It’s that time of year again where Christmas is a distant memory and the longer evenings start to bring thoughts of summer. Unfortunately, the first shoots of spring also stir the fear of allergies in many of us. Allergies have become a widespread phenomenon and at any one time can affect one-in-four people in the UK. Common allergic conditions include hay fever, asthma, atopic eczema and food allergies, and many of these become worse in the spring/summer months.

The onset of spring triggers seasonal allergies as the trees and flowers begin to bloom and pollen becomes airborne, causing discomfort for many people. Luckily, practice and community nurses and community pharmacists are well-placed to provide education and advice to those suffering from allergies, discussing the causes and offering self-help measures and treatment options.

WHAT IS AN ALLERGY?

An allergy is an adverse physical reaction to a particular food or substance in the environment. Allergy symptoms are varied but include coughing, sneezing, itchy skin or eyes, rashes and/or swelling.

Any substance that triggers an allergic response is called an ‘allergen’. The most common allergens include grass and tree pollens, dust mites, animal dander (similar to dandruff and made up of dead skin cells and hair/feathers), foods such as shellfish, nuts, milk, eggs, wasp/bee stings, and some medications. An allergic reaction is caused when the body treats the substance as a threat, similar to our reaction to infection, and antibodies are produced to fight off the allergen (what we know as the immune response). When a person subsequently comes into contact with this allergen, the body ‘remembers’ the previous exposure and produces further antibodies. It is this release of chemicals in the body which then produces the allergic response.

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Most allergic reactions are mild and only a few people have severe reactions — but these require immediate and in some cases life-saving intervention. People therefore need information on how to manage their allergies, including guidance on self-help measures and details of when to administer medication or to seek professional help. There may be no ‘cure’ for allergies, but steps can be taken to avoid or reduce allergic symptoms/reactions.

SPRING ALLERGIES

Many of the allergies that surface in the springtime have similar symptoms, including:

- Itchy eyes and nose
- ‘Runny nose’
- Sneezing

Hay fever

A diagnosis of hay fever (seasonal allergic rhinitis) is usually made from observation of the patient’s specific symptoms, such as sneezing, itch and watering eyes. Where symptoms are particularly severe, identification of the main allergens may be an option and this can easily be done by a simple blood test or referring the patient for an allergy patch test. Each substance for allergy testing is applied to a disc and then taped onto the skin. Once the disc is removed, the skin is checked for any signs of inflammation/redness, which would indicate an allergic response.

Hay fever season can last from March until October, potentially leaving some patients with symptoms for up to six months of the year. While there is currently no cure the majority of symptoms can be alleviated through simple avoidance measures or the use of antihistamines and corticosteroids (see below).

Hay fever is not a serious threat to health, but the symptoms can have a negative impact on an individual’s quality of life. Severe hay fever can also disrupt people’s schooling or work.

Causes of hay fever

Pollen is a fine powder which is released by plants as part of their reproductive process and is probably the most common seasonal allergen. It is this fine powder that irritates the nose, eyes, throat and sinuses, causing
them to become swollen and inflamed and resulting in the sneezing, coughing and watery/itchy eyes so common in people with hay fever. There are different types of pollen and these are released from plants at different times:

- Tree pollens: released from late March to mid-May
- Grass pollens: approximately middle of May to July
- Weed pollens: end of June until late Autumn
- Mould spores: late March to November.

Pollen counts tend to rise when it is hot, dry and windy, whereas low pollen counts are common on cold, damp and rainy days. It is impossible to avoid pollen completely, as it is easily brought into the home on clothes and shoes and by leaving windows open, however there are some measures which can be taken to try minimise pollen contact:

- When pollen counts are very high stay indoors if possible
- Keep windows/car windows closed
- Avoid cutting grass or walking/ playing in grassed areas
- Avoid freshly cut flowers in the home/office/classroom
- Avoid smoking indoors
- Wear sunglasses to minimise pollen contact with the eyes
- Minimise contact with animal dander and if the patient is a pet owner ensure that animals’ coats are kept clean and pollen-free with regular washing/grooming
- Keep house dust to a minimum where possible and use specially designed hoovers filters.

**MEDICAL TREATMENTS**

There are a range of effective medicines (antihistamines) that can be used to treat allergy symptoms. Corticosteroids and antihistamines are both treatment options for hay fever or allergic conditions. Antihistamines tend to be a more common self-treatment option for mild-to-moderate allergic reactions, whereas corticosteroids are used in moderate-to-severe allergic reactions and usually prescription-based. Most corticosteroids used in the treatment of hay fever tend to be in the form of nasal sprays, whereas antihistamines tend to be in tablet form. As with all medications, antihistamines and corticosteroids should only be used by the person they are intended for and it should be stressed to patients that they follow the prescription or manufacturer’s guidelines.

Antihistamines can be bought from local pharmacies. However, if the patient’s symptoms are severe, or he or she also suffers from a chronic illness such as asthma, then these may be prescribed by a GP. Antihistamines are usually very effective in treating the associated symptoms of hay fever. However, if they are planning to use over-the-counter drugs, patients should always be told to seek advice from the pharmacist regarding the risk of any side-effects or interactions with other medications.

If patients are using over-the-counter preparations which are not working, the community pharmacist or practice nurse should be able to advise whether they are taking the correct preparations and if they are taking them correctly. Treatments should be started early if the onset of symptoms is predictable, or as soon as the symptoms occur.

Mild allergy or hay fever treatments can be freely purchased from chemists, while moderate-to-severe allergy/hay fever may require stronger medication prescribed by a GP. Patients buying over-the-counter hay fever treatments should be advised to take into account any side-effects such as drowsiness, especially if driving or working machinery. If in any doubt, they should ask the pharmacist’s advice.

Treatments come in a variety of formats such as tablets, eye drops or nasal sprays. Nasal sprays are the ideal choice if nasal congestion is an issue, either relieving local symptoms directly inside the nose or providing more widespread relief by being absorbed into the bloodstream through the thin inner lining of the nostrils. To make sure these medications are as effective as they can be, you should be prepared to offer patients guidance and demonstrate how to self-administer them. This is particularly necessary with nasal sprays, which are often taken incorrectly and therefore not effective.

**WHERE TO GO?**

There are many resources available which offer patients guidance and support and will help you to provide the latest advice possible. Asthma UK (www.asthmauk.org) and Allergies UK (www.allergyuk.org) are dedicated websites offering up-to-date, researched and professional advice on all issues relating to allergies.

Any patients who you suspect of having an allergy should be offered appropriate advice as soon as possible, as early diagnosis and treatment will ease their symptoms and improve their quality of life. **JCN**