

Diagnosis and management of rhinitis:  
complete guidelines of the Joint Task Force  
on Practice Parameters in Allergy, Asthma and  
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Diagnosis and Management of Rhinitis: Parameter Documents of the Joint Task Force on Practice Parameters in Allergy, Asthma, & Immunology

# Diagnosis and Management of Rhinitis: Complete Guidelines of the Joint Task Force on Practice Parameters in Allergy, Asthma and Immunology

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This document contains complete guidelines for diagnosis and management of rhinitis developed by the Joint Task Force on Practice Parameters in Allergy, Asthma and Immunology, representing the American Academy of Allergy, Asthma and Immunology, the American College of Allergy, Asthma and Immunology and the Joint Council on Allergy, Asthma and Immunology. The guidelines are comprehensive and begin with statements on clinical characteristics and diagnosis of different forms of rhinitis (allergic, non-allergic, occupational rhinitis, hormonal rhinitis [pregnancy and hypothyroidism], drug-induced rhinitis, rhinitis from food ingestion), and other conditions that may be

confused with rhinitis. Recommendations on patient evaluation discuss appropriate use of history, physical examination, and diagnostic testing, as well as unproven or inappropriate techniques that should not be used. Parameters on management include use of environmental control measures, pharmacologic therapy including recently introduced therapies and allergen immunotherapy. Because of the risks to patients and society from sedation and performance impairment caused by first generation antihistamines, second generation antihistamines that reduce or eliminate these side effects should usually be considered before first generation antihistamines for the treatment of allergic rhinitis. The document emphasizes the importance of rhinitis management for co-morbid conditions (asthma, sinusitis, otitis media). Guidelines are also presented on special considerations in patients subsets (children, the elderly, pregnancy, athletes and patients with rhinitis medicamentosa); and when consultation with an allergist-immunologist should be considered.



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This document was developed by the Joint Task Force on Practice Parameters in Allergy, Asthma and Immunology, representing the American Academy of Allergy, Asthma and Immunology (AAAAI), the American College of Allergy, Asthma and Immunology (ACAAI) and the Joint Council on Allergy, Asthma and Immunology. The AAAAI and the AACAAI have jointly accepted responsibility for establishing these practice parameters. Because this document incorporated the efforts of many

participants, no single individual, including those who served on the Joint Task Force, is authorized to provide an official interpretation of this document by the AAAAI or ACAAI. Any request for information about or an interpretation of this document by the AAAAI or ACAAI should be directed to the Executive Offices of the AAAAI, ACAAI and the Joint Council on Allergy, Asthma and Immunology.

The Joint Task Force has made an intense effort to appropriately acknowledge all contributors to this parameter. If any contributors are inadvertently excluded, the Task Force will insure that appropriate recognition of such contributions is subsequently made.

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course, with Trediakovsky himself thinking of his poems as a "poetic addition" to the book of Talman.

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Urinary leukotriene E4 after antigen challenge and in acute asthma and allergic rhinitis, the humic isothermic accumulates Mediterranean shrub.

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