

# Asthma & Allergic Rhinitis

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## About us

### Our Mission

**Our mission is to stop asthma deaths in Ireland.**

We are the voice of the 380,000 people with asthma in Ireland, and our work radically transforms their quality of life.

### Our Vision

Our vision is that everyone with asthma in Ireland lives a full life, symptom-free.

### How we achieve our Mission & Vision



## Introduction

Every year approximately 80% of people with asthma experience the discomfort of allergic rhinitis. Some people only have symptoms during the summer; this is called seasonal allergic rhinitis, which is commonly referred to as hayfever. Other people have symptoms all year round, this is called perennial allergic rhinitis.

Most asthma and allergic rhinitis are caused by an allergic reaction and if you have asthma, allergic rhinitis may make your asthma symptoms worse.

attempt to clear the obstruction in the lower part of the airway, sneezing is an attempt to clear the mucus from the upper part of the airway.

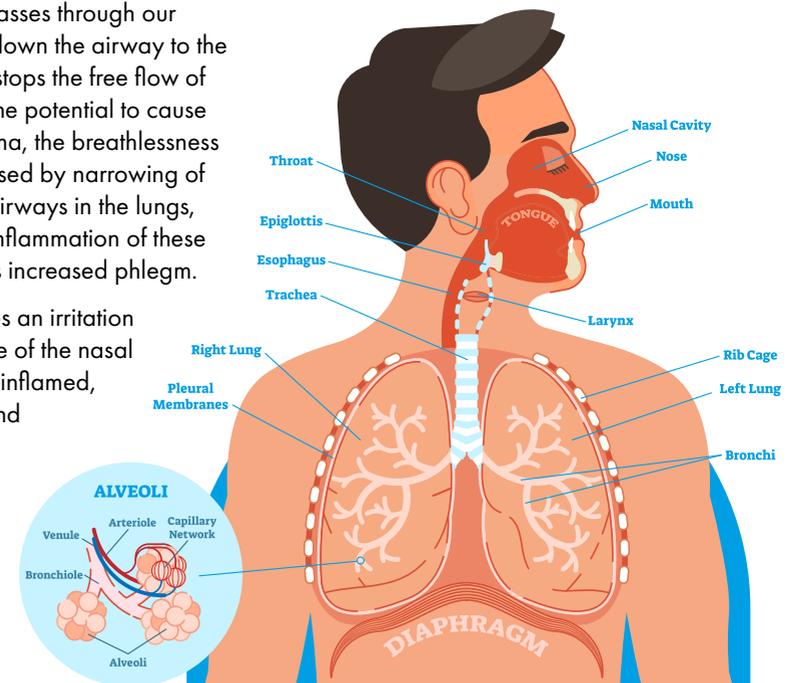
### One Airway, One Disease

Asthma and allergic rhinitis are related conditions linked by a common airway. For this reason, international guidelines recommend that asthma and allergic rhinitis should be treated together.

If you have an allergy, your body reacts when you come into contact with a particular allergen. If allergens are inhaled or come in contact with your eyes, they irritate the sensitive linings of your nose, throat and eyes causing the symptoms of allergic rhinitis.

The air we breathe passes through our nose and continues down the airway to the lungs. Anything that stops the free flow of air to our lungs has the potential to cause problems. With asthma, the breathlessness and wheezing is caused by narrowing of the small branched airways in the lungs, called bronchioles. Inflammation of these small airways causes increased phlegm.

Allergic rhinitis causes an irritation in the nose. The inside of the nasal membrane becomes inflamed, causing a blocked and runny nose. In the same way as coughing is an



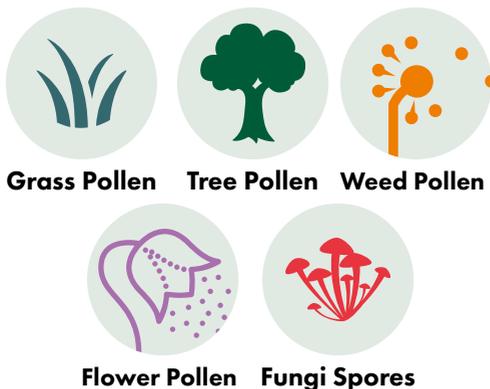
# About allergic rhinitis and symptoms

## Seasonal allergic rhinitis

Seasonal allergic rhinitis is an allergic reaction to pollen and spores and only occurs at certain times of the year. Pollen are tiny, dust-like particles given off by certain types of trees, grasses, weeds and flowers. Spores are particles given off by fungi and moulds.

