



Διαχείριση του παιδιού με αλλεργική ρινίτιδα

**Τσακίροπούλου Ευαγγελία**

Ωτορινολαρυγγολόγος, MSc, PhD

# International Study of Asthma and Allergies in Childhood (ISAAC) (1999-2004)

Aot K, Pearce N, Anderson HR, Ellwood P, Montefort S, Shah J: Global map of the prevalence of symptoms of rhinoconjunctivitis in children: The International Study of Asthma and Allergies in Childhood ISAAC Phase Three. Allergy 2009;64:123-148.

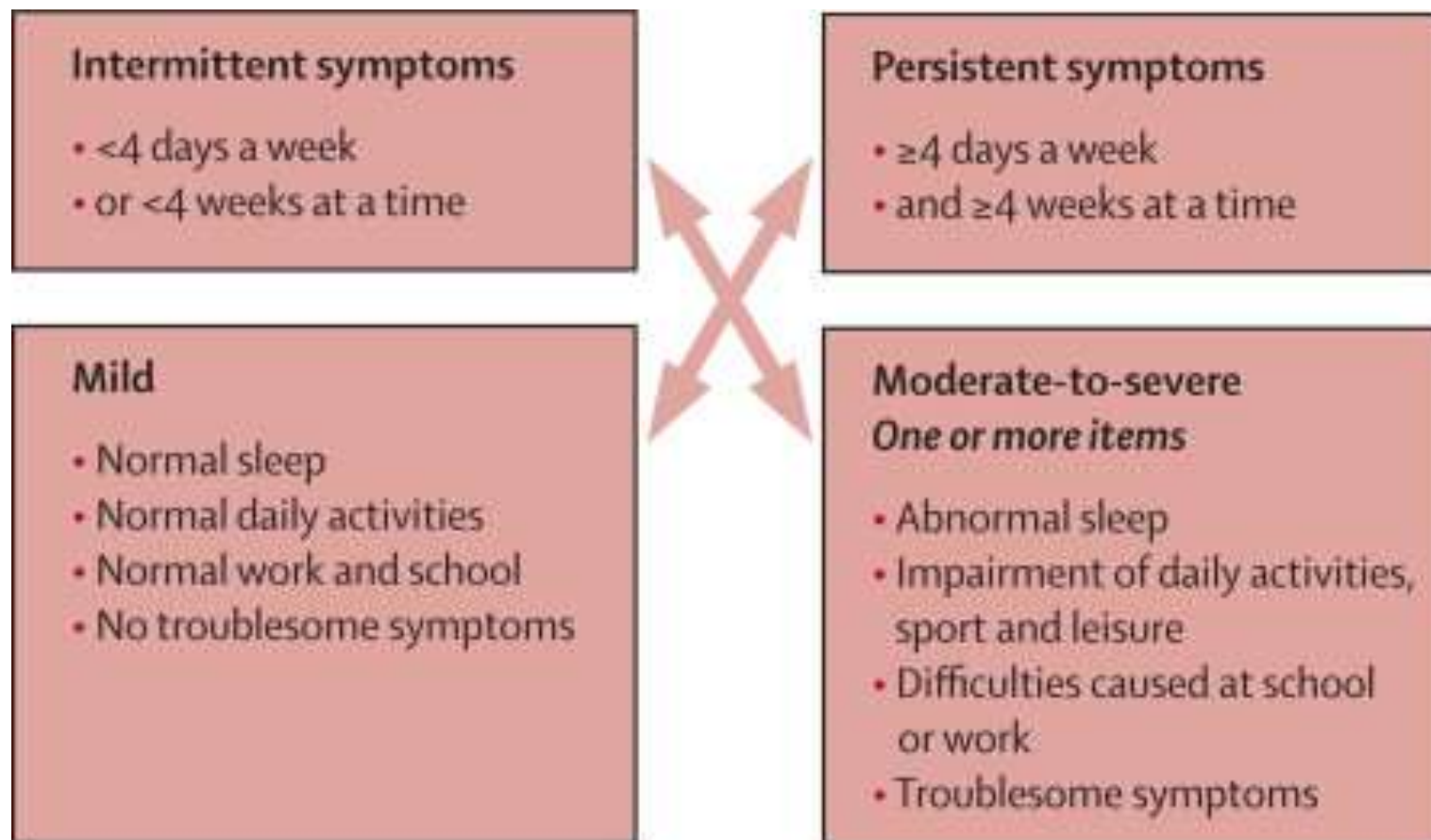
ηλικία (έτη)	επιπολασμός
6-7	8.5% (1.8-20.4%)
13-14	14.6% (1.4-33.3%)

