



THE PROFESSIONAL ASSISTANT LEARN & ADVISE



MODULE 37: MAY 2018

Hayfever

As summer approaches, soaring temperatures and longer days may be welcome for some, but for a quarter of the UK population, it spells misery for one reason: hayfever. As there is no cure, prevention is the name of the game and there are plenty of tips and advice that pharmacy teams can give to customers to help them manage their symptoms.



OBJECTIVES | After studying this module, assistants will:

- Recognise the symptoms of hayfever
- Be aware of when the hayfever season occurs and what types of pollen are prevalent when
- Know how customers can prevent symptoms of hayfever
- Understand how to respond to customers' different needs and advise them on the most suitable treatment choices and self care techniques.

The medical term for hayfever is **seasonal allergic rhinitis**. In other words, it's an allergic condition that varies in prevalence, depending on the time of year.

Hayfever develops when the body's immune system reacts to **pollen** as if it were something harmful, like an infection. Produced by plants, including grass, trees and weeds, pollen is harmless to most people, but for those with hayfever, contact with pollen triggers the body to release a type of antibody to attack the allergen (pollen). The immune system then releases chemicals, including histamine, to prevent the spread of what it thinks is an infection.

The symptoms and the severity of hayfever can vary widely from person to person and also depend on the type of pollen a person is allergic to. Common symptoms include:

- Sneezing
- Runny nose
- Nasal congestion
- Coughing
- Itchy eyes, ears, nose or mouth.

Less common symptoms include loss of smell, facial pain, headaches, earache, tiredness and fatigue.

Many sufferers are often confused about whether they have a cold or hayfever. One of the key differences to look out for is how long the symptoms last for. A cold will usually clear up within two weeks, but hayfever symptoms will persist for longer.

This module is suitable for all members of the pharmacy team who wish to increase their knowledge of common conditions and treatment options. This module has been endorsed with the NPA's Training Seal as suitable for use by pharmacy teams as part of their ongoing learning. This module can also form part of your Team Tuesday training.



Treatment options

Around 18 million people in the UK suffer from hayfever and that number is set to soar to 31.8 million by 2030. This rise is being linked to air pollution and the effects of climate change, as increases in environmental temperature can lead to more pollen-bearing plants.

Almost a third of hayfever sufferers report that their symptoms have become more severe in recent years, and more than one in 10 have now stopped going out altogether during peak pollen times.

The majority of hayfever sufferers seek symptom relief from pharmacies, with an average of 22 patients a week visiting pharmacies during a typical hayfever season, compared to 15.5 patients seeing their GP.

Some 85 per cent of sufferers admit that they haven't changed their treatment approach for three years or more, despite their symptoms becoming more severe. So there is certainly a need for pharmacy teams to engage with customers and advise them on the most suitable treatment options for their symptoms.



DID YOU KNOW?

Hayfever affects 10-15 per cent of children and 26 per cent of adults in the UK.

Antihistamines

Some customers will prefer to use one product to treat all of their hayfever symptoms. Antihistamine tablets and syrups work by blocking the action of histamine, which is one of the chemicals released when a susceptible person encounters pollen. These products tend to start working quickly and they relieve most allergy symptoms. They can be taken as and when sufferers notice symptoms or on a daily basis as a preventative treatment.

Oral antihistamines are separated into two groups:

1

Sedating antihistamines – the most common example is chlorphenamine (e.g. Piriton Allergy Tablets). One of its drawbacks is that it can cause drowsiness. Sedating antihistamines have a shorter duration of action and so need to be taken more frequently (e.g. every four to six hours). However, these products are often more affordable, which can make them more appealing to some customers. As they are sedating, care needs to be taken when recommending these antihistamines as they may not be suitable for all customers.

2

Non-sedating antihistamines – examples include acrivastine (e.g. Benadryl Allergy Relief), cetirizine (e.g. Benadryl Allergy One A Day, Benadryl Allergy Children's 1mg/ml Oral Solution, Piriteze Allergy Syrup, Pollenshield Hayfever, Zirtek Allergy) and loratadine (e.g. Clarityn Allergy). Drowsiness is not usually a problem with these products, and they tend to have a longer duration of action so don't need to be taken as frequently as sedating varieties.

Eye drops

Itchy, red and watery eyes are common symptoms of hayfever. A type of treatment called a mast cell stabiliser (e.g. sodium cromoglicate) can help to manage these symptoms.