### What causes seasonal allergic rhinitis?

There are more than 30 types of pollen and 20 types of spores that can trigger seasonal allergic rhinitis:



Symptoms can be triggered by one or more of the list above. The most common allergen is grass pollen which is most evident from **April to early September**. Different pollens and spores are released throughout the year.

You can keep track of your symptoms in the pollen calendar at the back of this booklet to help you identify which pollens and spores affect you. Check out our Pollen Tracker on [www.asthmasociety.ie](http://www.asthmasociety.ie).

## Perennial allergic rhinitis

Perennial allergic rhinitis is an allergic reaction to allergens found in everyday life, such as dustmites or animals, and can occur all year round.

### What causes perennial allergic rhinitis?

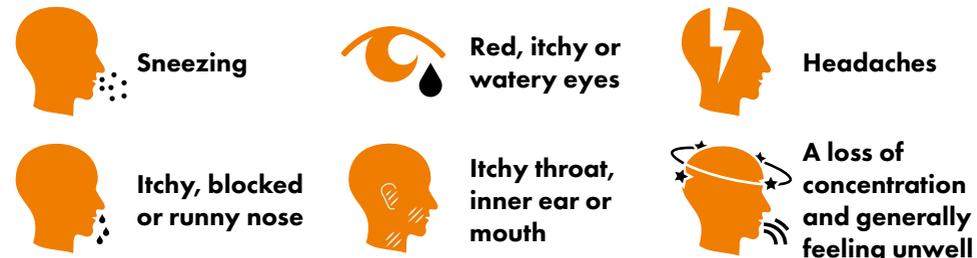
The major indoor allergens that cause perennial rhinitis are:



It can be very difficult to identify exactly which allergens are causing perennial allergic rhinitis. Keep a diary recording the times and locations when your symptoms are worse and try to identify what may have triggered them. Discuss the results with your health care professional who will help you identify your allergens or may refer you to an allergy specialist.

## What Are the Symptoms?

Typical symptoms of seasonal and perennial allergic rhinitis are:



Symptoms of allergic rhinitis can be confused with the common cold; however a cold usually lasts for around a week so if symptoms persist it may be due to allergic rhinitis. If you have an itchy, sneezy, runny or blocked nose when you do not have a cold then you might have allergic rhinitis.

Allergens can also trigger asthma symptoms such as tight chest, shortness of breath, coughing and wheezing. If your asthma is triggered by allergens, see your health care professional for an asthma review.

SYMPTOMS	ASTHMA	COPD	FLU	COLD	HAYFEVER	COVID-19
COUGH	●	✓	✓	✓	●	✓
SHORTNESS OF BREATH	●	✓	✗	✗	✗	✓
FEVER	✗	✗	✓	●	✗	✓
SORE THROAT	✗	✗	●	✓	✓	●
RUNNY/STUFFY NOSE	●	✗	●	✓	✓	●
FATIGUE	✗	●	✓	●	●	●
ACHES AND PAINS	✗	✗	✓	✓	✗	●
DIARRHOEA	✗	✗	●	✗	✗	●
HEADACHE	✗	✗	✓	●	●	●
SNEEZING	✗	✗	✗	✓	✓	✗

✗ NO ● SOMETIMES ✓ COMMON

# Seasonal allergic rhinitis\*

## Managing your asthma during the hayfever season



Try to identify your triggers and the time of the year these are most troublesome for you; this will help you to manage your condition and start treatment early. Avoid known triggers.



Record when they occur in a pollen diary or use the pollen calendar at the back of this book.



Keep an eye on the Pollen Tracker, available each year on [asthma.ie](http://asthma.ie). The pollen tracker provides daily updates of pollen levels across the four provinces, and also predictions of pollen levels for the following day.