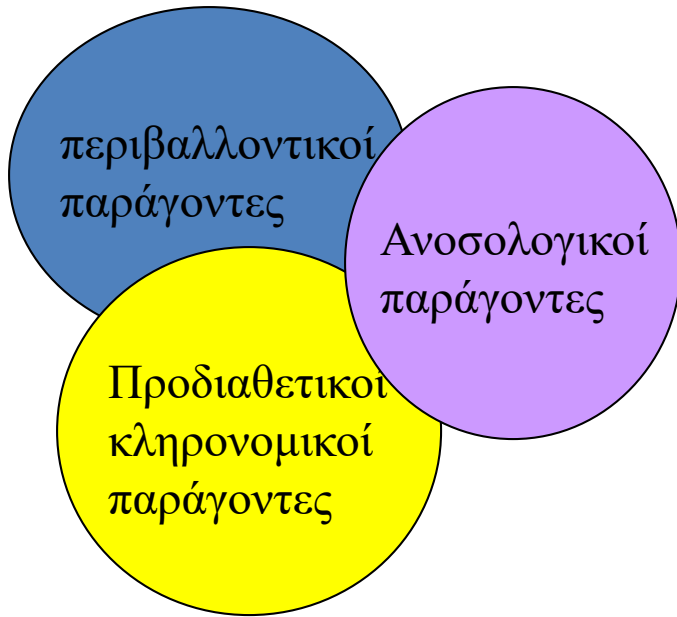
*“In the past 12 months, have you (has your child) had a problem with sneezing or a runny or blocked nose, when you (he or she) DID NOT have a cold or “the flu”?”*

# Validation of the modified allergic rhinitis and its impact on asthma (ARIA) severity classification in allergic rhinitis children: the PEDRIAL study

J. Montoro<sup>1</sup>, A. Del Cuvillo<sup>2</sup>, J. Mollo<sup>3,4,5</sup>, X. Molina<sup>6</sup>, J. Bartra<sup>7</sup>, I. Dávila<sup>8</sup>, M. Ferrer<sup>9</sup>, I. Jáuregui<sup>10</sup>, J. Sastre<sup>4,11</sup> & A. Valero<sup>4,5,7</sup>

*Allergy* 2012; 67: 1437–1442.

