Every year approximately one in ten people in Ireland experience the discomfort of hay fever. Some people only have symptoms during the summer. Others have hay fever-like symptoms all year round (called perennial rhinitis). This booklet describes the symptoms and causes of both conditions. It offers practical advice on how to avoid your triggers and find the treatment that is right for you.

Hay fever and perennial rhinitis

What are they?

Hay fever is a seasonal condition. It is sometimes called "seasonal allergic rhinitis". People with hay fever are allergic to pollen and spores.

Pollen is the tiny, dust-like particles given off by certain types of trees, grasses, weeds and flowers. Spores are given off by fungi and moulds.

In some people, hay fever-like symptoms occur all year round. This condition is called "perennial allergic rhinitis" (or perennial rhinitis). This is usually caused by an allergy to things (or allergens) present in everyday life, such as house-dust mites, furry or feathery animals, or some foods.

If you have an allergy, your body reacts when you come into contact with certain allergens. As soon as you inhale them, or if they get into your eyes, they irritate the sensitive linings of your nose, throat and eyes. This causes the symptoms of hay fever or perennial rhinitis to appear.

What causes hay fever?

There are more than 30 types of pollen and 20 types of spores that can trigger hay fever:

- Grass pollen is the most frequent cause of hay fever. In
Ireland a high percentage of people are allergic to grass pollen.

❖ Tree pollen can also cause problems. Troublesome trees include the elder, horse chestnut, hazel and birch. The birch is the most common culprit though - in Ireland most people with hay fever are allergic to birch pollen.

❖ Weeds like plantains, mugwort, nettles and docks also produce bothersome pollen.

❖ Wind-pollinated flowers (eg the Daisy family) are another common source of problems.

❖ Spores are produced by fungi such as mushrooms and moulds like those in compost heaps.

Some people's hay fever symptoms are triggered by just one or two of the above, others are affected by more.

Different pollens and spores are released throughout the year. To identify which ones you are allergic to, make a note of when your symptoms occur.

**What causes perennial rhinitis?**

The major indoor allergens that cause perennial rhinitis are the house-dust mite and furry and feathery animals. Other things that can cause problems all year round are moulds, certain chemicals and some foods.

Unfortunately it can be very difficult to identify exactly which allergens are causing your problems. It's a good idea to keep a diary card, record the times when your symptoms are worse and try to identify what might have triggered them. Discuss the results with your GP, who may help to identify your main allergens or failing that may refer you to an allergy specialist.
What are the symptoms?

Typical symptoms of hay fever and perennial rhinitis are:

- Sneezing
- Itchy, blocked or runny nose
- Red, itchy or watery eyes
- Itchy throat, inner ear or mouth
- Headaches
- A loss of concentration and generally feeling unwell.

Different people will experience different symptoms. Some people might experience all the symptoms. Others might experience only a couple.

- The common cold can often be confused with hay fever and perennial rhinitis because they all cause similar symptoms. However, a cold normally lasts for around week. Sneezing, a streaming nose and itchy eyes, which persist for a few weeks, may well be due to either hay fever or perennial rhinitis.

- Allergens can also trigger asthma symptoms: tight chest, shortness of breath, coughing and wheezing. If this happens to you, speak to your doctor or nurse as soon as possible. They'll give you medications to help you control these symptoms.

How can I control my symptoms?

Whether you have hay fever or perennial rhinitis, there are two main courses of action open to you:

- You can try to avoid those allergens that affect you.
- You can take effective medication (as allergens are impossible to avoid completely).

A combination of the two is often the most successful method of controlling symptoms.
Avoiding the pollen and spores

Pollen and spores are a problem in towns and cities as well as in the countryside. This is because they are small and light enough to be carried in the air over great distances during the course of the day. Most pollen is released in the morning and rises skywards with the heat of the day. It then gets whisked overland by winds and breezes. The pollen then sinks back to earth late afternoon or early evening as the temperature starts to drop.

Although it’s difficult to avoid pollens and spores completely, there are several sensible and worthwhile precautions you can take.