Work with your GP, nurse or pharmacist to draw up a preventative treatment plan, early preventative treatment is the most effective. Your GP, nurse or pharmacist may prescribe an over the counter antihistamine. For further information on antihistamines, see page 11.



Keep your reliever inhaler (generally blue) with you at all times, for emergency use only.



Continue to take your medication as prescribed by your physician. Use a spacer when using your inhaler and use videos on inhaler techniques are available on [asthma.ie](http://asthma.ie)



Download an asthma action plan, available at [asthma.ie](http://asthma.ie) and fill it in with your GP or asthma nurse specialist. There is also an Asthma Action Plan attached to this booklet.



A list of your medication and when to take it (even when you're feeling well)

**If you don't control your allergic rhinitis correctly, you are at a higher risk of an acute asthma attack. If you think you are having an asthma attack, follow the 5 Step rule.**

\*commonly referred to as Hayfever



An Asthma Action Plan is an essential tool for managing your asthma. It is your personal guide to manage your asthma when it gets out of control.

It will help you to recognise asthma symptoms and provide you with information on what action to take. An Asthma Action Plan will have all the information you need to keep your asthma under control.

A completed Asthma Action Plan will include;

- Information on how to care for your asthma when you're feeling well, slightly symptomatic and even uncontrolled.
- How to tell if your asthma is getting worse
- What to do if your asthma symptoms keep getting worse
- What to do if you have an asthma attack (The 5 Step Rule)
- Any important contact information like your GP or emergency contacts.



Download your Asthma Action Plan here

# Avoiding Pollen and Spores

Pollen and spores are tiny airborne particles given off by trees, weeds, grasses and fungi. They are spread for fertilisation and are light enough to be carried in the air over great distances. Pollen and spores are a problem in towns and cities as well as in the countryside.

Most pollen is released in the morning and rises upwards with the heat of the day. During the day it gets blown overland and then sinks back to earth in late afternoon or early evening as the temperature starts to drop.

It is impossible to avoid pollen and spores completely, but here are some helpful tips and precautions you can take.

## Top Tips to Survive Hayfever Season – Indoors



Keep doors and windows closed especially during mid-morning and late afternoon to early evening, as this is when the pollen count is usually highest.



Vacuum regularly using a vacuum cleaner with a High Efficiency Particulate Air (HEPA) filter and dust with a damp cloth.



Avoid drying your clothes outdoors. If you dry your clothes outdoors, shake them before bringing them back into the house. This will get rid of any pollen and spores that might have blown onto them.



Shower, wash your hair and change your clothes if you have been outdoors for an extended period.



Keep furry pets out of the house during hay fever season.

If pets come indoors, wash or bathe them regularly to remove any lingering pollen from their fur. Pets should be confined to a designated area in the house. They should not be allowed in bedrooms and should ideally be kept to areas with no carpets or upholstery.



Splash your eyes with cold water regularly to help flush out pollen and help soothe & cool your eyes.



Do not keep fresh flowers in the house.



Ask others to refrain from smoking in your home. Smoking and breathing in second hand smoke irritates the lining of your nose, eyes, throat and airways.

## Top Tips to Survive Hayfever Season – Outdoors



Try to stay indoors as much as possible when the pollen count is high.



Keep your reliever inhaler (usually blue) with you at all times.



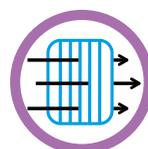
Wear wraparound sunglasses to stop pollen getting into your eyes.



Rub Vaseline/haymax/prevalin under your nose, it can help to stop pollen and spores from settling on the lining of your nose.



Try to stay away from grassy areas such as parks or fields.



Keep your car windows closed when driving. Some cars can be fitted with pollen filters. Ask at your local garage for further details.



Avoid mowing the lawn or weeding as these activities can create clouds of pollen and spores. If you are cutting grass or weeding, wearing a micro-fibre facemask may be helpful.



If you enjoy gardening, it is possible to create an allergy friendly garden. For more information see our Gardening with Asthma and Allergies booklet.



