



Itching for Allergy Relief?

Pollen grains from trees, grasses and weeds can float through the air in spring, summer or fall. But on their way to fertilize plants and tree flowers, pollen particles often end up in our noses, eyes, ears and mouths. The result can be sneezing spells, watery eyes, congestion and an itchy throat.

The collection of symptoms that affect the nose when you breathe in something you are allergic to is called allergic rhinitis; when the symptoms affect the eyes, it's called allergic conjunctivitis. Allergic rhinitis caused by plant pollen is commonly called hay fever—although it's not a reaction to hay and it doesn't cause fever.

Pollen allergy affects about 1 out of 10 Americans, according to the National Institute of Allergy and Infectious Diseases (NIAID). For some, symptoms can be controlled by using over-the-counter (OTC) medicine occasionally. Others have reactions that may more seriously disrupt the quality of their lives. Allergies can

trigger or worsen asthma and lead to other health problems such as sinus infection (sinusitis) and ear infections in children.

"You can distinguish allergy symptoms from a cold because a cold tends to be short-lived, results in thicker nasal secretions, and is usually associated with sore throat, hoarseness, malaise, and fever," says Badrul Chowdhury, M.D., Ph.D., an allergist and immunologist in the Food and Drug Administration (FDA).

Many people with allergic rhinitis notice a seasonal pattern with their symptoms, but others may need a health care professional's help to find out for sure if pollen is the source of their misery. If symptoms crop up year-round, dust mites, pet dander or another indoor allergy trigger (allergen) could be the culprit. This year-round condition is known as perennial allergic rhinitis.

When to Get Treatment

Chowdhury suggests seeing a health care professional if you experience allergies for the first time, your symptoms interfere with your ability to function, you don't find relief from OTC drugs, or you experience allergy symptoms over a long period.

You may need an allergy test, the most common of which is a skin test that shows how you react to different allergens, including specific pollen allergens like ragweed and grass pollen.

Avoid Pollen

Once you know you have seasonal allergies, try to avoid pollen as much as possible, says Chowdhury. Pay attention to pollen counts and try to stay indoors when pollen levels are highest. Pollen counts measure how much pollen is in the air (pollen level) and are expressed in grains of pollen per square meter of air collected during a 24-hour period.

- In the late summer and early fall, during ragweed pollen season, pollen levels are highest in the morning.
- In the spring and summer, during the grass pollen season, pollen levels are highest in the evening.
- Some molds, another allergy trigger, may also be seasonal. For example, leaf mold is more common in the fall.
- Sunny, windy days can be especially troublesome for pollen allergy sufferers.

It may also help to

- keep windows closed in your house and car and run the air conditioner
- avoid mowing grass and doing other yard work, if possible
- wear a face mask designed to filter pollen out of the air and keep it from reaching nasal passages, if you must work outdoors

Medications

FDA regulates medications that offer allergy relief. Here's a rundown of drug options that can help you survive the sneezing season:

Nasal corticosteroids: These are typically sprayed into the nose once or twice a day to treat inflammation. Drugs in this category include Nasonex (mometasone furoate) and

Flonase (fluticasone propionate). Side effects may include stinging in the nose.

Oral and nasal antihistamines: These drugs, whether OTC or prescription, counteract the action of histamine, a substance released in the body during an allergic reaction. Benadryl (diphenhydramine) and Chlor-Trimeton (chlorpheniramine) are examples of OTC antihistamines. Drowsiness is a common side effect, so don't take these types of drugs when you have to drive, operate machinery, or do other activities that require you to be alert.

Non-sedating OTC antihistamines include Claritin and Alavert (both loratadine) and Zyrtec (cetirizine). Zyrtec may cause mild drowsiness. Some non-sedating antihistamines, such as Clarinex (desloratadine) and Allegra (fexofenadine), are available by prescription. Many oral antihistamines are available OTC and in generic form.

The prescription drugs **Astelin** (azelastine) and **Patanase** (olopatadine) are antihistamine nasal sprays approved to treat allergy symptoms. They can be used several times a day. Side effects include drowsiness, a bitter taste in the mouth, headache, and stinging in the nose.

Decongestants: These drugs, available both by prescription and OTC, come in oral and nasal spray forms. They are sometimes recommended in combination with antihistamines, which used alone do not have an effect on nasal congestion. Allegra D is an example of a drug that contains both an antihistamine (fexofenadine) and a decongestant (pseudoephedrine).

Drugs that contain pseudoephedrine are available without a prescription but are kept behind the pharmacy counter as a safeguard because of their use in making methamphetamine—a powerful, highly addictive stimulant often produced illegally in home laboratories. You will need to

ask your pharmacist and show identification to purchase drugs that contain pseudoephedrine.

Using nose sprays and drops more than a few days may give you a “rebound” effect—your nasal congestion will get worse. These drugs are more useful for short-term use to relieve nasal congestion.

Non-steroidal nasal sprays: Nasal-Crom (cromolyn sodium), an OTC nasal spray, can help prevent symptoms of allergic rhinitis if used before symptoms start. This non-steroidal anti-inflammatory drug (NSAID) needs to be used three to four times a day to be effective.

Leukotriene receptor antagonist: The prescription drug Singulair (montelukast sodium) is approved to treat asthma and to help relieve symptoms of allergic rhinitis. It works by blocking substances in the body called leukotrienes. Side effects may include headache, ear infection, sore throat, and upper respiratory infection.

If you have any other health conditions, check with your health care professional first to determine which OTC medicine to take. For example, people with uncontrolled high blood pressure or serious heart disease shouldn't take decongestants unless directed by a health care professional.

And always read the label before buying an OTC product for you or your children, says Chowdhury. “Some products can be used in children as young as 2 years, but others are not appropriate for children of any age.”

Allergy Shots

People who don't respond to either OTC or prescription medications, or who suffer from frequent complications of allergic rhinitis, may be candidates for immunotherapy, commonly known as allergy shots.

According to NIAID, about 80 per-

cent of people with hay fever will experience a significant reduction in their symptoms and their need for medication within a year of starting allergy shots.

“Discuss the option of immunotherapy with your doctor thoroughly because immunotherapy is not for everybody, and there is a significant time commitment involved,” Chowdhury says.

The process involves receiving injections of small amounts of allergens that are considered to be responsible for your symptoms. The doses are gradually increased so that the body builds up immunity to the allergens. The injections are given over at least three to five years. Discontinuation is based on having minimal symptoms over two consecutive seasons of exposure to allergens. [FDA](#)

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For More Information

National Institute of Allergy and Infectious Diseases
www3.niaid.nih.gov/topics/allergicDiseases/

American Academy of Allergy, Asthma & Immunology
www.aaaai.org/

Local pollen counts from AAAAI's National Allergy Bureau
www.aaaai.org/nab/index.cfm