

**IMPORTANT: NHS England have issued guidance<sup>1</sup> (March 2018) stating that a prescription for treatment of mild to moderate hay fever will not routinely be offered in primary care as the condition is appropriate for self-care. GPs are directed to the general exceptions in the guidance and their own professional contractual responsibilities in deciding whether to prescribe.**

## GUIDANCE SUMMARY (ADULTS) – 1<sup>st</sup> LINE TREATMENT RECOMMENDATIONS in situations defined within the General Exceptions<sup>1</sup> of NHS England guidance

- ✓ Encourage **self-care** and purchase of medicines. OTC widely available prices may differ.
- ✓ Oral antihistamines - **Cetirizine or Loratadine**
- ✓ Intranasal corticosteroids - **Mometasone 50mcg/dose nasal spray 140 dose or Beclometasone 50mcg/dose nasal spray 200 dose**
- ✓ Eye drops - **Sodium cromoglicate 10ml Preservative Free (PF) or Otrivine Antistin<sup>®</sup> 10ml.**

## SELF CARE

- Many antihistamines, nasal sprays and eye drops are available to purchase OTC
- All patients should take practical measures to avoid excessive exposure to pollen and other allergens by:
  - Keeping windows and doors shut especially when the pollen count is high
  - Avoiding cutting grass, large grassy places, and camping
  - Showering and washing hair after being outdoors, especially after going to the countryside
  - Wearing wrap-around sunglasses when outside
  - Keeping car windows closed and buying a pollen filter for the air vents in the car. These should be changed at each service

Useful Patient Information Leaflets are available at [www.patient.co.uk/health/hay-fever.htm](http://www.patient.co.uk/health/hay-fever.htm)

## EFFICACY OF MEDICATION TYPES ON SYMPTOMS<sup>4</sup>

Drug class	Sneezing	Rhinorrhoea	Nasal Obstruction	Nasal itching	Eye symptoms
<b>Antihistamines</b>					
• Oral	++	++	+	+++	++
• Intranasal	++	++	+	++	None
• Eye drops	None	None	None	None	+++
<b>Intranasal Corticosteroids (INCS)</b>	+++	+++	++	++	++
<b>Mast cell stabilisers (Eye Drops)</b>	None	None	None	None	++
<b>Intranasal Decongestants</b>	None	None	++++	None	None
<b>Intranasal Anticholinergics</b>	None	++	None	None	None
<b>INCS and intranasal antihistamine</b>	+++	+++	+++	+++	+++

## TREATMENT OPTIONS

### Mild-to-moderate intermittent or mild persistent symptoms<sup>3</sup>:

- Oral/topical non-sedating antihistamines are a good first choice
- Intranasal antihistamine (azelastine) has a faster onset of action (within 15 minutes)
- Intranasal Sodium Cromoglicate can be used if antihistamines are contraindicated or not tolerated<sup>3</sup>

### Moderate-to-severe persistent symptoms or initial drug treatment is ineffective<sup>3</sup>:

- Regular Intranasal corticosteroids (INCS) can be used during periods of allergen exposure<sup>3</sup>

### Additional therapy to be considered depending on symptoms (check adherence and administration technique first):

- Oral non-sedating antihistamine and INCS
- Combination therapy of an INCS and intranasal antihistamine is more effective than either alone and may further improve control if an antihistamine or INCS is ineffective
- Intranasal decongestant for up to 7 days if nasal blockage is a problem to allow penetration of INCS (xylometazoline spray)
- Intranasal ipratropium – for watery rhinorrhoea
- For patients with asthma, consider adding in a leukotriene receptor antagonist to an oral or intranasal antihistamine<sup>3</sup> as an additional seasonal support.

