

Hay fever really gets up your nose

The Health Column

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Hay fever is a term used to refer to allergic rhinitis. It is commonly caused by seasonal exposure to pollen. Allergic rhinitis can cause significant irritation and interference in a person's daily activities, and considerably reduce quality of life.

Allergic rhinitis is one of the most common chronic respiratory conditions in Australia. It affects around 15% of Australians, or 3.1 million people. Clearly then, hay fever is not a condition to be sneezed at.

Research has shown that most people inherit the tendency to suffer from hay fever. If one parent has allergic rhinitis, their child has about a 30% chance of experiencing hay fever. If both parents are sufferers, then the risk shoots up to about 70%.

The signs and symptoms of hay fever develop as the result of the body's immune response. Substances, which would ordinarily cause no reaction in most people, may cause a severe allergic reaction in those who are hypersensitive to them.

At this time of year the most likely trigger factors (or allergens) include pollen and other windblown substances. But people can experience hay fever at any time. Another common trigger factor is exposure to dust mites. These microscopic animals live in their millions in pillows, sheets, blankets, doonas, curtains and carpets. With the huge range of places where dust might be found, it should be no surprise that many people sneeze and wheeze from breathing in dust mites. Similar year-round (or perennial) signs and symptoms can be caused by animal dander – the dead skin cells from our pets, especially that of cats. In addition, mould spores which are often found around the house, can cause allergic rhinitis.

Another problem is exposure to cigarette smoke, which may increase sensitivity to allergies and consequently lead to a greater likelihood of developing hay fever.

Finally, occupational hazards such as working with wood dust, seed dust, textile dust, rubber latex, some chemicals and certain foods and spices, may also increase the likelihood of becoming a hay fever sufferer.



But it's not all doom and gloom. Avoiding known trigger factors is the best way to avoid hay fever, but that is not always possible. Hay fever can be very well managed with medicines, many of which are now available without a prescription.

When medicine is required, the product choice will depend largely on the severity and frequency of signs and symptoms. For example, mild symptoms which occur for less than four days a week, or less than four weeks at a time, often respond well to oral antihistamines available over-the-counter from your pharmacy.

If signs and symptoms persist or adversely affect sleep/work, school or leisure activities, then sometimes a stronger product is needed and intranasal corticosteroid sprays (*Beconase*, *Rhinocort* or *Telnase*) may be helpful. If very itchy eyes are a concern, anti-allergy eye drops (*Eyezep*, *Livostin* or *Zaditen*) should be considered. An antihistamine spray (*Azep* or *Atrovent*) may be used when the nose is 'constantly dripping like a tap'.

Staff in your local pharmacy can assist with the selection of the most appropriate product(s). You can get even more detailed information on how best to manage allergic rhinitis from the Self Care Fact Card titled *Hay Fever* available from pharmacies providing the Pharmaceutical Society of Australia's Self Care health information.

For the nearest Self Care pharmacy location phone the Pharmaceutical Society of Australia on 1300 369 772, or go to www.psa.org.au 'Supporting practice' then 'Self Care', and then 'Find a Self Care pharmacy'.