Saline irrigation: a cheap and effective treatment for allergic rhinitis

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COCHRANE REVIEW: Head K, Snidvongs K, Glew S, Scadding G, Schilder AGM, Philpott C, Hopkins C. Saline irrigation for allergic rhinitis. Cochrane Database of Systematic Reviews 2018, Issue 6. Art. No. CD012597. doi:10.1002/14651858.CD012597.pub2.

THE PROBLEM: Allergic rhinitis is estimated to affect 17–20% of the general population.¹ It is characterised by nasal congestion, nasal itching and sneezing and is often associated with particular seasons.¹ Saline irrigation is thought to remove some of the allergens that contribute to allergic rhinitis as well as improve the function of the nasal cavity by removing mucus and therefore improving ciliary beat function.²

CLINICAL BOTTOM LINE: This Cochrane review showed that people who suffer from allergic rhinitis benefitted from using saline irrigation both in the short and long-term.³ No adverse effects were reportedly associated with the use of saline irrigation but it is unclear how competently the studies carried out this assessment.³ There was no evidence to suggest that saline irrigation was less effective than nasal corticosteroids or antihistamines but this may have been due to a lack of available evidence.³

Outcome measured	Success	Evidence	Harms
Disease severity at 4 weeks	Overall low quality evidence showed using nasal saline irrigation comparative to no irrigation would reduce disease severity by 1.97 points (1.21 to 2.74) on a 10 point VAS	This was based on 6 studies including 322 children and 85 adults.	e to saline irrigation were identified.
	Overall very low quality evidence showed no statistical difference between saline irrigation and intranasal corticosteroids	This was based on one study of 14 children.	
	Overall very low quality evidence was unable to show that adding saline irrigation as an adjunct treatment to antihistamines or intranasal steroids was beneficial	This was based on 2 studies including 18 children and 14 adults.	
Disease severity score at 4 weeks to 6 months	Overall low quality evidence showed using nasal saline irrigation comparative to no irrigation would reduce disease severity by 2.98 points (0.99 to 5.98) on a 10 point VAS for nasal symptoms over the longer term	This was based on 5 studies including 102 children and 65 adults.	
	Overall very low quality evidence showed no statistical difference between saline irrigation and intranasal corticosteroids	This was based on 3 studies including 14 children and 83 adults.	
	Overall very low quality evidence was unable to show that adding saline irrigation as an adjunct treatment to antihistamines or intranasal steroids was beneficial in the longer term	This was based on 2 studies including 18 children and 40 adults.	

References

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