Breeze Through Spring without Sneezing and Wheezing

Presented by:

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Most people look forward to spring anticipating sunshine, colorful blooming flowers and trees, and the return to outdoor activities. However, allergy sufferers dread this time of year with the expectation of sneezing, sniffling, itchy, watery eyes, and wheezing. These are the typical symptoms of seasonal hay fever and asthma which often spoil the pleasures of spring-time for people with pollen allergies. Understanding what causes the symptoms of hay fever and how to control them can mean the difference between being cheerful or miserable during the spring season.

Seasonal allergies are caused by pollens which are microscopic particles released in the air by certain trees, grasses, and weeds during their pollination season. Pollens by themselves are harmless but they are mistaken to be harmful by the immune system of allergy sufferers. When these pollens enter our airways and trigger an allergic reaction, they lead to the typical hay fever or asthma symptoms depending on individual tendency and allergic sensitivity.

Generally pollens are invisible to the naked eyes although during peak allergy season they may form a hazy cloud in the woods. Wind can carry these pollens miles away from their origin, although their concentration falls with distance. Pollen levels are higher in the morning and on clear and windy days, but decrease significantly after a rain. It is important to note that most flowering plants do not cause allergies because their pollens are too large to become airborne, and they are carried by insects from plant to plant for cross-pollination.

Most trees pollinate in the spring, grasses in the summer, and weeds in the fall season. For this reason, spring is tree allergy season, summer is associated with grass allergies, and weed allergies lead to symptoms in the fall. Pollen counts as reported by the media can aid in reducing pollen exposure. However, day to day variations in individual symptoms may not correspond well with pollen counts that day. This is because many of the allergic symptoms represent the cumulative effect of many factors, and some of the allergic reactions lead to delayed symptoms.

Most individuals with allergies are allergic to numerous allergens or the biological agents responsible for allergies. Allergic reactions from multiple allergens have an additive effect such that the reaction is stronger if someone is exposed to two instead of one allergen at the same time. Further, allergy symptoms are felt only after a certain intensity of allergic reaction is reached. Therefore it is quite common for

individuals to be allergic to indoor as well as outdoor allergens, but have symptoms only during particular seasons. This is because the intensity of their allergic reaction during the rest of the year is not strong enough to have observable symptoms, but when the indoor allergic reaction is piled up with the seasonal component, the intensity crosses the threshold necessary to produce symptoms.

How do we control seasonal allergies?

As with any form of inhalant allergy, seasonal allergies can be controlled using a three-pronged approach. The first prong is environmental control, the second is medications, and the third is allergy immunotherapy – or allergy shots. Controlling the indoor environment to reduce pollen exposure can be achieved by keeping the windows in the house closed, and using effective air filtration devices with the air-conditioning system to keep the indoor air free of pollens. If a central air conditioning unit is too expensive, then at least a window air-conditioning unit equipped with air filters for the bedroom is highly desirable. The reason to focus on the bedroom is that most individuals spend at least one third of their lives in the bedroom, and keeping the bedroom air clear of allergens keeps the baseline level of allergic reaction low. Because allergic reactions are cumulative, when seasonal allergy sufferers are outdoors for an hour or two they can tolerate the exposure to pollens much better if their baseline is low. For the same reason, it is very important for seasonal allergy sufferers to also focus on all their indoor allergic sensitivities, and control those exposures as well. For example, if an individual is allergic to dust mites or pets in addition to pollens, it is important to limit the exposure to these indoor allergens as well, even though the individual may not be suffering from allergic symptoms from these indoor allergens.

In most cases environmental control measures by themselves are insufficient to control symptoms. Medications are a good adjunct for controlling allergy symptoms. Newer antihistamines such as loratadine are effective in controlling sneezing, itching, and watery drainage from the eyes and nose resulting from hay fever. There are also antihistamine nasal sprays and eye drops available to control nose and eye symptoms, respectively. At night-time, use of the older antihistamines such as diphenhydramine is also a good option because although they cause drowsiness, they are as effective as the newer antihistamines in controlling allergy symptoms. All antihistamines work better if they are used prior to the allergic exposure. For seasonal allergies, it is best to take them approximately thirty minutes before going outdoors. Nasal steroid sprays are also quite effective in controlling most hay fever symptoms, and they are better than antihistamines in controlling nasal congestion and associated symptoms such as snoring. If the individual has asthma symptoms, such as wheezing, coughing or shortness of breath, associated with seasonal allergies, use of inhalers and other asthma medications is also required.

Some allergy sufferers continue to have symptoms in spite of environmental control measures and medications. Others choose not to be dependent on medications long term. These individuals are good candidates for allergy immunotherapy or shots if they do not have other serious medical conditions such as heart disease. In

immunotherapy, the allergy sufferers receive injections of small quantities of allergen extracts under their skin so that they develop long-term tolerance to those allergens. Overall, allergy immunotherapy is effective in more than 80% of allergy sufferers in reducing their allergy sensitivities, their symptoms, and their need for allergy medications. Immunotherapy is also cost effective because it costs less than prescription allergy medications, and is covered by most medical insurance plans. For these reasons, allergy immunotherapy is a very good option for many seasonal allergy sufferers. In summary, using the three pronged approach described above, most allergy sufferers can live normal fulfilling lives even during the allergy season.

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Tips on Avoiding Pollen Exposure

- Keep windows of the home closed during the pollen season, and only allow filtered air to enter the home.
- Change disposable air-filters and clean permanent electrostatic filters regularly as recommended by the filter manufacturer.
- Use a HEPA filter in your bedroom to keep your bedroom free of pollens.
- Thoroughly wipe or bathe your outdoor pets before they enter your home, because they are usually covered with pollens.
- Wear a pollen mask while doing yard work.
- Take a shower after outdoor activities to remove pollens from your skin and hair.
- Use a nasal irrigation system to cleanse your nasal passages from pollens.
- Change your clothes when you return from outdoor activities to remove pollens stuck on your clothing.
- Keep the windows of your car closed and re-circulate the inside air when driving during pollen season.
- Minimize outdoor activity during morning time and on windy days. Right after a rain is a good time for outdoor activities for individuals with pollen allergy.