

Nasal steroid sprays

The leaflet aims to answer your questions about taking nasal steroid sprays to treat your rhinitis or chronic rhinosinusitis. If you have any questions or concerns, please speak to a doctor or nurse caring for you.

What is a nasal steroid spray?

Nasal steroid sprays are one of the most common medications used to treat rhinitis (nasal inflammation such as hayfever), or chronic rhinosinusitis (long-term inflammation of the sinuses). Examples include mometasone (also known as Nasonex) and fluticasone (Avamys or Flixonase).

Your ENT surgeon or GP may prescribe you a nasal steroid spray **for the long-term management of a nasal or sinus problem**. It is important to understand that in most cases, nasal steroid sprays are meant to be taken **daily, in the long term**. This is still often the case even if you have also had surgery for your nasal problems.

It can be helpful to think of a nasal spray like an “asthma inhaler for your nose”. You take the medication every day in order to manage a long-term problem. It will not make you feel better immediately after taking it, but over a long period it will gradually improve your symptoms (nasal blockage and discharge). Do not be disappointed if it takes several weeks to see any benefit; continue taking the spray regularly.

It is important that you do not miss a dose if you want to get the best out of the medication. If you stop taking it daily, you will lose the benefit of the spray and the control of your nasal problem is likely to return to how it was before you started.

How do I take the medicine?

1. Shake the spray well with the cap on. Take off the cap.
2. Gently blow your nose.
3. Hold the nasal spray in the opposite hand to the nostril you are going to spray into.
4. Sit upright and tilt your head forwards slightly.
5. Place the nozzle inside your nostril, pointing it slightly away from the centre of your nose, and aim it backwards towards your ear, not upwards towards the ceiling. This helps the medicine get to the right place and helps to avoid side effects.
6. Press the button on the side or press the pump down to activate the spray, and breathe in very gently through your nose. **Don't sniff hard.**
7. Take the nozzle out and breathe out through your mouth. If you have been told to use a second spray, repeat these steps.
8. Use the same technique with the opposite hand to use the spray in the other nostril.
9. When you've finished, wipe the nozzle and put the cap back on.
10. If you're using the correct nasal spray technique, it shouldn't drip from your nose or down the back of your throat.

What should I do if I forget to take the medicine?

If you forget a dose, simply take it later on the same day. There is no danger to taking a “double dose”. If you have forgotten for an entire 24-hour period simply resume taking it regularly the next day.

Are there any side effects?

Some patients are concerned at the idea of taking any steroid medication in the long term.

However, there is rarely any reason to be concerned about taking most nasal steroid sprays. The steroids mostly commonly used for long term nasal conditions (mometasone and fluticasone) have been carefully studied for their safety, and all available evidence suggests that they are **safe for long-term use**. This is even the case in younger children.

- Nasal sprays do **not** “thin the skin” inside the nose – this applies to some steroid skin creams but not to nasal sprays.
- When you use mometasone or fluticasone nasal sprays, only a tiny proportion of the steroid is absorbed into the bloodstream (0.5% and 0.1% respectively). This means that there is almost no risk of any steroid-related side effects.
- Some patients experience occasional **nosebleeds** when taking a spray regularly. This is usually because the spray nozzle is being directed onto the middle wall of the nose (the septum). It can be avoided by angling the nozzle slightly away from the middle of your nose when taking it (see above). If you have ongoing difficulties please speak to your GP or your ENT surgeon.
- Some patients find they have a sensation of **dryness or irritation** when taking a nasal steroid spray regularly. This is usually mild and tolerable. More severe irritation can occasionally happen if you are intolerant of one of the ingredients (benzalkonium chloride). If this occurs there are alternatives that can be considered.
- There is no evidence that steroid nasal sprays worsen intraocular (eye) pressure in patients with glaucoma (however these patients should avoid ipratropium bromide spray, which is non-steroid nasal spray).
- Fluticasone nasal sprays should **not** be taken by patients who take **ritonavir**, a common treatment for HIV. This is due to a drug interaction. If you are concerned about any drug you take interacting with your medicines, please discuss this with the pharmacist or a doctor.

Is there anything else I need to know?

Most patients tolerate nasal sprays well and feel significantly better whilst taking them regularly. If you have side-effects that are bothering you, talk to your GP or ENT surgeon about trying a different brand.

Not all brands of nasal spray are equivalent. Whilst mometasone and fluticasone are quite similar to each other, beclomethasone (also known as Beconase) spray is not as safe for long-term use and may not be as effective.

How do I get a repeat prescription?

If you have been prescribed a nasal steroid spray, it is likely that your GP will need to provide you with long-term repeat prescriptions. Contact your GP and provide them with a copy of the prescription/request form you have been given. Your GP can also refer to the clinic letter that will have been sent to them following your ENT clinic appointment.

Useful sources of information

[Asthma UK guidance on nasal spray technique](http://www.asthma.org.uk/advice/inhaler-videos/nasal-spray/)

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