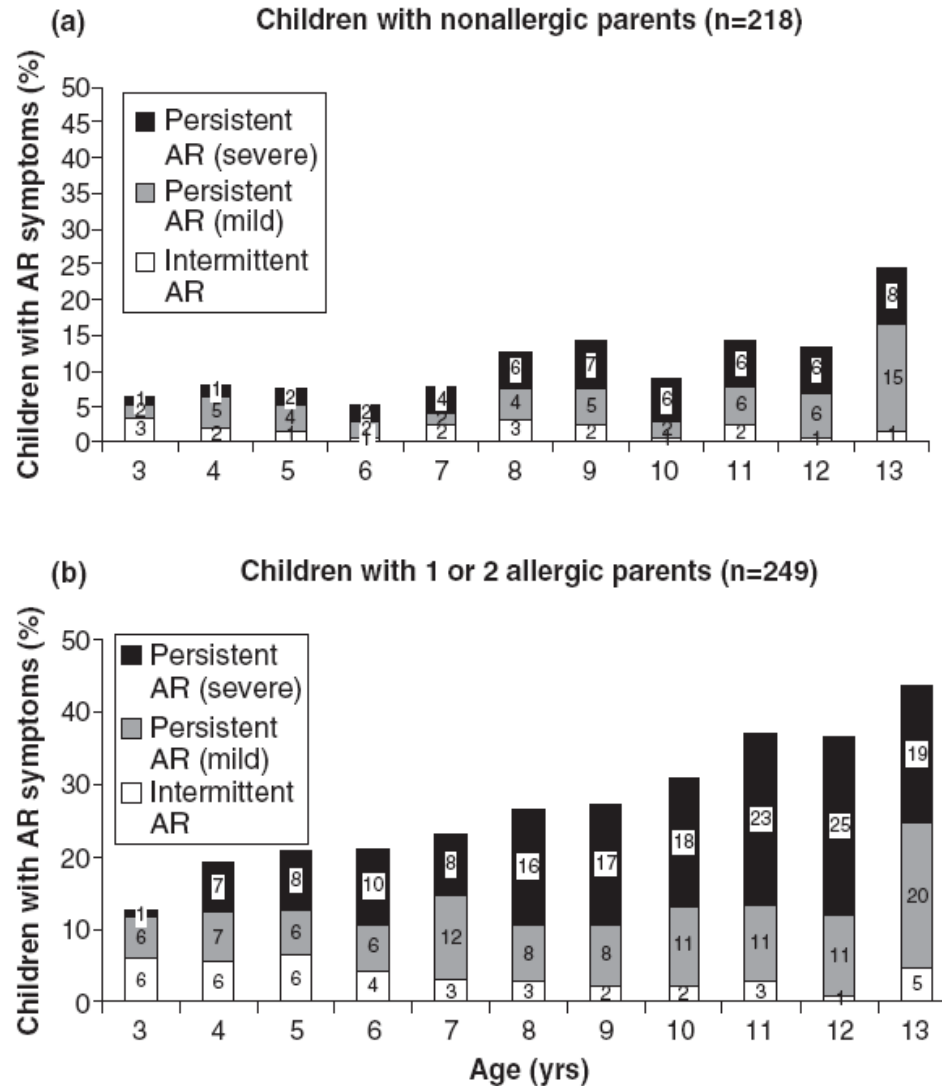




Family history of atopy

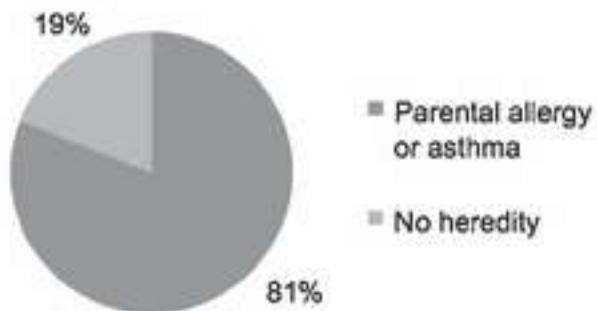
- Male gender
- Birth during pollen season
- Firstborn
- Early introduction of formula or food
- Early use of antibiotics
- Maternal smoking exposure (in the first year of life)
- Exposure to indoor allergens
- Serum IgE > 100 IU/mL before age 6
- Presence of allergen specific IgE

