



Allergic Rhinitis Medications

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The nasal allergic response is a complex process involving the interaction of many mediators. The current therapeutic strategy is mainly based on drugs (antihistamines, nasal corticosteroids, etc.) and allergen immunotherapy. The most effective medication in persistent rhinitis is topical corticosteroid, which decreases all symptoms [1]. Antihistamines reduce nasal itch, sneeze and rhinorrhea [2]. Cysteinyl Leukotrienes (CysLTs) play an important role in allergic rhinitis because CysLT₁ receptor antagonists relieve the symptoms of allergic rhinitis [3]. CysLT₁ receptor antagonists provide a new opportunity for simultaneous management of allergic diseases of the upper and lower respiratory tract. The combination therapy is more effective and acts more rapidly than either drug used alone. Ramatroban, a thromboxane A₂ receptor antagonist with clinical efficacy in allergic rhinitis, was shown to also antagonize the prostaglandin D₂ receptor CRTH2 [4,5]. In addition to other inflammatory mediators, PAF have a relevant participation in allergic inflammation [6]. Rupatadine is a dual inhibitor of histamine H₁ and PAF receptors, which has been shown to be an effective and generally well-tolerated treatment for allergic rhinitis and chronic urticaria. These medications for allergic rhinitis offer numerous options that are effective, and readily available to target specific nasal symptoms.

References

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