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Allergic rhinitis

The BEACH program (Bettering the Evaluation and Care of Health) shows that allergic rhinitis was managed six times per 1000 encounters between October 2002 to September 2007. This suggests that general practitioners manage allergic rhinitis about 619 000 times nationally each year.

Figure 1. Age specific rate of allergic rhinitis

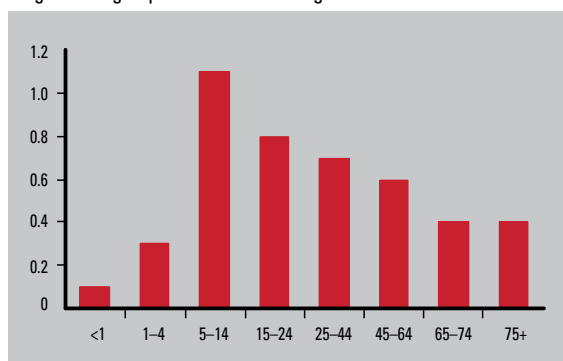


Table 1. Medications prescribed for allergic rhinitis

Medication	Number	Rate per 100 AR problems (n=2965)	% of prescribed medications for AR
Budesonide topical nasal	597	20.1	31.0
Mometasone nasal	538	18.1	28.0
Loratadine	120	4.0	6.2
Beclomethasone nasal spray	83	2.8	4.3
Cetirizine	76	2.6	4.0
Allergen treatment injection	56	1.9	2.9

■ The management rate of allergic rhinitis (AR) did not differ between the genders. *Figure 1* shows that the management rate peaked among patients aged 15–24 years, then steadily declined.

Common comorbidities managed more frequently with AR compared with all BEACH encounters in 2006–2007 were asthma (6 per 100 encounters; usually 2.3 per 100) and sinusitis (2.7 per 100 encounters; usually 1.4 per 100). Conjunctivitis was managed at a slightly higher rate of 1 per 100 encounters, compared with all encounters (0.7 per 100).

There were 2965 encounters at which AR was managed during the 5 year period. Medications were prescribed (64.9%), advised for over-the-counter purchase (34%), or supplied by the GP (8.7%) at a rate of 107.6 per 100 AR problems. The top six prescribed medications are listed in *Table 1*.

Advice/education and counselling were not frequently given, at 5.5 per 100 AR problems. Local injections, mainly desensitisation injections, were given at a rate of 5.3 per 100 AR problems.

Referrals were most often to allergists and ear, nose and throat (ENT) surgeons (2.2 and 1.7 per 100 AR problems respectively). A radio-allergosorbent test (RAST) was the most common test ordered (1.8 per 100 AR problems), and other immunology, mainly immunoglobulin tests, were ordered at 1.4 per 100 AR problems.

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