Avoid exercising outside when the pollen count is high. If you have asthma symptoms during exercise: STOP, take your reliever inhaler (generally blue) and wait 5 minutes until you can breathe easily and are symptom free before starting again.



Wear a cycle mask when cycling at peak pollen times to reduce the amount of pollen you inhale.



Avoid roadways or industrial plants as exhaust fumes and air pollution may make symptoms worse.

Check the pollen forecast on [www.asthmasociety.ie](http://www.asthmasociety.ie)



# Perennial allergic rhinitis

## Top Tips for Avoiding Indoor Allergens



Use allergen-proof covers on mattresses, pillows and duvets, preferably use allergen-proof covers on mattresses, pillows and duvets, preferably those with a micro-woven fabric (microporous  $\leq 10\mu\text{m}$ ) and water permeable.



If you do have a furry or feathery pet, keep it out of the lounge and bedroom areas and bathe it regularly.



Dust regularly with a damp cloth.



Vacuum mattresses, curtains and soft furnishings, as well as carpets and floors.



Hot wash (at  $60^\circ\text{C}$ ) all bedding at least once a week.



Avoid keeping a furry or feathery pet indoors.



Reduce the number of cuddly toys and wash at  $60^\circ\text{C}$ .



Vacuum frequently using a high-efficiency particulate air filter (HEPA) vacuum cleaner.



If you smoke, consider giving up and ask visitors to refrain from smoking in your home. For information on how to quit smoking, contact the **Quit** helpline on **1800 201 203** or visit [Quit.ie](http://Quit.ie).

# Treatments & how to take your medications

## Treatments

**There is no cure for allergic rhinitis; however in most cases symptoms can be controlled effectively.**

Some allergic rhinitis treatments require a prescription from a doctor but others can be purchased without prescription. Speak to your community pharmacist who can advise on the best non prescription treatment for you.

Try to identify your triggers and the time of the year these are most troublesome for you; this will help you to manage your condition and start treatment early.

## Treatments Explained

### Antihistamines

Antihistamines provide quick relief of symptoms such as sneezing, runny nose, itchy, watery eyes and itchy throat. They work by stopping many of the effects of histamine which is one of the chemicals the body releases during an allergic reaction.

You can take them orally (e.g. tablets or drops) or nasally (e.g. nasal spray). Loratadine, cetirizine and acrivastine are some examples of antihistamine medication, but there are many others.

**Possible Side Effects:** Some antihistamines may cause drowsiness, for example chlorpheniramine (Piriton), speak to your pharmacist or GP before taking them. Avoid taking antihistamines that cause drowsiness if you are going to drive, operate machinery or sit an exam.

Terfenadine may, rarely, react with other medicines (for example, antibiotics and even grapefruit juice) and cause possibly dangerous side effects.

Always check with your health care professional before taking terfenadine.

### Decongestant Sprays

Decongestant sprays may be used occasionally to relieve stuffy or blocked noses; however overuse should be avoided as this may result in a return of symptoms and increased runny nose.



# Treatments & how to take your medications

## Preventative Treatments

Preventative treatments are used to prevent nose and eye symptoms developing. They do this by suppressing the allergic reaction in the nose and eyes. If used regularly each day, they are very effective at controlling seasonal and perennial allergic rhinitis symptoms.

For seasonal allergic rhinitis preventative treatment should commence 2-3 weeks before the allergen is airborne.

Preventative eye drops, nasal sprays and nose drops are available in pharmacies and on prescription. Ask your GP, nurse or pharmacist for the best preventative treatment to suit your needs.

## Corticosteroids

Corticosteroids, either as sprays or drops, are anti-inflammatory agents. They suppress nasal symptoms and improve the quality of life. The reduction in symptoms may take a few days and for this reason you should consider beginning treatment early.

**Possible Side Effects:** You may find that preventative eye drops sting your eyes a little. Some preventative treatments contain a small amount of corticosteroid. They do not generally cause side effects; however some patients report nasal irritation or even occasional nose bleeds. If this occurs, you may need to change to a different nasal spray. Stop using if you have nose bleeds

If you require corticosteroids long-term you should discuss this with your healthcare professional.



