Topical nasal decongestants: use up to 10 days may not cause rhinitis medicamentosa

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THE PROBLEM: The common cold affects almost every human being at least once per year. Nasal congestion is one of the most common symptoms of this condition and relief is sought from oral or topical decongestants. I was taught not to use topical decongestants for more than three days due to concerns about rebound rhinitis known as Rhinitis Medicamentosa, but have had patients who have used topical decongestants for years with no such problem. Most of the literature about rhinitis medicamentosa comes from ENT clinics where patients have been using topical decongestants for many years. This Cochrane Corner includes the Cochrane review on nasal decongestants for the common cold (now removed from the library, but available from Bruce Arroll via email) and a randomised controlled trial by Eccles (2008). More recently is the concern regarding illicit use of oral pseudoephedrine as a source of methamphetamine. Of medical concern may be the risk of increasing blood pressure and one oral decongestant phenylpropanolamine is no longer used. One case control study compared the use of cold preparations containing phenylpropanolamine in 702 people with a history of haemorrhagic stroke versus 1376 control people with no history of stroke. The study found a non-significant trend towards increased haemorrhagic stroke with phenylpropanolamine (RR 1.50, 95% CI 0.85 to 2.65).

CLINICAL BOTTOM LINE. The Cochrane review recommended that topical nasal decongestants seem to have an effect at least after the first dose. The paper by Eccles found a similar benefit which persisted up to 10 days with three times daily use. The Cochrane review recommended not using topical decongestants long-term and also cautioned about using it in children as rhinitis medicamentosa has been reported after a single dose in children. The Eccles paper found no such problem in adults with three times daily use for 10 days.

Topical nasal decongestants for the common cold

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<th>Success</th>
<th>Evidence</th>
<th>Harms</th>
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<td>Topical decongestants for nasal obstruction due to the common cold</td>
<td>NNT of about 10 for improvement in symptoms</td>
<td>Cochrane review&lt;sup&gt;1&lt;/sup&gt; RCT&lt;sup&gt;2&lt;/sup&gt;</td>
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NNT = numbers needed to treat

References
1. Taverner D, Latte GJ. Nasal decongestants for the common cold. Cochrane Database of Systematic Reviews 2007, Issue 1. Art. No: CD001953. DOI: 10.1002/14651858.CD001953.pub3.9 (now withdrawn but copy available from b.arroll@auckland.ac.nz)

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