NATIONAL CLINICAL GUIDELINE FOR THE TREATMENT OF HAY FEVER (ALLERGIC RHINOCONJUNCTIVITIS)

Quick guide

Treatment with nasal steroid, antihistamines and leukotriene receptor antagonists	
$\uparrow \uparrow$	Use nasal steroid rather than oral antihistamine for the treatment of patients with persistent allergic rhinitis. $(\oplus \oplus \oplus \bigcirc)$
\uparrow	Consider giving eye drops with antihistamine rather than oral antihistamine for the treatment of eye symptoms in patients with allergic rhinoconjunctivitis. $(\oplus \bigcirc \bigcirc \bigcirc \bigcirc)$
↑	Consider giving oral non-sedating antihistamines rather than leukotriene receptor antagonists for the treatment of patients with allergic rhinoconjunctivitis. $(\oplus \oplus \bigcirc \bigcirc)$

Treatment with systemic glucocorticoid		
\downarrow	Intramuscular glucocorticoid should only be used for the treatment of patients with allergic rhinocon- junctivitis triggered by pollen upon due consideration when combination treatment with antihistami- ne and nasal steroid does not result in sufficient symptom relief, since there is no evidence that the effect is better than that obtained by combination treatment with antihistamine and nasal steroid and because of the potential adverse effects. $(\oplus \bigcirc \bigcirc \bigcirc \bigcirc)$	
↑	Consider giving glucocorticoid orally rather than intramuscularly for the treatment of patients with severe allergic rhinoconjunctivitis in case treatment with systemic glucocorticoid is required. ($\oplus \bigcirc \bigcirc \bigcirc$)	

Immunotherapy		
\uparrow	Consider giving allergen-specific immunotherapy to patients with allergic rhinoconjunctivitis triggered by grass when treatment with nasal steroid and antihistamine does not result in sufficient symptom relief. $(\oplus \oplus \oplus \bigcirc)$	
1	Consider giving allergen-specific immunotherapy to patients with allergic rhinoconjunctivitis triggered by house dust mites when treatment with nasal steroid and antihistamine does not result in sufficient symptom relief . ($\oplus \bigcirc \bigcirc \bigcirc$)	
\downarrow	Allergen-specific immunotherapy should only be used for the prevention of asthma in children with allergic rhinoconjunctivitis triggered by grass or birch upon due consideration, since the preventive effect is uncertain and treatment with immunotherapy is extensive with potential adverse reactions. $(\oplus \oplus \bigcirc \bigcirc)$	

Reduction in the level of house dust mites at home	
↑	Consider carrying out measures to reduce the level of house dust mites, as this may have a beneficial effect on the symptoms. $(\oplus \bigcirc \bigcirc \bigcirc \bigcirc)$



About the quick guide

This quick guide contains the key recommendations from the national clinical guideline for the treatment of hay fever (allergic rhinoconjunctivitis). The guideline was prepared by the Danish Health Authority (DHA).

The national clinical guideline focuses on patients with allergic rhinoconjunctivitis (i.e. hay fever) – patients with nose and/or eye symptoms.

Thus, the guideline contains recommendations for selected parts of the field only and therefore must be seen alongside other guidelines, process descriptions etc. within this field.

The recommendations are preceded by the following indications of their strength:

- $\uparrow\uparrow$ = a strong recommendation for
- $\downarrow \downarrow$ = a strong recommendation for
- \uparrow = a weak/conditional recommendation for
- \downarrow = a weak/conditional recommendation against

The symbol ($\sqrt{}$) stands for good practice. This symbol is used in case of lack of evidence, when the working group wants to emphasise particular aspects of the established clinical practice.

The recommendations are followed by the symbols mentioned below which indicate the strength of the underlying evidence – from high to very low:

 $(\bigoplus \bigoplus \bigoplus) = high$ $(\bigoplus \bigoplus \bigcirc) = moderate$ $(\bigoplus \bigoplus \bigcirc) = low$ $(\bigoplus \bigcirc \bigcirc) = very low$

In case of lack of evidence, a recommendation is not followed by a symbol. This applies to the good practice recommendations.

Further information at sundhedsstyrelsen.dk

At sundhedsstyrelsen.dk, a full-length version of the national clinical guideline is available, including a detailed review of the underlying evidence for the recommendations.

About the national clinical guidelines

The national clinical guideline is one of the approximately 50 national clinical guidelines to be prepared by the DHA during the period 2013-2016.

Further information about the choice of subjects, method and process is available at sundhedsstyrelsen.dk.