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## Leukotriene Receptor Antagonist

Another option available for children (2 years and older) and adults with mild to moderate asthma and seasonal allergic rhinitis is a leukotriene receptor antagonist (LRTA).

## Saline Nasal Rinse

Saline nasal rinse may reduce the symptoms of nasal allergies and can offer relief in conjunction with conventional treatment.

## Immunotherapy

Allergen immunotherapy is used where first line treatments such as antihistamines and allergen avoidance measures have been ineffective.

Immunotherapy involves giving repeated doses of the allergen over a long period of time in an effort to desensitise the patient to a particular allergen. At present this therapy may be offered to people with dust mite and/or grass/tree pollen allergies.

People undergoing immunotherapy should be adequately assessed and be under the care of a physician who is fully trained in the management of allergic disease.

## How do I know which treatments to take?

Here is a list of medicines that can be used on their own or in combination with each other, according to your level of response as reviewed by your healthcare professional:

- Oral antihistamine with or without an antihistamine nasal spray
- Antihistamine nasal spray on its own
- Nasal decongestant spray or drops
- Saline nasal rinse
- Eye-drops
- Leukotriene Receptor Antagonist tablets

If symptoms persist, the treatment will include those listed above and the following may be added:

- Corticosteroid nasal spray
- For severe persistent symptoms immunotherapy may be considered.

Other important factors are:

- Adherence with your medication
- Inhaler technique
- Allergen avoidance
- If you have seasonal allergic rhinitis early preventative treatment is the most effective.

**Talk to your health care professional about which treatments to take.**

## How to take your medications

**Always read the medication instruction leaflet and carefully follow the advice on how to administer your medication.**

Taking your medication correctly is important for successful treatment of allergic rhinitis; ask your GP, nurse or pharmacist to check your technique or visit [www.asthmasociety.ie](http://www.asthmasociety.ie) for video instruction on how to take nasal sprays, nasal drops and other medication.



# Coping with allergic rhinitis

## Coping with Allergic Rhinitis at Exam Time

If you are preparing to sit an exam it is important that you get your symptoms under control as early as possible. Uncontrolled allergic rhinitis can affect your ability to concentrate and can adversely affect school and exam performance.

Once your allergic rhinitis is under control you will find yourself sleeping better at night. You will feel much fresher during the day and will be better able to concentrate.

### Before Exam Time

- See your health care professional at least one month in advance of your exams to make sure you have the appropriate treatments.
- Speak to your GP, nurse or pharmacist about a treatment plan.
- Complete an Asthma Action Plan with your GP.

### At Exam Time

- Follow the tips for avoiding allergens, as listed throughout this book
- Make sure you bring your medication with you to your exam.
- Try to arrange exam seating away from open windows.
- Splash your eyes with cold water before your exam.
- Keep a supply of tissues and effective, quick-acting treatments, such as antihistamines close at hand just in case.
- Keep your reliever inhaler (generally blue) with you at all times.



## Exercising outdoors

- Speak to your GP, nurse or pharmacist about a treatment plan.
- Complete an Asthma Action Plan with your GP.
- Shower, wash your hair and change your clothes if you have been outdoors for an extended period.
- Splash your eyes with cold water regularly to help flush out pollen and help soothe and cool your eyes.
- Keep your reliever inhaler (usually blue) with you at all times
- Wear wraparound sunglasses to stop pollen getting into your eyes.
- Rub Vaseline/haymax/prevalin under your nose, it can help to stop pollen and spores from settling on the lining of your nose.

## Coping with Allergic Rhinitis on Holiday

The pollen season varies from country to country depending on the local climate and vegetation. It is possible to plan a holiday that will not be ruined by seasonal allergic rhinitis symptoms if you follow these tips:

- Take sufficient medication with you.
- Bring your Asthma Management Plan if you have one.
- Carry an Asthma Attack Card with you in case of emergency. Contact the Asthma Society to order your Asthma Attack Card or download it free from [www.asthmasociety.ie](http://www.asthmasociety.ie).
- Choose a holiday destination which has low pollen counts all year round. For example, there is generally less pollen in coastal areas where the breeze blows fresh air in from the sea. Also mountain regions and moor-land tends to contain fewer pollen-producing plants than other areas.

