

Table 1. International Consensus Statement on Allergy and Rhinology: Allergic Rhinitis - 2023.

ALLERGIC RHINITIS SUMMARY RECOMMENDATIONS

	STRONGLY RECOMMENDED	RECOMMENDED	OPTION	NOT RECOMMENDED	INSUFFICIENT EVIDENCE
Evaluation and Diagnosis		<p>History and physical exam (low level evidence)</p> <p>Skin prick testing – standardized allergen extracts improve consistency</p> <p>Serum sIgE</p> <p>Nasal provocation testing – for LAR, occupational rhinitis</p> <p>Validated surveys</p>	<p>Nasal endoscopy</p> <p>Intradermal testing – stand-alone or confirmatory following SPT</p> <p>Blended skin testing techniques – semi-quantitative</p> <p>Serum tIgE – for assessment of overall atopic status</p> <p>Nasal sIgE – may be used to evaluate for LAR</p> <p>Basophil activation testing</p> <p>Nasal provocation testing</p> <p>Nasal cytology</p> <p>Rhinomanometry</p> <p>Acoustic rhinometry</p> <p>Peak nasal inspiratory flow – with PROMs</p>	<p>Radiologic studies</p> <p>Nasal histology</p> <p>Fractional exhaled nitric oxide (FeNO)</p> <p>Nasal NO</p>	
Avoidance		<p>Occupational rhinitis – avoidance or decreased exposure</p>	<p>House dust mite, cockroach, pets, rodents, pollen – allergen avoidance or environmental controls</p>		
Pharmacotherapy	<p>Oral H1 antihistamines – newer generation</p> <p>Intranasal antihistamines</p> <p>Intranasal corticosteroid sprays (INCS)</p> <p>Nasal saline</p> <p>INCS + intranasal antihistamine – second line</p>	<p>Intranasal cromolyn (disodium cromoglycate) – second line, preventative</p>	<p>Oral corticosteroids – short course for acute exacerbation</p> <p>Intranasal decongestant – short course</p> <p>Leukotriene receptor antagonist (LTRA) – when other options contraindicated</p> <p>Intranasal anticholinergic (ipratropium bromide) – for rhinorrhea</p> <p>Biologics – based on published evidence; not FDA approved</p> <p>Probiotics – as adjunct treatment</p> <p>Oral H1 antihistamine (2G) + PSE – short course</p> <p>Oral H1 antihistamine (2G) + INCS</p> <p>Oral H1 antihistamine (2G) + LTRA – when other options contraindicated</p> <p>INCS + LTRA – when comorbid asthma present</p> <p>INCS + intranasal decongestant – short course</p> <p>INCS + intranasal anticholinergic – for rhinorrhea</p>	<p>Oral corticosteroids – routine use</p> <p>Intranasal corticosteroids, non-traditional application</p> <p>Injectable corticosteroids</p> <p>Oral decongestant – routine use</p> <p>Intranasal decongestant – routine use</p> <p>LTRA – as first line monotherapy</p> <p>Oral antihistamine (2G) + LTRA – as first line therapy</p> <p>INCS + LTRA – for AR alone</p>	<p>Oral H2 antihistamine – data does not adequately address benefit in AR</p>
Non-traditional		<p>Inferior turbinate surgery – for refractory nasal obstruction</p>	<p>Acupuncture</p>		<p>Other complementary modalities</p> <p>Honey</p> <p>Herbal therapies</p>
Surgical			<p>Septoplasty/septorhinoplasty – for patients with obstructive septal deviation</p> <p>Vidian neurectomy or posterior nasal neurectomy – for patients with bothersome rhinorrhea</p> <p>Cryoablation and radiofrequency of the posterior nasal nerves – for patients with bothersome rhinorrhea</p>		
Immunotherapy	<p>Subcutaneous immunotherapy (SCIT)</p> <p>Sublingual immunotherapy (SLIT) – general</p> <p>SLIT tablets – grass pollen, short ragweed, house dust mite</p> <p>Aqueous SLIT for tree pollen</p>	<p>High dose aqueous SLIT</p> <p>Aqueous SLIT for Alternaria</p> <p>SLIT tablet dual therapy</p>	<p>SCIT over SLIT</p> <p>Aeroallergen rush SCIT</p> <p>Aeroallergen cluster SCIT</p> <p>Aqueous SLIT for animal allergy</p> <p>Intralymphatic immunotherapy</p> <p>Oral mucosal immunotherapy</p>	<p>Epicutaneous immunotherapy</p> <p>Oral immunotherapy</p> <p>Inhaled immunotherapy</p>	<p>Local nasal immunotherapy</p>

INCS=intranasal corticosteroid; SCIT=subcutaneous immunotherapy; SLIT=sublingual immunotherapy; sIgE=allergen specific immunoglobulin E; LAR=local allergic rhinitis; SPT=skin prick test; tIgE=total immunoglobulin E; PROM=patient reported outcome measure; LTRA=leukotriene receptor antagonist; PSE=pseudoephedrine; NO=nitric oxide; 2G=second generation; AR=allergic rhinitis