The body's mast cells contain histamine and play a central role in many different allergies. As the name suggests, mast cell stabilisers work by stabilising mast cells, preventing them from releasing histamine and thus stopping allergic symptoms such as itchy, red and watery eyes from occurring. Some may cause side effects, such as a stinging or burning sensation in the eyes. Examples include Opticrom Allergy Eye Drops and Optrex Allergy Eye Drops.

Nasal sprays

In hayfever, one of the main symptoms is inflammation of the lining of the nose. There are various products that treat this symptom:

- 1 Corticosteroid nasal sprays** – examples include beclometasone dipropionate (e.g. Beconase Hayfever), fluticasone propionate (e.g. Pirinase Hayfever Relief), triamcinolone acetonide (e.g. Nasacort Allergy) and the newly-available budesonide (e.g. Benacort). These are often the first choice of treatment for people who experience regular allergy symptoms over a long period of time. They are effective against all allergy symptoms. For best results, the sufferer should start to use this medication a couple of weeks before the hayfever season starts. The spray should then be used on a daily basis.
- 2 Decongestant nasal sprays** – such as oxymetazoline and xylometazoline relieve nasal congestion by shrinking the swollen lining of the nose. They should only be used for short periods of time, otherwise symptoms can reappear when their use is stopped. Examples include Vicks Sinex Nasal Spray and Otrivine Nasal Spray.
- 3 Saline nasal sprays** – these are a drug-free way of relieving nasal congestion. Products containing natural sea water (e.g. Stérimar Hayfever & Allergies) work by washing away allergens and rebalancing nasal functions. Some have additional ingredients such as manganese, calcium and purified water (e.g. Stérimar Stop & Protect Allergy Response) to neutralise allergens in the nose and form a protective film to prevent allergens from irritating the lining of the nose.



? DID YOU KNOW?

Up to 57 per cent of adult patients and up to 88 per cent of children with hayfever have sleep problems.

Track it!

Pollen levels (known as the pollen count) vary with the time of year and weather. In general:

- Tree pollen (e.g. birch) is released during spring. However, trees such as hazel and yew may cause symptoms as early as February, while oak pollen may persist into June
- Grass pollen is released at the end of spring and the beginning of summer and affects around 90 per cent of hayfever sufferers
- Weed pollen, such as nettle, is released from early spring through to late autumn.

Added advice

The best way to deal with allergies is to identify the source and avoid it where possible. This is quite difficult with airborne pollen, but there are things that sufferers can do to limit their exposure:

- Keep windows and doors closed, particularly in the early evening when the pollen count is high
- Check the pollen count daily and stay indoors when it is high
- Avoid cutting the grass
- Wear wrap-around sunglasses
- Apply a nasal barrier gel or petroleum jelly to prevent pollen from entering the nose.

When to refer

You will need to refer some customers to the pharmacist for further advice. This includes customers who:

- Have not had hayfever before
- Are pregnant or breastfeeding
- Are taking other medication
- Also suffer from asthma
- Have unsuccessfully tried an OTC treatment or are suffering unwanted side effects
- Report wheezing, breathlessness or a feeling of tightness in their chest
- Report sinus pain, headache or a yellow/green nasal discharge.

⚡ Fast facts

- Around 18 million people in the UK suffer from hayfever, and incidence rates are on the rise
- There are around 30 types of pollen that can cause hayfever
- Hayfever is more common in boys than girls, but affects adult men and women equally
- The number of older people suffering from hayfever for the first time is rising
- Many people find their symptoms improve as they get older, with symptoms disappearing completely in around 10-20 per cent of people
- There is currently no cure for hayfever, but most people are able to relieve their symptoms, at least to a certain extent, with treatments and self care
- Without treatment, hayfever can lead to complications such as asthma, sinusitis and otitis media (middle ear infections), and have a serious impact on quality of life.



SIGNPOSTING

For more information, see:

- Your *Counter Intelligence Plus* training guide
- Allergy UK: allergyuk.org or call 01322 619898
- Action Against Allergy: actionagainstaallergy.org or call 020 8892 2711
- NHS Choices: nhs.uk/conditions/hay-fever
- WebMD – How to administer eye drops: webmd.com/eye-health/how-insert-eye-drops
- WebMD – How to administer nasal sprays: webmd.boots.com/cold-and-flu/cold-guide/nasal-sprays-cold-relief
- Met Office pollen forecast: metoffice.gov.uk/health/public/pollen-forecast.

TEST YOURSELF ONLINE

GOOD PRACTICE KNOWLEDGE IS IMPORTANT WHEN ADVISING CUSTOMERS



Questions

1) If left untreated, what further complications can hayfever lead to?