- Try to visit destinations outside of their peak pollen season. For example, grass pollen season in the Mediterranean 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 past its peak. Grass pollen is high in Florida between April and October and in the Caribbean it is a problem in June and July and from October to March.



Visit [www.polleninfo.org](http://www.polleninfo.org) for up to date pollen alerts for most European holiday destinations.



# Pollen Calendar

	March	April	May	June	July	August
Hazel						
Yew						
Elm						
Alder						
Willow						
Ash						
Poplar						
Birch						
Pine						
Plane						
Lime						
Grasses – Incl. Rye, Timothy & Cocksfoot						
Oil seed rape						
Dock						
Nettle						
Plantain						
Mugwort						

Peak period of pollen release

Pollen season

# Supporting us

I would like to donate...

My own amount

€10pm
  €15pm
  €21
  €250\*

\* If you are a taxpayer, a gift of €250 or more in one year could be worth an extra 45% (€112) to us — at no extra cost to you.

To make an instant donation, visit [asthma.ie/donate](http://asthma.ie/donate)

Title ..... First Name \* ..... Surname \* .....

Your Address .....

County \* ..... Eircode .....

Telephone \* ..... Email .....

I enclose a cheque/bank draft / postal order payable to Asthma Society of Ireland

OR Please debit my...  Visa  Mastercard  Visa Debit (please tick box)

Name on Card .....

Card Number

Expiry Date     Security Code

Signature ..... Date

OR You can also make direct payment from your bank or online. Make your payment to:

Asthma Society of Ireland IBAN: IE50 BOFI 9009 7319 9474 13 BIC/SWIFT: BOFIIIE2D

Please return your completed form to:

Asthma Society of Ireland, 42-43 Amiens Street, Dublin 1

We save money by being able to contact you by telephone or email, and we can keep you updated on how your generosity makes such a difference.

CONTACT ME BY  Email  Post  Telephone  SMS/WhatsApp

# SYMPTOMS OF AN ASTHMA ATTACK



Cough



Short breath



Wheeze



Tight Chest



Difficulty talking



Blue lips

or any combination of these

## 5 STEP RULE

### How to deal with an asthma attack

#### If someone has an asthma attack:

- Do not leave them on their own.
- Extra puffs of reliever inhaler (usually blue) are safe.



Scan this QR to watch our 5 STEP RULE video



## TRIGGERS

### THINGS THAT CAN SET ASTHMA OFF



Smoking



Animals



Exercise



Colds/Flu



Medicines



Feelings



Dust



Pollens, grass, trees



Cleaning products



Sprays



Mildew or mould



Foods & drinks



Air pollution



Hormones



Weather



Jobs

## Our services to you

Call the Asthma Society today to get a free copy of our other publications or download them for free at [www.asthmasociety.ie](http://www.asthmasociety.ie)

Take Control of Your **ASTHMA!**

MY **ASTHMA ACTION PLAN**

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Call our **FREE ADVICELINE** to arrange an asthma nurse appointment or message our nurse on **WHATSAPP** Mon-Fri 9am-5pm

## Worried about your Asthma?

Freephone the Asthma Adviceline or send a WhatsApp message to speak with an Asthma Nurse Specialist about your asthma.

ASTHMA ADVICELINE

**1800 44 54 64**

WHATSAPP MESSAGING SERVICE

**086 059 0132**



Phone the adviceline today for your free appointment.

Find out more about asthma, learn to self-manage your condition and improve your quality of life.

For most people, asthma is a very controllable disease when managed correctly. Asthma management will allow most people with asthma to live happier and healthier lives. However, if people with asthma do not manage their condition, they are at high risk of an asthma attack.

An estimated 20% of children in Ireland will experience asthma at some point in their childhood.

The key to asthma management is having and using an Asthma Action Plan. These plans, which are reviewed at every available opportunity with a healthcare professional, will detail asthma medicines, symptoms, triggers, how to know if you are having an asthma emergency and what to do in the event of one.

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