### If eye symptoms predominate

- Oral or topical ocular antihistamine or sodium cromoglicate eye drops

## SPECIAL PATIENT GROUPS

### For patients with difficulties swallowing tablets

- 1<sup>st</sup> line- Loratadine liquid (5mg/5ml) SF\* is £4.28 - £8.55 for 30 days treatment licensed from age of 2 years.
- 2<sup>nd</sup> line- Cetirizine liquid (1mg/ml) SF\* is £12.87 - £25.74 for 30 days treatment licensed from age of 2 years.
- If INCS is required for short term use, due to systemic absorption, consider **Mometasone** (3-18years)<sup>6</sup>.

### Pregnancy and breastfeeding<sup>7</sup>

- **INCS** is the treatment of choice. If this is not tolerated or additional treatment needed - oral antihistamine (**loratadine**). **Intranasal sodium cromoglicate** and **nasal douching** (with saline) can also be used

## ORAL ANTIHISTAMINES

- Non-sedating antihistamines are the drug of choice for most patients as they have fewer unwanted effects<sup>3</sup>. **See table below.**
- First line treatments are available OTC and are generally inexpensive
- Desloratadine and levocetirizine tablets are not recommended 1st line because there is little evidence that they confer any additional benefit and are more costly than established non-sedating antihistamines<sup>3</sup>

	Non-Sedating Antihistamine (adult dose)	Cost for 30 days treatment <sup>5</sup> (Drug Tariff Price)
<b>First line treatments</b>	<b>Cetirizine tabs 10mg OD*</b>	82p
	<b>Loratadine tabs 10mg OD*</b>	86p
<b>Second line treatments</b>	Fexofenadine tabs 120mg OD	£1.53
	Levocetirizine tabs 5mg OD	£4.37
	Desloratadine tabs 5mg OD	£5.33

## INTRANASAL PREPARATIONS

### Intranasal corticosteroids (INCS) – consider advising to buy OTC

- 1st choice is **Mometasone 50mcg/dose 140 dose** or **Beconase®** or **Beclometasone 50mcg/dose** nasal spray, ensure the 200-dose container is prescribed as others are more expensive
- **Budesonide 64mcg/dose** may be considered as a second line option
- If **Fluticasone** is required, prescribe as **Avamys® 27.5mcg/dose nasal spray** which is more cost effective than prescribing generically.
- **Dymista® (azelastine and fluticasone) nasal spray** (one spray into each nostril twice daily; **£14.80** for 30 days treatment) – may have a place in therapy where fluticasone alone has demonstrated benefit and other corticosteroids are ineffective/not tolerated.
- Intra-nasal corticosteroids begin to take effect within 6-8 hours<sup>6</sup>; for maximum efficacy begin 2 weeks prior to exposure.
- Advise the patient on the importance of a good nasal spray technique
- Reduce the dose of nasal spray to a maintenance dose once symptoms are controlled

### Other intranasal preparations

- Intranasal **ipratropium bromide** (two sprays into each nostril, two to three times daily; **£8.72 - £13.08** for 30 days treatment) is an option for add-on treatment in people with runny nose associated with allergic rhinitis. Should be used with caution in people at risk of closed angle glaucoma
- **Azelastine** (one spray in each nostril twice daily; **£8.02** for 30 days treatment) is the only intranasal antihistamine that is licensed in the UK for the treatment of allergic rhinitis

### References Note: \*OTC available but often as different pack size/brand

1. Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs, NHS England, March 2018 [otc-guidance-for-ccgs.pdf \(england.nhs.uk\)](https://www.nhs.uk/medicines/otc-guidance-for-ccgs.pdf)
  2. An update on the management of hay fever in adults. DTB 2013; 51:30-3
  3. Clinical knowledge summaries. Allergic rhinitis [online] [Allergic rhinitis | Health topics A to Z | CKS | NICE](#)
  4. BSACI guidelines for the diagnosis and management of allergic and non-allergic rhinitis 2017 [online] <http://onlinelibrary.wiley.com/doi/10.1111/cea.12953/full>
  5. All prices taken from Drug Tariff online March 2023 and DM+D online March 2023
  6. BNF March 2023 online, 7. SPS March 2023 online
- Approved by the PCN April 2018; Guideline updated by Anna Hall (April 2023) Review date: April 2024

