**azelastine** (a-zel-as-teen)

**Indications**
Seasonal allergic rhinitis (Astelin and Astepro). Perennial allergic rhinitis (Astepro only). Management of vasomotor rhinitis (Astelin only).

**Action**
Locally antagonizes the effects of histamine at H-receptor sites; does not bind to or inactivate histamine.

**Therapeutic Effects:**
Decreased sneezing, nasal rhinitis, pruritus and post-nasal drip.

**Pharmacokinetics**

**Absorption:** 40% absorbed after intranasal administration.

**Distribution:** 14.5 L/kg.

**Metabolism and Excretion:** Most of absorbed azelastine is metabolized by the liver (converted to an active metabolite).

**Half-life:** 22–25 hr.

**TIME/ACTION PROFILE (relief of symptoms)**

<table>
<thead>
<tr>
<th>ROUTE</th>
<th>ONSET</th>
<th>PEAK</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intranasal</td>
<td>rapid</td>
<td>2–3 hr</td>
<td>12 hr</td>
</tr>
</tbody>
</table>

**Contraindications/Precautions**

**Contraindicated in:** Hypersensitivity.

**Use Cautiously in:**
- OB, Lactation: Safety not established;
- Pedi: Safety not established in children 12 yr (Astelin) or 6 yr (Astepro).

**Adverse Reactions/Side Effects**

**CNS:** drowsiness, dizziness, dysesthesia, fatigue, headache.

**EENT:** epistaxis, nasal burning, pharyngitis, sinusitis, sneezing.

**GI:** bitter taste, dry mouth, nausea.

**Metab:** weight gain.

**MS:** myalgia.

**Interactions**

**Drug-Drug:** Additive CNS depression with CNS depressants, including alcohol, sedatives/hypnotics, and opioid analgesics. Concurrent use of cimetidine may increase blood levels.

**Drug-Natural Products:** Concurrent use of kava, valerian, skullcap, chamomile, or hops can increase CNS depression.

**Route/Dosage**

**Seasonal Allergic Rhinitis**

**Intranasal (Adults and Children 12 yr):**
- *Astelin*—1–2 sprays/nostril twice daily;
- *Astepro*—1–2 sprays/nostril twice daily of 0.1% or 0.15% solution; 0.15% solution may also be given as 2 sprays/nostril once daily.

**Intranasal (Children 6–11 yr):**
- *Astepro*—1 spray/nostril twice daily.

**Intranasal (Children 5–11 yr):**
- *Astelin*—1 spray/nostril twice daily.

**Perennial Allergic Rhinitis**

**Intranasal (Adults and Children 12 yr):**
- *Astepro*—2 sprays/nostril twice daily of 0.15% solution.

**Intranasal (Children 6–11 yr):**
- *Astepro*—1 spray/nostril twice daily.

**Vasomotor Rhinitis**

**Intranasal (Adults and Children 12 yr):**
- *Astelin*—2 sprays/nostril twice daily.

**NURSING IMPLICATIONS**

**Assessment**
- Assess allergy symptoms (rhinitis, sneezing, conjunctivitis, hives) before and periodically during therapy.
- Assess lung sounds and character of bronchial secretions. Maintain fluid intake of 1500–2000 mL/day to decrease viscosity of secretions.
- Lab Test Considerations: May cause false-negative allergy skin testing. Discontinue antihistamines at least 72 hr before testing.

**Potential Nursing Diagnoses**
- Ineffective airway clearance (Indications)
- Risk for injury (Adverse Reactions)

**Implementation**
- Intranasal: Before initial use, remove the safety clip on the bottle and prime the delivery system with 6 sprays (Astelin) or 8 sprays (Astepro) or until a fine mist is obtained.
appears. When ≥ 3 days have elapsed since last use, reprim the unit with 2 sprays or until a fine mist appears.

Patient/Family Teaching

● Instruct patient in the proper technique for administration of nasal spray. Keep head tilted downward toward your toes during instillation of intranasal spray to decrease bitter taste.

● May cause drowsiness. Caution patient to avoid driving or other activities requiring alertness until effects of the medication are known.

● Advise patient to avoid taking alcohol or other CNS depressants concurrently with this drug.

● Advise patient that good oral hygiene, frequent rinsing of the mouth, and sugarless gum or candy may help relieve dry mouth. Patient should notify dentist if dry mouth persists > 2 wk.

● Advise patient to notify health care professional of all Rx or OTC medications, vitamins, or herbal products being taken and consult health care professional before taking any new medications.

● Advise female patients to notify health care professional if pregnancy is planned or suspected or if breast feeding.

● Instruct patient to contact health care professional if symptoms persist.

Evaluation/Desired Outcomes

● Decrease in allergic symptoms.