- a) Asthma
- b) Sinusitis
- c) Otitis media
- d) All of the above

2) Which of the following is **NOT** suitable advice to help someone limit their exposure to pollen?

- a) Avoid cutting the grass
- b) Apply a nasal barrier gel to the nose
- c) Avoid wearing sunglasses
- d) Remain inside if the pollen count is high

3) Which of the following is a benefit of non-sedating antihistamines?

- a) They have a longer duration of action
- b) They cause drowsiness
- c) They are often more affordable
- d) They have a shorter duration of action

4) Which of the following is **NOT** a common symptom of hayfever?

- a) Inflammation of the lining of the nose
- b) Itchy, red watery eyes
- c) Earache
- d) Sleep problems

5) Which type of pollen can cause hayfever symptoms as early as February?

- a) Yew and hazel pollen
- b) Grass pollen
- c) Weed pollen
- d) Oak or birch pollen

6) Which of the following is **TRUE** of corticosteroid nasal sprays?

- a) For best results, the sufferer should start to use this medication once the hayfever season starts
- b) They may cause rebound congestion if used for more than seven days
- c) They are a drug-free way of relieving nasal congestion
- d) They are effective against all allergy symptoms



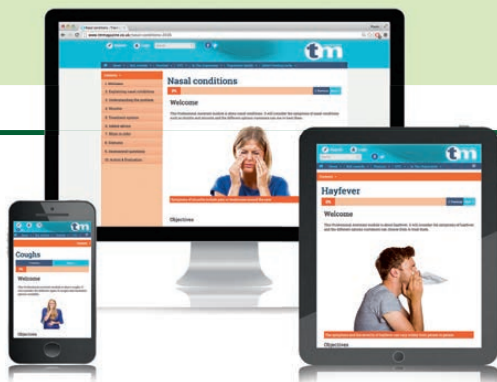
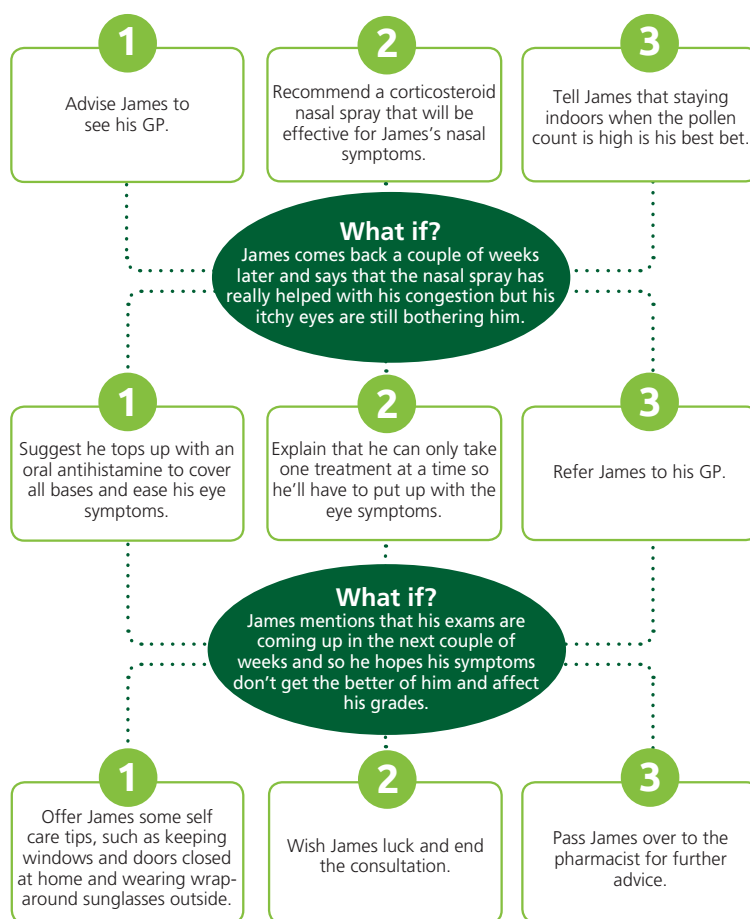
Scenario

James is 18 and has hayfever. His symptoms – itchy, watery eyes, a runny nose and nasal congestion, which is particularly troublesome – are usually mild and he's just put up with them, but this year he's worried his exam preparation will be affected so he wants to take something to help.



What would you recommend?

For each part of this scenario, think about the decision you would make and, importantly, why you would choose that option. In addition, for each decision that you make, think about how you would talk to the customer and provide the necessary advice, and discuss this with your team and pharmacist.



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