Environmental Allergies

What are the Symptoms of Environmental Allergies?

- Runny nose, sneezing, nasal stuffiness, nose rubbing, sniffling, snorting
- Throat clearing
- Complaints of itchiness in the ears, nose, eyes and the back of the throat
- Itchy, watery, sometimes red eyes; frequent rubbing of the eyes
- Cough-usually worse in the morning, at night and when outside
- "Allergic shiners" which is a physical finding of the child's eyes looking very dark and puffy underneath on both sides-it may appear as if the child looks tired
- Fatigue or lack of energy
- ** Sometimes environmental allergies may also trigger wheezing, especially if the child has a history of wheezing in the past and/or the diagnosis of asthma

What can be done to Alleviate Environmental Allergies?

- 1. Natural Remedies: several exist on the market, but we have yet to find anything that works well AND we are unsure of the safety due to poor regulation and minimal testing in children. Local honey does not work. It does not make sense biologically, any local pollen present in honey would be degraded by stomach acid. Sorry guys, we have not found anything "natural" that helps.
- 2. <u>Limit Exposure to Allergens (</u>As per the "Allergy and Asthma Network")
 - During pollen season, close your windows and run the air conditioner at home and in your car
 - Pollen can come inside on you and your clothing. Change your children's clothes when
 they get home, wash hands well and rinse the face with water. Bathing may be
 necessary after a large exposure but remember to use minimal soap to reduce the
 chance of causing eczema (please see our "Skin Care Handout" for more instructions).
 - Try to limit exposure (tricky because, at the same time we want kids to be able to go
 outside and play without limitation). Airborne pollen tends to be highest early in the
 day, just after the dew dries, and on into early afternoon. High pollen levels can even
 sometimes last until late afternoon. They can be most potent when conditions are
 warm, dry and breezy, and after a thunderstorm or rainfall.
 - Use air conditioning or dehumidifiers to reduce the humidity to between 30 and 50 percent. Low humidity inhibits the reproduction and survival of dust mites.
 - Use high-efficiency particulate air (HEPA) filters in your ductwork and a vacuum with a HEPA bag or filter will effectively keep the dust down and trap allergens.
 - Use bedding encasements to lower dust mite allergen. Wash all bed linens, including sheets, pillowcases, blankets, and bed covers, in hot water weekly. Cold washing will not kill dust mites. Dry on high heat.
 - Minimize dust by replacing carpets with wood, tile, linoleum, or vinyl floors (of course when possible).
 - Wash stuffed toys and dolls in hot water. Keep them out of the bedroom if possible. Dust mites will die in the dryer or freezer, but only a hot wash will remove the particles that inflame airways.
 - Wash curtains in hot water frequently and steam clean upholstery if possible.

3. Medication:

Zyrtec (generic is Cetirizine) - This is our first line of treatment, which is over the counter. It provides symptomatic relief for 24 hours and USUALLY does not cause drowsiness. It can be given in the morning or nighttime, but if you feel it makes your child drowsy, then give it before bed. We do not recommend Zyrtec-D for children or breastfeeding mothers (this can limit your milk supply, but other Zyrtec products are safe for breastfeeding). We always recommend getting dye free options when available and over the counter generics are fine.

Dosing (even though it may not say this on the packaging):

• 6 months-2 years: 2.5 mg/day

• 2-6 years: 5 mg per day

• 6 years +: 10 mg/day

Zyrtec Products:

• Zyrtec 10 mg Tablets: 6 years + one per day

- Zyrtec 10 mg Liquid Gels: 6 years + one per day
- Zyrtec 10 mg Chewables: 6 years + one per day
- Zyrtec Children's Syrup (5 mg/5mL): 6 months-2 years: 2.5 mL/day (1/2 teaspoon); 2-6 years: 5 mL per day (1 teaspoon); 6 years +: 10 mL/day (2 teaspoons)
- Zyrtec Children's Dissolve Tabs 10 mg each: 6 years + one per day
- Zyrtec Children's Chewables 10 mg each: 6 years + one per day
- Zyrtec Children's Chewables 2.5 mg each: 6 months-2 years: 1 chewable per day; 2-6 years: 2 chewables per day

Allegra (generic Fexofenadine) - is our second line is which is also over the counter. It is second line only because it is twice a day dosing for kids less than the age of 12 years old rather than once per day. Allegra USUALLY does not cause drowsiness. We do not recommend Allegra-D for children or breastfeeding mothers (can also limit your milk supply, but other Allegra products are safe for breastfeeding). We always recommend getting dye free options when available and over the counter generics are fine.

