



The secret to an easier allergy season

Fighting back against tiny allergens before they strike can help you avoid or reduce symptoms.

The spring allergy season begins next month, and if you want to avoid symptoms, you must act now. "Pretreating allergies will lead to better control of symptoms, and maybe prevent symptoms from showing up," says Dr. Ahmad Sedaghat, an ear, nose, and throat specialist at Harvard-affiliated Massachusetts Eye and Ear Infirmary.

Automatic defenses

When spring allergens—typically pollen from oak, elm, birch, poplar, or maple trees, depending on where you live—float through the air and reach the nose, the body sometimes overreacts. Mast cells in the lining of the nose mistake the harmless tree particles for dangerous invaders, and summon help by releasing chemicals such



It's difficult to get allergy symptoms under control once they have begun. Start treatment early to help prevent symptoms or lessen their severity.

as histamine and tryptase, which then recruit more immune-system cells to the battle.

Those chemicals, however, also trigger watery eyes, a runny nose, sneezing, coughing, and a sore throat—a gooey mess known as hay fever (allergic rhinitis). "The impact of allergies goes beyond discomfort. Your sleep is worse, you're more tired in the morning, and your quality of life suffers," says Dr. Sedaghat.

Blocking your defenses

Instead of allowing the body to conduct an unnecessary fight against pollen, you can turn off your defense system with medications. But it's best to do so before those al-

lergens arrive. This is partly because some drugs, such as corticosteroid nasal sprays, take a few weeks to become fully effective.

It's also because the reaction to even a few allergens has a snowball effect. "Once the reaction starts, it's hard to stop," Dr. Sedaghat explains. "More inflammatory cells are recruited to the nose and sinuses, symptoms become more severe, and it's difficult to treat them." Instead, he suggests that it's better to block the reaction before it begins, which prevents symptoms or lessens their severity, and keeps irritation from progressing to sinusitis or an asthma flare-up.

The right medications

Only certain allergy medications should be used in advance. Topping the list is a corticosteroid nasal spray, such as mometasone fluoroate (Nasonex) or fluticasone propionate (Flonase). Many of these sprays are now available over the counter. "These nasal steroid sprays treat more symptoms of allergies than other drug classes, and they are more effective in reducing the severity of symptoms," says Dr. Sedaghat. "But it takes a month for cells to feel the full impact and to turn off inflammatory chemicals." Use the spray every day while allergy season lasts, starting a month in advance of when you expect to get allergy symptoms.

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Another medication that can be taken in advance of anticipated symptoms is an antihistamine, which counteracts the effects of histamine. "It's not as effective as nasal steroid sprays, but it can be very good at preventing symptoms," says Dr. Sedaghat.

But antihistamines can be risky for older adults. Some antihistamines, such as diphenhydramine (Benadryl), can cause drowsiness, leading to falls. Dr. Sedaghat suggests avoiding it.

Better options include the antihistamines fexofenadine (Allegra) or loratadine (Claritin), available over the counter. Those drugs are less likely to cause drowsiness.

Safer than oral antihistamines are

prescription antihistamine sprays, such as azelastine (Astelin) and olopatadine (Patanase), which may help prevent the symptoms of sneezing and a runny nose while minimizing drowsiness. Antihistamine eyedrops, such as ketotifen (Zaditor), available over the counter, and olopatadine (Patanol), available by prescription, can be used to prevent watery eyes.

Other medications

Decongestant pills, such as pseudoephedrine (Sudafed), help reduce nasal congestion, but they can cause problems for people with high blood pressure or heart problems and should not be used to manage allergies. Decongestant sprays such as oxymetazoline (Afrin) should not be used for more than a

few days, since long-term use can make congestion worse.

Another option is allergy shots to help reduce allergic symptoms, but that approach can take three to five years to be fully effective. This is usually a last resort for people who don't respond to medications and do not have asthma.

What you should do

Work with your doctor to develop a pretreatment strategy, including how far in advance you should use medications. That plan should also include drug-free ways to avoid allergens, such as keeping air conditioning and heating filters and vents clean, keeping windows closed, wearing a mask for outdoor yard work, and avoiding going outside when pollen levels are highest. ▶