## The natural history of allergic rhinitis in childhood

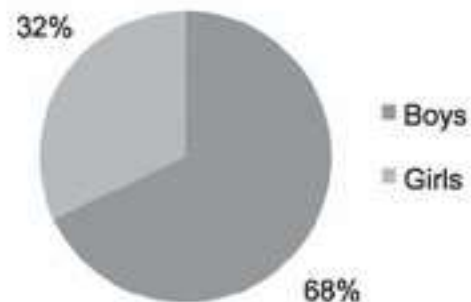


# Παράγοντες κινδύνου

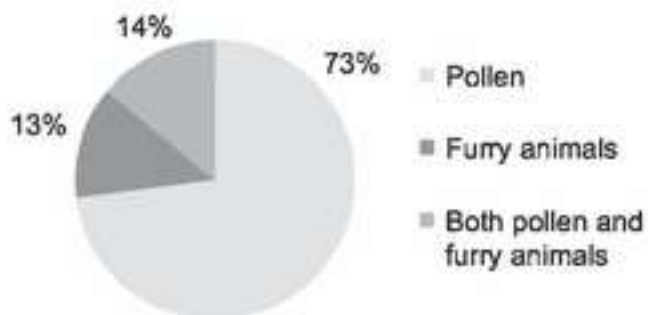
## Heredity



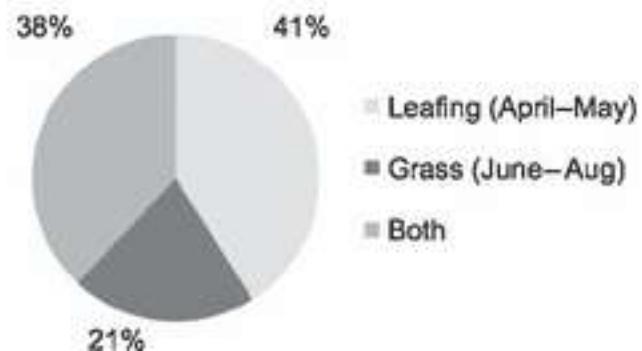
## Gender

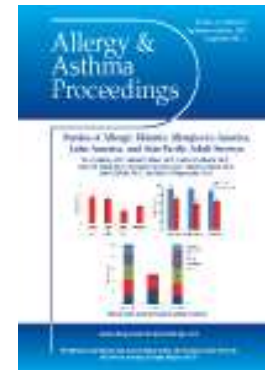


## Trigger factors



## Pollen trigger factors



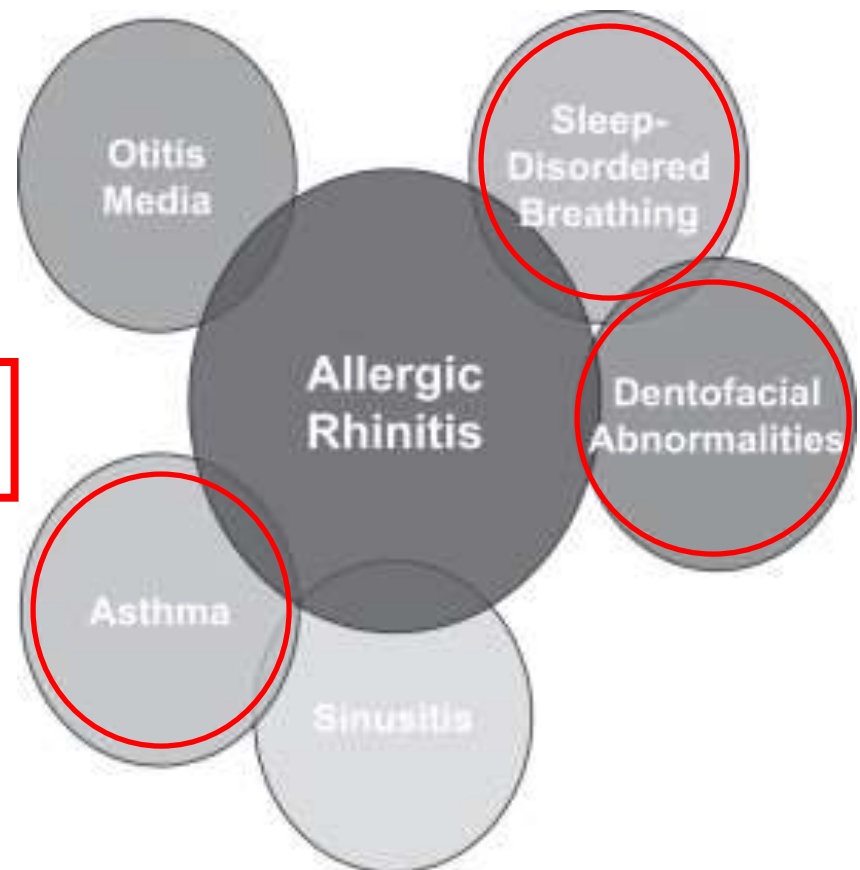


Διαταραχές ύπνου

Πτώση στη σχολική επίδοση

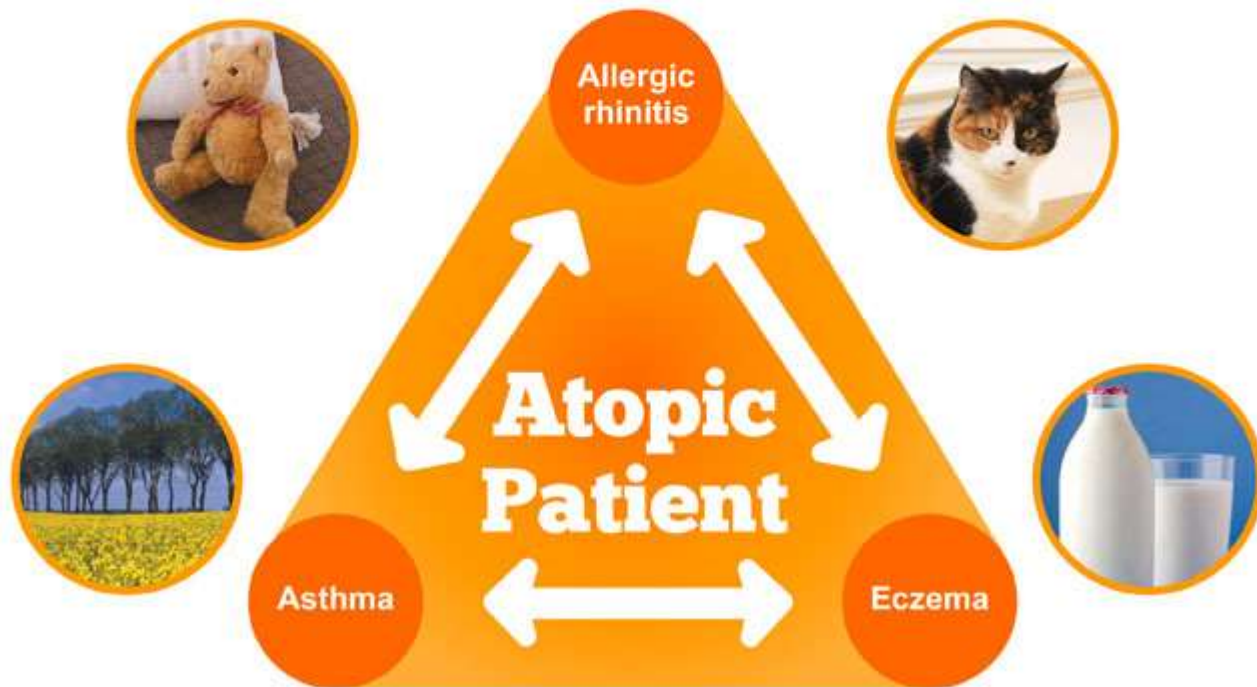
Υπερκινητικότητα

Ανάγκη για διαχείριση-υποστήριξη της νόσου, του παιδιού, της οικογένειας



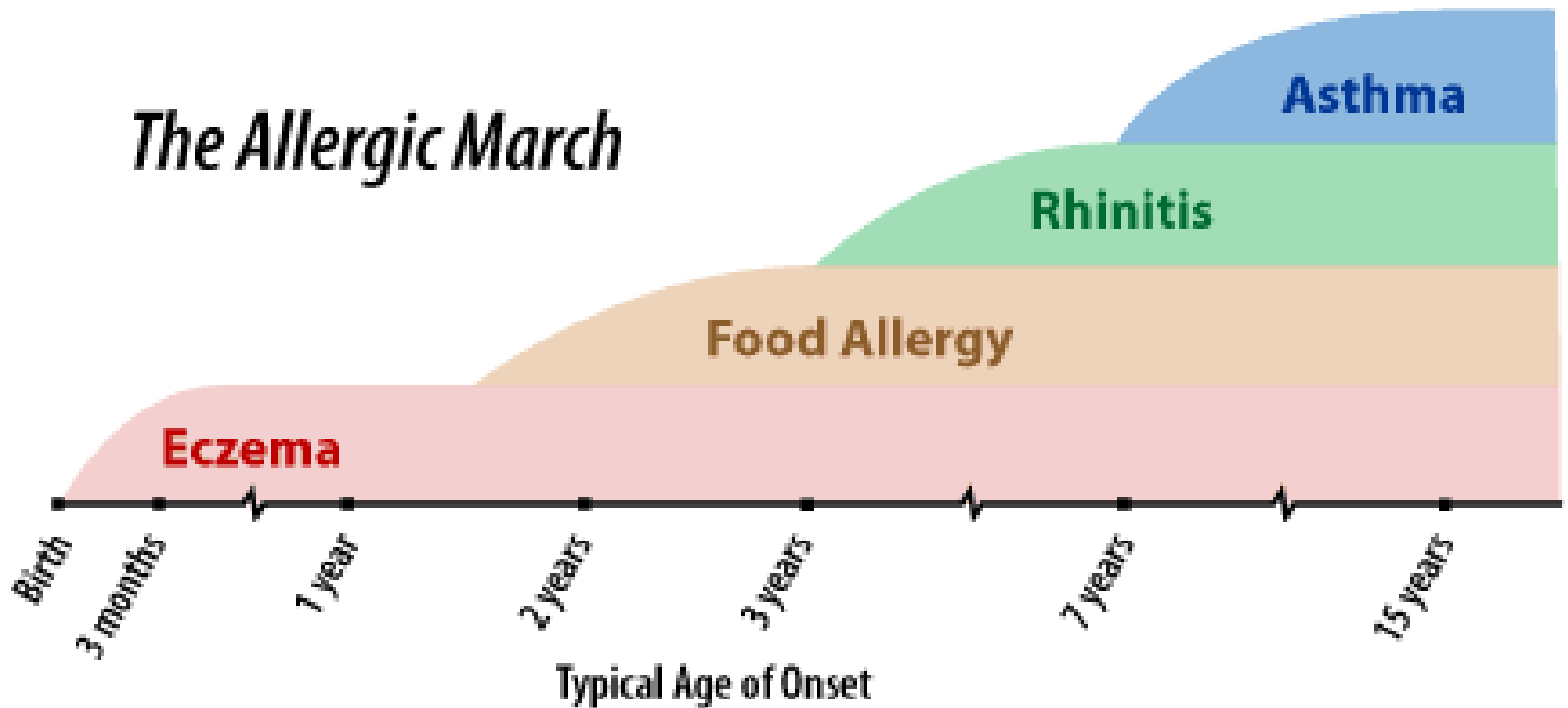
# The Allergic Triangle

People who have one atopic condition are more likely to develop another atopic condition and the trigger factors for each may be the same.