Dosing:

- 6 months-2 years: 15 mg twice per day
- 2-12 years: 30 mg twice per day
- 12 years +: 180 mg daily or 60 mg tablets twice a day

Allegra Products:

- Allegra 24 hour 180 mg Tablets (Allegra Hives Tablets are exactly the same-all marketing): 12 years + one per day
- Allegra 12 hour 60 mg Tablets: 12 years + two per day
- Allegra 24 hour 180 mg Gelcaps: 12 years + one per day
- Allegra Children's 12 hour Liquid (30mg/5mL): 6 months-2 years: 2.5 mL twice daily (1/2 teaspoon); 2-12 years: 5 mL twice daily (1 teaspoon); 12 years +: 10 mL twice daily (2 teaspoons)
- Allegra Children's Allergy 12 hour Dissolve Tabs (30 mg each): 6-12 years of age: 1 tab twice per day on an empty stomach; 12 years +: 2 tablets twice per day on an empty stomach

Xyzal Products (generic Levocetirizine dihydrochloride) - are another over the counter option. Some kids who become drowsy with Zyrtec do seem to experience less drowsiness with Xyzal, so it is another

option. One disadvantage is that it is not recommended for children under 2 years of age. We always recommend getting dye free options when available, and over the counter generics are fine. Like Zyrtec it is once per day dosing.

Dosing:

2-5 years of age: 1.25 mg daily
6-11 years of age: 2.5 mg daily
12 years of age +: 5 mg daily

Xyzal Products:

- Xyzal 24 hour 5 mg tablets: 6-11 years of age: 1/2 tablet daily; 12 years of age +: 1 tablet daily
- Xyzal Children's 24 hour liquid (2.5 mg/5 mL): 2-5 years of age: 2.5 mL daily (1/2 teaspoon); 6-11 years of age: 5 mL daily (1 teaspoon); 12 years
- +: 10 mL daily (2 teaspoons)

Flonase (All formulations are over the counter) - If additional symptomatic relief is needed, we also recommend Flonase; 1 spray in each nostril once per day. The dose between the children and adult versions are exactly the same-the children's version simply contains less sprays per bottle. The regular version (fluticasone propionate) is approved for ages 4 and above and the Sensimist (fluticasone furoate) version is approved for children 2 and above. The Sensimist version was made to be more gentle and is alcohol and scent-free. There are good videos on their website (www.flonase.com) which show you how to properly administer the medication and how to clean it properly.

By combining one of the oral meds above and Flonase, our goal is to avoid needing allergy eye drops for eye symptom relief - kids typically dislike eye drops being administered. But if your child needs additional relief, we recommend Zaditor (over the counter) 1 drop to both eyes twice daily for children over the age of 3 years. Another option is Pataday (over the counter) 1 drop to both eyes once per day is approved for children age 2 and older.

We get that it feels excessive to give medication to your child every day, but the oral medications and Flonase tend to work better when given daily during the peak of the allergen season that is affecting your child. All of these medications have proven safe in the age groups defined.

**We do not recommend Claritin (loratadine) simply because it does not work well. We don't recommend Benadryl except in acute allergic processes because it only has effect for 6 hours and causes a lot of drowsiness (Dosing is available on our "Medication Dosing Handout).

Sometimes it is necessary to see an allergist and we are happy to give you excellent recommendations in the community, but keep in mind that children have to be off all allergy medications for several weeks prior to their appointments, so best to schedule "off season".