Intranasal corticosteroid	Dose	Cost for 30 days treatment <sup>5</sup>
<b>Beconase Aqueous® 50mcg/dose 200dose</b> (prescribed by brand)*	2 sprays BD reducing to 1 spray BD	£1.58 - £3.16
<b>Beclometasone 50mcg/dose 200 dose</b> (prescribed generically)*	2 sprays BD reducing to 1 spray BD	£1.70 - £3.40
<b>Mometasone 50mcg/dose 140 dose</b>	2 – 4 sprays OD reducing to 1 spray OD	£1.30 - £5.19
<b>Benacort® 64mcg/dose 120 dose</b> (prescribed by brand) <sup>5</sup>	2 sprays OD reducing to 1 spray OD	£3.21 - £6.42
<b>Budesonide 64mcg/dose 120 dose</b> (prescribed generically)	2 sprays OD reducing to 1 spray OD	£4.31 - £8.61
<b>Avamys® 27.5mcg/dose (fluticasone furoate) 120 dose</b>	2 sprays OD reducing to 1 spray OD	£3.22 - £6.44
<b>Nasofan® 50mcg/dose (fluticasone propionate) 150 dose</b> (prescribed by brand)*	2 sprays OD - BD reducing to 1 spray OD	£3.22– £12.86
<b>Fluticasone 50mcg/dose 150 dose</b> (prescribed generically)*	2 sprays OD - BD reducing to 1 spray OD	£4.40 - £17.62
<b>Triamcinolone 55mcg/dose 120 dose*</b>	2 sprays OD reducing to 1 spray OD	£3.70 - £7.39

## TREATMENT OPTIONS - NON-FORMULARY

<b>Antihistamines</b>	<ul style="list-style-type: none"> <li>• <b>Mizolastine 10mg MR tabs</b> has been implicated in causing an abnormal prolongation of the QT interval<sup>2</sup> (£6.92 for 30 days)</li> <li>• <b>Cetirizine 10mg capsules</b> cost £13.24 for 30 days, <b>Rupatadine 10mg tabs</b> cost <b>£66.48</b> for 30 days and <b>Bilastine 20mg tabs</b> cost £6.00 for 30 days. These are considered to be less cost-effective</li> <li>• <b>Acrivastine 8mg caps</b> needs to be given three times a day and is therefore less desirable from the perspective of adherence to therapy<sup>2</sup> (<b>£27.45</b> for 30 days).</li> <li>• <b>Desloratadine &amp; levocetirizine</b> oral solutions</li> </ul>
<b>Kenalog® injection</b>	<ul style="list-style-type: none"> <li>• Depot steroids should not be prescribed for hay fever. Evidence of safety is lacking and there is a significant risk of prolonged side-effects (e.g., osteoporosis) which cannot be mitigated by withdrawal of the drug</li> </ul>

## TREATMENT OPTIONS - BLUE

<b>Grazax®</b>	<ul style="list-style-type: none"> <li>• <b>see Surrey PAD for further details - <a href="https://surreyccg.res-systems.net/PAD/Search/DrugConditionProfile/4383">https://surreyccg.res-systems.net/PAD/Search/DrugConditionProfile/4383</a></b></li> </ul>
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## EYE DROPS

Both INCS and oral antihistamines are usually effective for eye symptoms but if additional treatment is required consider:

- Sodium cromoglicate PF eye drops (£3.80 /10ml)\* is a mast cell stabilizer which may support prolonged control of symptoms - available OTC
- An ocular antihistamine, Otrivine Antistin® (£3.35/10ml) (xylometazoline and antazoline)\* is suitable for rapid, short-term relief of infrequent ocular symptoms - available OTC; avoid in angle-closure glaucoma.