# *The Allergic March*



## **Allergic airway diseases in childhood – marching from epidemiology to novel concepts of prevention**

Laura Hatzler<sup>1</sup>, Stephanie Hofmaier<sup>1</sup> & Nikolaos G. Papadopoulos<sup>2</sup>

Hygiene hypothesis /μειωμένη έκθεση σε μικροβιακούς παράγοντες

Μόλυνση αέρα

Παθητικό κάπνισμα

Ενδοοικιακά αλλεργιογόνα/ επιθήλια ζώων

Διατροφή

# Διαγνωστικές μέθοδοι

Ιστορικό (τύπος ,διάρκεια, συχνότητα συμπτωμάτων, εκλυτικοί παράγοντες)

Πρόσθια ρινοσκόπηση

SPT

Ολική / ειδικές IgE

τεστ σακχαρίνης

Ενδοσκόπηση

Ακουστική ρινομετρία

CT



POSITION PAPER

## Practical guide to skin prick tests in allergy to aeroallergens

Allergy 67 (2012) 18–24

Βρεφική ηλικία

Αντιβράχιο / ράχη

**Table 4** Global Allergy and Asthma European Network-suggested panel of allergens to be tested in all patients in Europe

Pollen

Birch (*Betula verucosa*) or mixed Betulaceae

Cypress (*Cupressus sempervirens*) or other cypress pollen species

Grass: one species or mixed grass pollens

Mugwort (*Artemisia vulgaris*)

Olive (*Olea europaea*) or ash (*Fraxinus exelsior*)

*Parietaria officinalis*

Plane (*Platanus occidentalis*)

Ragweed (*Ambrosia eliator*)

Mites

*Dermatophagoides pteronyssinus*

*Dermatophagoides farinae*

Animals

Cat (*Felix domesticus*)

Dog (*Canis familiaris*)

Moulds

*Alternaria alternata*

*Cladosporium album*

Insects

Cockroach (*Blatella* sp.)

