin prick tests are not possible; people with severe eczema or very sensitive skin and those who can not stop taking their antihistamine medication because of troublesome symptoms. A blood test can be done, but is no more sensitive than skin prick testing, and it takes time for the results to come back.

Treatment of hayfever
1. Avoiding exposure to pollen in the air
   - Be aware of the pollen count
   - Avoid the countryside when the pollen count is high
   - Keep your windows shut when travelling in a car and ensure your car has a pollen filter
   - Avoid being out doors at times when the pollen count is high, for example, when the air is warming in the mornings and cooling in the evenings
   - Keep the bedroom windows closed early morning and evening when the pollen concentration is high
   - Hide your pillow under the bed covers during the day to prevent pollen from settling on it when the widows are open
   - Wear glasses to protect your eyes from pollen when outside
   - Wash your face and hair and change your clothes when coming indoors on days when the pollen count is high

2. Medication
   - For many people hayfever symptoms can be controlled with over the counter medication: steroid nose sprays, antihistamine tablets/syrup/nose sprays and eye drops. Ask a pharmacist to guide you if you have never bought this type of medication before.
   - Saline sprays/douches are not medicated but will support nasal hygiene, wash away dry trapped allergens such as pollen and therefore help reduce symptoms. Adults and children will benefit from nasal douching as preparation to clean the nose before using a steroid nasal spray. This is also useful after being exposed to airborne allergens in everyday activities.

**Over the Counter Medications**
Which medication is most effective for which symptom?

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>MEDICATION</th>
<th>EXAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blocked nose</td>
<td>Steroid nasal spray, the most effective treatment for all nasal symptoms and may also help reduce eye symptoms. They can be used together with eye drops and antihistamine medication.</td>
<td>Steroid nasal spray e.g. Fluticasone or Beclometasone.</td>
</tr>
<tr>
<td>Itchy eyes</td>
<td>Eye drops Chlorpheniramine eye drops Antihistamine tablets / syrup or nasal spray</td>
<td>Eye drops e.g. sodium cromoglycate Oral tablets / syrup e.g Loratadine or Cetirizine</td>
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<td>Oral tablets or spray e.g Cetirizine or Loratadine or Antihistamine.</td>
</tr>
<tr>
<td>Runny nose</td>
<td>Antihistamine tablets/ syrup or nasal sprays</td>
<td>Oral tablets or spray e.g Cetirizine or Loratadine or Antihistamine.</td>
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