



**BNSSG Allergic Rhinitis Pathway for Adults**

**Full patient history and nasal examination**  
Allergen/ irritant avoidance advice

**Mild and Intermittent (Seasonal)**  
No troublesome symptoms  
Completes normal daily activities

**Moderate-Severe (Perennial)**  
Troublesome symptoms  
Impaired daily activities  
Abnormal sleep/ sleep disturbance

**Oral antihistamines**  
1<sup>st</sup> line: OTC Loratadine/ cetirizine  
2nd line: Fexofenadine  
Also see [BNSSG Self-Care guidance for prescribers](#)

Advise patients to re-consult after 8 weeks if symptoms remain inadequately controlled & continue anti-histamines if symptomatic benefit

Continue anti-histamines if symptomatic benefit

**Topical corticosteroid therapy**  
1<sup>st</sup> line: Mometasone 50mcg nasal spray\* (also available OTC), Beclometasone 50mcg nasal spray (also available OTC)  
2nd line: Budesonide 64mcg nasal spray\* (also available OTC), Fluticasone furoate nasal spray (not available OTC)  
*\*Also licensed for nasal polyps. If nasal polyps are present, use an intranasal corticosteroid which is specifically licensed for this indication. NB a short course of oral prednisolone 30mg once daily for 7 days may be needed initially to shrink large polyps.*

Advise patients to re-consult after 8 weeks if symptoms remain inadequately controlled

**Consider if symptoms persist**  
Fluticasone Propionate 137mcg/50mcg / Azelastine (Dymista®) and discontinue oral antihistamine.  
Other considerations:  
Consider a nasal antimuscarinic such as ipratropium (Rinaspray® nasal spray 0.03%) for use in elderly where presbyrhinitis may be present.  
If asthmatic, a leukotriene antagonist such as oral montelukast may be helpful.  
If nasal blockage, an intranasal decongestant (xylometazoline 0.1% nasal drops) for a maximum of 7 days only could be trialled. Prolonged use (7 days+) can lead to rhinitis medicamentosa/ rebound congestion.

Up to date referral criteria, red flag information and self-care advice is available on the [Rhinosinusitis & Nasal Polyps](#) BNSSG Remedy Page.

Further information on the management of allergic rhinitis has been compiled by the Immunology team: 'Immunology and Allergy Referral Guidelines' available on the [Immunology & Allergy Guidelines](#) BNSSG Remedy page.

[BNSSG Formulary](#)

For seasonal allergic rhinitis, see [BNSSG Self-Care guidance for prescribers](#)