BETTER HEALTH 4 YOU

SMART LOCAL 36 BENEFIT FUND

ASTHMA, ALLERIGIES & COPD

Spring Allergies

What is allergic rhinitis?

Rhinitis is a reaction that occurs in the nose when airborne irritants (allergens) trigger the release of histamine. Histamine causes itching, inflammation, and fluid or mucous production in the fragile linings of nasal passages, sinuses, and eyelids.

There is usually a family history of allergic rhinitis.

What are the types of allergic rhinitis?

The two categories of allergic rhinitis include:

- **Seasonal.** This type occurs particularly during pollen seasons.
- Perennial. This type occurs throughout the year and is commonly seen in younger children.

What are the causes of allergic rhinitis?

The most common causes of allergic rhinitis include the following:

- Pollen (for example, tree, grass, or weed)
- Dust mites
- Mold
- Cockroach droppings

Animal dander

Tobacco smoke

What are the symptoms of allergic rhinitis?

The following are the most common symptoms of allergic rhinitis. However, each child may experience symptoms differently. Symptoms may include:

- Sneezing
- Congestion
- Runny nose
- Itchy nose, throat, eyes, and ears
- Nosebleeds
- Clear drainage from the nose



Children with perennial allergic rhinitis may also have the following:

- Recurrent ear infections
- Snoring
- Breathing through the mouth
- Poor performance in school

The link between allergic rhinitis and asthma

Controlling asthma may mean controlling allergic rhinitis in some patients, according to allergy and asthma experts. Allergic rhinitis is a common problem that may be associated with asthma.

Guidelines from the World Health Organization recognize the link between allergic rhinitis and asthma. Although the link is not fully understood, one theory asserts that rhinitis makes it difficult to breathe through the nose, which hampers the normal function of the nose. Breathing through the mouth does not warm the air, or filter or humidify it before it enters the lungs, which can make asthma

 "Allergic salute." This is when a child rubs his or her hand upward across the bridge of the nose while sniffing. This may cause a line or crease to form across the bridge of the nose.

The symptoms of allergic rhinitis may resemble other conditions or medical problems. Always consult your child's health care provider for a diagnosis.

How is allergic rhinitis diagnosed?

Typically, the diagnosis is made by your child's health care provider based on a thorough medical history and physical examination. In addition to the above symptoms, your child's health care provider may find, on physical examination, dark circles under the eyes, creases under the eyes, and swollen tissue inside the nose. If this is the case, then your child's doctor may refer your child to see an allergist. An allergist is a specialist who is trained to perform allergy skin testing, which will tell you exactly what environmental aeroallergens cause allergic symptoms in your child.

Treatment for allergic rhinitis

Specific treatment for allergic rhinitis will be determined by your child's health care provider based on:

- Your child's age, overall health, and medical history
- Extent of the reaction
- Your child's tolerance for specific medications, procedures, or therapies
- Expectations for the course of the reaction
- Your opinion or preference

Treatment options may include:

 Avoidance of the allergens. Avoidance of the allergens that are causing the problem is the best treatment.

Traditional

antihistamines. Antihistamines help to decrease the release of histamine, possibly decreasing the symptoms of itching, sneezing, or runny nose. Some examples of antihistamines are diphenhydramine (Benadryl) or hydroxyzine (Atarax). These medications may cause drowsiness. Consult your child's health care provider to determine the proper dosage for your child.

Nonsedating

antihistamines. Nonsedating antihistamines are also antihistamines but without the side effect of drowsiness. Nonsedating antihistamines may include cetirizine (Zyrtec), loratadine (Claritin), or fexofenadine (Allegra). Consult your child's health care provider to determine the proper dosage for your child.

• Anti-inflammatory nasal

sprays. Anti-inflammatory nasal sprays help to decrease the swelling in the nose. Consult your child's health care provider to determine the proper dosage for your child.

• Corticosteroid nasal

sprays. Corticosteroid nasal sprays also help to decrease the swelling in the nose. Corticosteroid nasal sprays work best when used before the symptoms start, but can also be used during a flare-up. Consult your child's health care provider to determine the proper dosage for your child.

 Anti-leukotrienes. These are a relatively new type of medication being used to control the symptoms of asthma and allergic rhinitis. These medications help to decrease congestion in the chest and nose and are usually given by mouth.

Note: Talk with your child's health care provider before giving a decongestant to help relieve his or her symptoms.

If your child does not respond to avoidance or to the above medications, your child's allergist then may recommend immunotherapy based on the findings. Immunotherapy usually involves a three- to five-year course of repeated injections of specific allergens to decrease the reaction to these allergens when your child comes into contact with them. Consult your child's health care provider for more information.

How is allergic rhinitis prevented?

Preventive measures for avoiding allergic rhinitis include:

- Environmental controls, such as air conditioning, during pollen season
- Avoiding areas where there is heavy dust, mites, molds
- Avoiding pets