Πως ορίζεται η ρινίτιδα;

Φλεγμονή του ρινικού επιθηλίου που χαρακτηρίζεται από την

Παρουσία τουλάχιστον δύο συμπτωμάτων →

ρινόρροια  
ρινική απόφραξη  
παρμός  
κνησμός

# Διαφορική Διάγνωση ρινίτιδας

## Diagnosis

Adenoidal hypertrophy

Septal deviation, choana atresia or stenosis

Foreign body

Rhinosinusitis

Cystic fibrosis

Primary ciliary dyskinesia

Encephalocele

CSF leakage

Coagulopathy

## Suggestive features

Mouth breathing, discoloured nasal secretions, snoring in the absence of other feature of allergic rhinitis

Obstruction in the absence of other feature of allergic rhinitis

Unilateral discoloured nasal secretions

Discoloured nasal secretions, headache, facial pain, poor smell, halitosis, cough

Bilateral nasal polyps, poor smell, chest symptoms, symptoms of malabsorption, failure to thrive

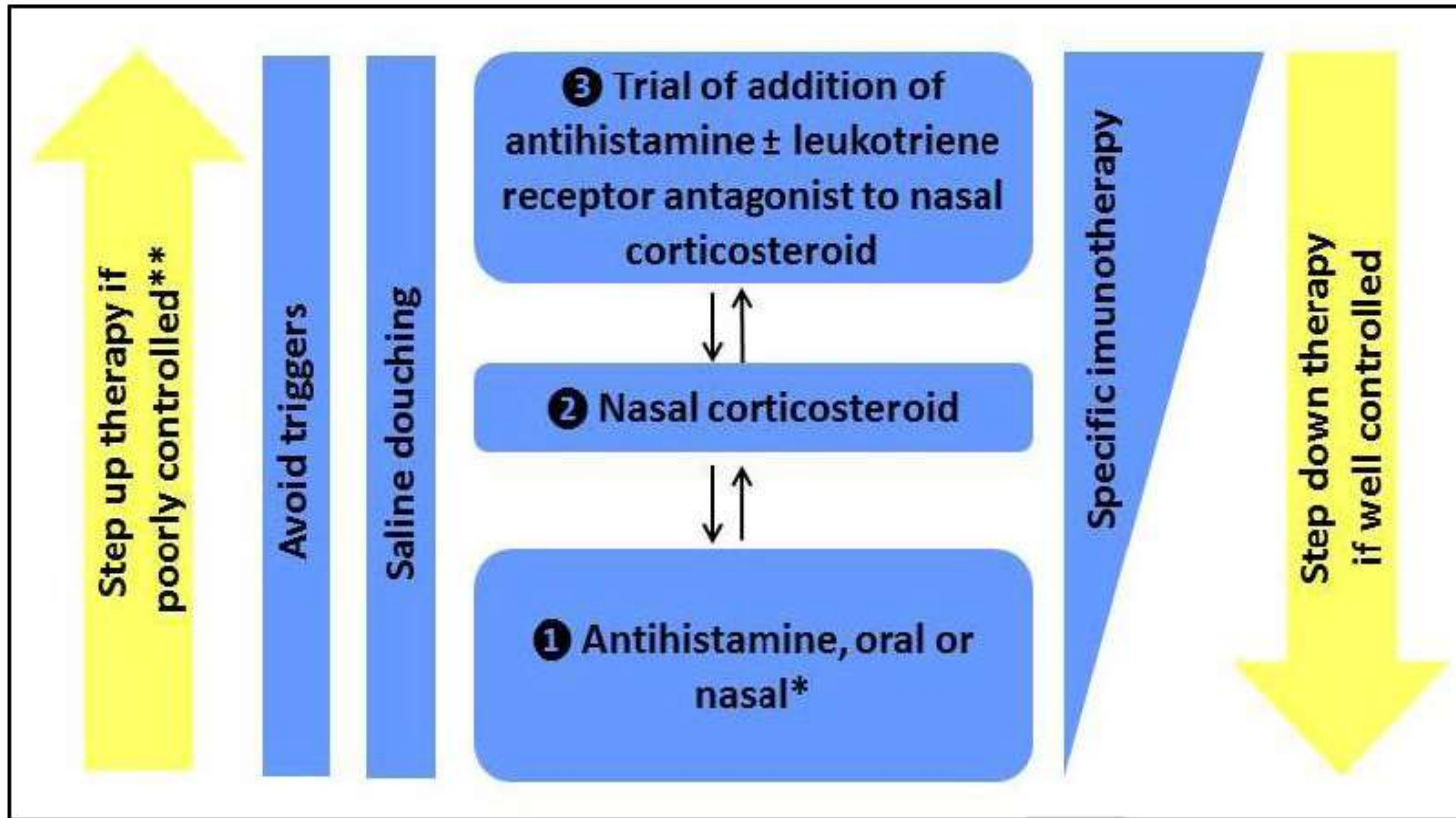
Persisting mucopurulent discharge without rest between "colds", bilateral stasis of mucus and secretions at the nasal floor, symptoms from birth