Indoors

❖ Keep doors and windows closed especially mid-morning and late afternoon to early evening. These are the times when the pollen count is usually at its highest.
❖ Vacuum regularly and dust with a damp cloth.
❖ Avoid drying your clothes outside. But if you do, give them a good shake before bringing them back into the house. That way you will get rid of any pollen and spores that might have blown onto them.
❖ If you have been out walking or gardening, shower, wash your hair and change your clothes when you get back in. That way you won't carry spores and pollen around the house.
❖ Splash your eyes with cold water regularly. This will help flush out any pollen. It will also soothe and cool your eyes.
❖ Keep fresh flowers out of the house.
❖ Keep furry pets out of the house during the hay fever season. If you're pet does come indoors, wash or bathe them regularly to remove any lingering pollen from their fur.
❖ Another important tip is to stop people from smoking in your home. Smoking and breathing in other people's smoke irritates the lining of your nose, eyes, throat and airways. This can make your hay fever symptoms worse.
Outdoors

❖ Check the pollen forecast on the television or in the newspaper before venturing outside. This will give you an idea of how high or low the pollen count is in your area.
❖ Try to stay indoors if there is a high pollen count.
❖ Wear wraparound sunglasses, these will help stop pollen blowing into your eyes.
❖ Smear Vaseline inside your nose. It might sound horrible, but it can help to stop pollen and spores from settling on the lining of your nose.
❖ Try to stay out of places with lots of grass, like parks or fields.
❖ Keep your car windows closed. Some cars can be fitted with pollen filters. Ask at your local garage for further details.
❖ Try to avoid mowing the lawn or weeding. These activities can create clouds of pollen and spores.
❖ If you enjoy gardening, consider creating a hay fever-friendly environment for yourself. Grow insect-pollinated plants like the geranium, iris and clematis. Consider replacing the lawn with attractive paving. Don't grow any new hedges and don't cut existing ones yourself. Do away with compost heap, (which produce mould spores). For further information on Low Allergy Garden contact Asthma Society of Ireland.

How to cope at exam time

If you are getting ready to sit an exam, it is important that you get hay fever symptoms under control as early as possible.

Once your hay fever is under control you will find yourself sleeping better at night. This means you will feel much fresher during the day and will be able to concentrate much harder on your revision. You obviously feel a lot better in yourself if you are not sneezing, sniffing or rubbing your eyes all the time.
The day before the exam
❖ See your doctor well in advance of the hay fever season (and certainly no later than the Easter holidays) to make sure you have got the right treatment.
❖ Tell your teacher you have hay fever. Your teacher might want to write to the exam board on your behalf. The exam board might take your hay fever into account when your paper is marked, especially if your symptoms are really bad during the exam.

On the big day
❖ Don’t forget to take regular medication!
❖ Tell the adjudicator if your hay fever is bothering you.
❖ Splash your eyes with cold water before going into the exam room.
❖ Try not to sit near an open window.
❖ Keep a supply of tissues and effective, quick-acting hay fever treatments close at hand just in case.

How to cope on holidays
The hay fever season varies from country to country. It all depends on the climate and the type of vegetation. However, it is possible to plan a holiday that will not be ruined by your hay fever.
❖ Go somewhere, which has low pollen counts all year round. For example, there is generally less pollen around in coastal areas where the breeze blows fresh air in off the sea.
❖ Mountain regions and moor-land tend to contain fewer pollen-producing plants and can be kinder on your hay fever.
❖ Try visiting places outside their peak pollen season. For example, the grass pollen season in Mediterranean regions starts and finishes about five weeks earlier than in northern Europe. This means that by mid-July the pollen count in popular holiday destinations like southern Spain, France, Italy, Greece and the Mediterranean islands is usually well past its peak.
Grass pollen is at its most abundant in Florida between April and October. In the Caribbean it's a problem in June, July and from October to March.

Avoiding indoor allergens

If you have perennial rhinitis and are allergic to the house-dust mite, the following tips may help:
- Use barrier covers for your bedding.
- Hot wash (at 60°C) all bedding at least once a week.
- Vacuum frequently using a high-efficiency vacuum cleaner.
- Dust regularly with a damp cloth.

Other tips
- If you don't already own a pet, think carefully before getting one.
- If you already have a pet, keep it out of the lounge and bedroom areas and bathe it regularly.
- Give up smoking and don't let others smoke in your home. Chemicals in cigarette smoke can make allergies worse.

Treatments for hay fever and perennial rhinitis

There is no cure for either hay fever or perennial rhinitis. However, in most cases symptoms can be controlled effectively.

The following lists are some of the most widely used treatments for hay fever and perennial rhinitis. For some you need a prescription from your doctor, others can be bought over the counter without a prescription. Talk to your doctor, nurse or pharmacist and they will help you to find the most suitable treatment.

