

Standard Operating Procedure

Topical Nasal Corticosteroid Spray

Using a topical nasal corticosteroid spray is recognised as a first line treatment to control nasal congestion for both allergic and non-allergic rhinitis. This type of spray is often referred to simply as a steroid nasal spray.

Steroid nasal sprays are used for both persistent and seasonal rhinitis. Rhinitis caused by perennial allergens such as the house dust mite are more likely to cause persistent symptoms and require continuous long-term treatment especially when a patient has symptoms such as nasal blockage (1,2).

Systemic absorption of nasal corticosteroid sprays depend on the bioavailability of the drug. Long term use of corticosteroid nasal sprays are considered relatively safe, but it is advisable to use a spray with a low systemic bioavailability when patients require continuous treatment for extended periods (3).

The application of a steroid nasal spray is localised to the affected area. The spray works by reducing inflammation and associated symptoms of increased mucus production and possibly sneezing. It does not work immediately and can take up to two weeks before a patient perceives the benefit from using a steroid nasal spray. In seasonal allergic rhinitis (hayfever) treatment should begin two weeks before symptoms are expected to start (4, 5) therefore ensuring the efficacy of the spray by the time the trigger allergen is in the air.

It has been shown that nasal douching before the use of a steroid nasal spray will enhance efficacy and generally improve symptomatic control (2).

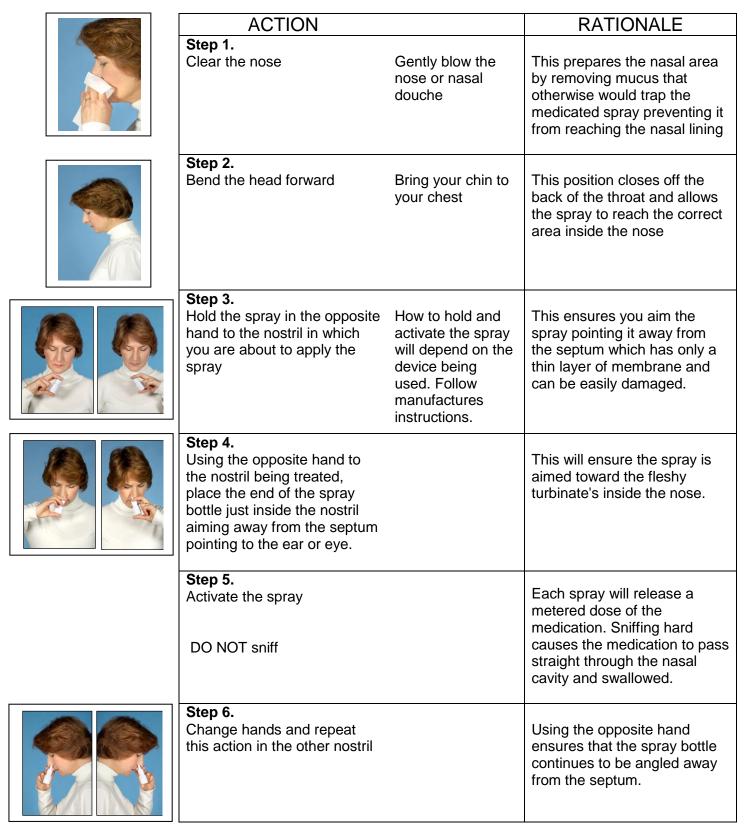
Nasal Corticosteroid Sprays			
Generic Name	Proprietary Name	Can be prescribed for	Bioavailability
Triamcinolone Acetonide	Nasocort	over 12 years two sprays each nostril od children 6-11 years one spray each nostril od Up to bd children 2-6 years	46%
		one spray each nostril od	
Beclometasone Dipropionate	Beconase	over 6 yrs two sprays each nostril bd	44%
Budesonide	Rhinocort Aqua	over 12 years two sprays each nostril bd	31%
Flunisolide	Syntaris	over 14 years two sprays each nostril bd children 5-14 years one spray each nostril bd Up to tds	20-30%
Fluticasone & Azelastine	Dymista	over 12 years one spray per nostril bd	1.86%
Mometasone Furoate	Nasonex	over 12 years two sprays each nostril od children 6-11 years one spray each nostril od Up to bd	0.46%
Fluticasone Propionate Fluticasone Furoate	Flixonase, Nasofan Avamys	over 12 years two sprays each nostril od children 4-11 years one spray each nostril od Avamys - from 6 years	0.42%



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How to apply a nasal spray

- Always ensure hands are clean before applying a nasal spray
- Always ensure the spray device is working and primed
- Shake the bottle before use
- A spray can be applied either in the morning, or evening, or both





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References:

1. ARIA, Allergic Rhinitis and its Impact on Asthma (2007). Full Text documents and resources: //httpwww.whiar.org

2. BSACI guidelines for the management of allergic and non-allergic rhinitis <u>http://www.bsaci.org/</u> guidelines <u>Clin.Exp.Allergy</u>. 2008; Vol 38, 19-42

3. Salib RJ & Howarth PH, 2003 Safety and Tolerability profiles of Intranasal Antihistamine and Intranasal Corticosteroids in the Treatment of Allergic Rhinitis <u>Drug Safety 2003</u>, 26 (12) p863-893

4. Scadding GK & Church MK, 2001 Rhinitis, Chapter 4 <u>Allergy</u> second edition Holgate ST, Church MK, Licgtenstein LM, Mosby, London

5. van Cauwenberge P, Bachert C, Passalacqua G, et al.2000 Consensus statement on the treatment of allergic rhinitis. European Academy of Allergology and Clinical Immunology. Allergy 2000; 55:116-134.