

Antihistamines

By J. Allen Meadows, MD

French scientists first developed antihistamines in the late 1930's, as a cure for nasal allergy sufferers. Like many "cures" we hear about today, antihistamines did not bring a complete end to the problems of patients with allergies. These medications counter the effects of histamine, the most important irritating chemical released within your body, when an allergic reaction takes place. Although histamines are the primary chemicals responsible for causing allergic symptoms, antihistamines don't give complete relief because other chemicals are also involved in allergic reactions. Antihistamines have been taken safely by millions of people in the last 65 years. Antihistamines do not cure, but temporarily help relieve allergy symptoms.

USE IN NASAL ALLERGY AND HIVES

Short-acting antihistamines can be taken every 4-6 hours, while timed-release antihistamines are taken every 12-24 hours. The short-acting antihistamines are most helpful taken 30 minutes before an anticipated allergic problem (picnic during ragweed season). Timed-release antihistamines are better suited to chronic (long-term) use for those who need daily medications, such as to control hives. Antihistamines must be used on a daily basis to prevent hives when prescribed for chronic urticaria. Currently, antihistamines are used to treat nasal allergies primarily as rescue medications, although some physicians may prescribe them routinely. Antihistamines are also available as nasal sprays that may be used on a rescue or preventive basis. Antihistamines are sometimes used in combination with decongestants to help relieve nasal symptoms immediately.

USE IN ASTHMA

In general, patients with asthma are at no increased risk to use antihistamines. In fact, research studies have shown antihistamines to be moderately effective in reducing the symptoms of asthma. There was a fear in the 1960's of using antihistamines in patients with asthma that has been disproven, although warnings still remain on the labels of many older antihistamines still in use today. The primary concern for patients with asthma is that antihistamines may increase the side effects of asthma medications, such as the tremor seen with albuterol.

USE IN PREGNANCY

There will never be enough studies to determine absolute safety of antihistamines in pregnancy by FDA standards. A panel of physicians working with the National Institute of Health has recommended chlorpheniramine (Chlor-Trimeton®) as the antihistamine of choice to use in pregnancy. Your allergist will consult with your obstetrician about the safest treatment for your symptoms. It is generally best to avoid oral medications and use topical treatments, such as nose spray and nasal washes with saline.

SIDE EFFECTS OF ANTIHISTAMINES

The most common side effect is sedation or drowsiness. For this reason, it is important that you do not drive a car or work with dangerous machinery the first time you take a new antihistamine, even if you do not feel sedated. You should take the antihistamine for the first time at home, several hours before bedtime. When you are sure that the medicine will not cause sedation, you then can take it any time as prescribed during the day. In persons who experience drowsiness, the sedation effect usually lessens over time, but may still cause significant impairment in school and job functioning even if the patient is not aware of sedation. Alcohol and tranquilizers increase the sedating side effects of antihistamines. Doxepin is a very potent antihistamine formerly used for depression, and is now an important drug in the treatment of hives. Doxepin causes particularly severe sedation, and patients may be unable to work for several days when it is first started. Some newer antihistamines, such as Zyrtec®, Claritin®, & Astelin®, have been shown to be less sedating than traditional antihistamines. One of the newer antihistamines, Allegra, does not cause drowsiness. Some studies show that Allegra & Claritin may be less effective than traditional antihistamines. Another frequently encountered side effect is excessive dryness of the mouth, nose, and eyes. Urinary hesitancy may occur in patients with an enlarged prostate.

Less common side effects include restlessness, nervousness, over-excitability, insomnia, dizziness, headaches, euphoria, fainting, visual disturbances, increased or decreased appetite, nausea, vomiting, abdominal distress, constipation, diarrhea, increased or decreased urination, high or low blood pressure, nightmares (especially in children), sore throat, chest tightness or palpitations. Consult your allergist should these occur.

IMPORTANT PRECAUTIONS:

- Avoid antihistamines if you have glaucoma, enlarged prostate, or urinary difficulties.
- Never take anyone else's medication and keep out of the reach of children.
- Do not use more than one antihistamine at a time, unless prescribed.
- Know the effect of the medication on you before working with heavy machinery or driving, and that antihistamines may cause impaired school and job performance even if you don't feel sedated.