Antihistamines

Antihistamines provide quick relief for symptoms such as sneezing, runny nose, itchy, watery eyes and itchy throats. They work by stopping many of the effects of histamine - one of the chemicals the body releases during an allergic reaction.
They come in tablets, capsules or as liquids. Clarityn (loratadine), Zirtek (cetirizine) and Semprex (acrivastine) are some examples, but there are many others.

**Side effects**

Newer antihistamines cause little if any sleepiness, but older types such as Piriton (chlorpheniramine) can make you drowsy. Do not take these older types if you are going to drive, operate machinery or sit an exam.

Hismanal (astemizole) and Triludan (terfenadine) may rarely react with other medicines (for example, antibiotics and even grapefruit juice) to produce possibly dangerous side effects. Always check with your doctor or pharmacist.

**Decongestant sprays**

Decongestant sprays may be used occasionally to relieve stuffy or blocked noses.

**Side effects**

Although side effects are rare, they must only be used for a few days at a time. If over-used, they can lose their effect. This can lead to a need for bigger doses.

**Preventer treatments**

Preventer treatments are used to prevent nose and eye symptoms developing in the first place. They do this by suppressing the allergic reaction in the nose and eyes.

They are very effective at controlling hay fever and perennial rhinitis symptoms if used regularly each day. If you have hay fever, you should start using them a couple of weeks before the hay fever season starts.

Eye drops, nasal sprays and nose drops are also available. Some contain a corticosteroid (for example, Nasobec (Beclomethasone), Flixonase (fluticasone), Beconase (beclomethasone) and Syntaris (flunisolide). Others contain sodium cromoglycate (for example, Rynacrom, Opticrom and Clariteyes). Ask your doctor, nurse or pharmacist, as they are many others available.
**Side effects**

Some preventer treatments contain a small amount of corticosteroid. They do not generally cause side effects. Some patients report irritation and occasionally nose bleeds. Other patients find that eye drops sting a little.

If you need to take corticosteroids long-term, discuss with your doctor, nurse or pharmacist.

Remember: always read the label and do not exceed the stated dose.

**How to take nasal sprays and drops**

If you use a nasal spray, bend your head forwards to look at your feet before spraying one or two puffs into each nostril and breathing in slowly.

If you use nasal drops, you need to bend right over so that your head is upside down.

If in doubt, read the patient information leaflet that comes with the medicine.

Ask your doctor, nurse or pharmacist to check that you are taking your medicine correctly.

**How do I know which treatments to take?**

Talk to your doctor, nurse or pharmacist about which treatments to take. They will be able to advise you on which treatments are the best for you. If you have hay fever, early preventative treatment is the most effective. Visit your doctor or pharmacist long before the hay fever season starts.

If your symptoms are mild, you may only need to take an antihistamine tablet. If this is not enough to control the problem, you may need to use a preventer treatment as well.

Often the best way to control symptoms is to take a preventer nasal spray or drops together with an antihistamine tablet. Anti-allergy eye drops can be added and should be used regularly if you have symptoms affecting your eyes.
Do complementary treatments work?

Some people find that complementary therapies can help relieve their hay fever or perennial rhinitis symptoms. However, there is little scientific evidence that they are effective when used on their own. If you want to try one of the many complementary treatments available, tell your doctor and do not stop taking your normal medication.

Other leaflets available in this series including:

- Asthma Beyond Fifty
- Asthma in Children
- Asthma and Exercise
- Asthma and Holidays
- Asthma and Medicines
- Asthma – Nebulisers
- Asthma and Pregnancy
- Asthma and School
- Asthma Society of Ireland
- Asthma – The Triggers
- Asthma and Women
- Asthma and Work
- Asthma – Taking Control
- Asthma and Steroids

These leaflets are being added to and updated on a regular basis.

For further information contact our office
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For further information on asthma visit our Website at: www.asthmasociety.ie

Or phone our Asthma Line at 1850 44 54 64 for 24 hour pre – recorded information.

Or phone our Asthma Liveline to speak to an Asthma Nurse Specialist on 01 8788122. Monday, Wednesday and Thursday mornings: 9.30 am to 1.00 pm. (Times may vary – please contact our main office if you experience any difficulty.)

The Asthma Society is primarily an information service which aims to enhance and augment the information provided by your GP, asthma nurse and chemist.