

Fluticasone propionate and azelastine nasal spray for allergic rhinitis

NHS Devon

Commissioning policy

Fluticasone propionate and azelastine nasal spray is routinely commissioned for the management of moderate to severe symptoms of allergic rhinitis where allergy specialists (adult immunology services, or specialists in paediatric allergy management) have optimised treatment with standard combination therapies.

The Formulary Interface Group should include this in locally defined treatment recommendations.

Rationale for the decision

Allergic rhinitis is an allergic response triggered by allergens like pollen or dust, causing symptoms such as sneezing, nasal congestion, and itchy eyes. It affects 23-30% of the population and can impact quality of life, school/work performance, and sleep. Standard treatment involves antihistamines and nasal corticosteroids. Immunotherapy may be used in uncontrolled cases.

Evidence from clinical trials demonstrates that the use of fluticasone propionate and azelastine nasal spray results in superior outcomes compared with monotherapy using either intranasal corticosteroids or antihistamines. No evidence is available which compares fluticasone propionate and azelastine nasal spray to combined therapy using both an intranasal corticosteroid and a nasal/oral antihistamine. However, fluticasone propionate and azelastine nasal spray is recommended as a treatment option for allergic rhinitis in a range of national and professional guidelines. Devon specialists have also indicated that the use of a single spray would result in better concordance to treatment (resulting in improved outcomes) compared with the use of two intranasal separate products.

The acquisition cost of fluticasone propionate and azelastine nasal spray is higher than an antihistamine and an intranasal corticosteroid, however it may prevent some patients requiring more costly treatment with immunotherapy.

Guidance notes on exceptionality

Not applicable.

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