Unilateral nasal "polyp"

Colourless nasal discharge often with a history of trauma

Recurrent epistaxis with minimal trauma

# Θεραπευτικό σχήμα



❶, ❷ and ❸ are potential entry points into therapeutic approach depending on the severity of the rhinitis symptoms.

# Ενδορινικά στεροειδή

Ages/doses	
Fluticasone propionate (50 µg/spray)	>4 y: 1-2 sprays each nostril QD
Fluticasone furoate (27.5 µg/spray)	>2 y: 1-2 sprays each nostril QD
Mometasone (50 µg/spray)	2-12 y: 1 spray each nostril QD >12 y: 2 sprays each nostril QD
Beclomethasone (Qnasal) (80 µg/spray)	>12 y: 2 sprays each nostril QD
Beclomethasone (Beconase) (42 µg/spray)	>6 y: 1-2 spray each nostril BID (max 4 sprays each nostril BID)
Ciclesonide (Zetonna) (37 µg/spray)	>12 y: 1 spray each nostril QD
Ciclesonide (Omnaris) (50 µg/spray)	>6 y: 2 sprays each nostril QD (seasonal allergic rhinitis) >12 y: 2 sprays each nostril QD (perennial allergic rhinitis)
Budesonide (32 µg/spray)	6-12 y: 1-2 spray each nostril QD >12 y: 1-4 sprays each nostril QD
Flunisolide (25/29 µg/spray)	6-14 y: 2 spray each nostril BID >14 y: 2 spray each nostril BID/TID (max 8 sprays each nostril QD)
Azelastine/fluticasone (137 µg/50 µg/spray)	>12 y: 1 spray each nostril BID

> 2 ετών



# Αντιισταμινικά

	Formulation	OTC/prescription	Ages/doses
Loratadine	Oral	OTC	2-6 y: 5 mg QD >6 y: 10 mg QD
Desloratadine	Oral	Prescription	6-11 mo: 1 mg QD 1-5 y: 1.25 mg QD 6-11 y: 2.5 mg QD >12 y: 5 mg QD
Cetirizine	Oral	OTC	6 mo-12 mo: 2.5 mg QD 12 mo-2 y: 2.5 mg QD/BID or 5 mg QD 2-5 y: 2.5-5 mg QD >6 y: 5-10 mg QD
Levocetirizine	Oral	Prescription	6 mo-5 y: 1.25 mg QPM 6-11 y: 2.5 mg QPM >12 y: 2.5-5 mg QPM
Fexofenadine	Oral	OTC	2-11 y: 30 mg BID >12 y: 60 mg BID or 180 mg QD
Olopatadine (665 µg/spray)	Inhaled	Prescription	6-11 y: 1 spray each nostril BID >12 y: 2 sprays each nostril BID
Azelastine (137 µg/spray)	Inhaled	Prescription	5-11 y: 1 spray each nostril BID >12 y: 1-2 sprays each nostril BID
Azelastine/fluticasone (137 µg/50 µg/spray)	Inhaled	Prescription	>12 y: 1 spray each nostril BID