

Now available without a prescription!

The same intranasal corticosteroid (INS) formula that has been trusted by doctors and pharmacists for over 20 years¹⁻³

Flonase® Allergy Relief is the first and only INS indicated to treat nasal and ocular symptoms of seasonal and perennial allergic rhinitis, without a prescription.^{1,2,4} It is approved for OTC* use in adults 18 years of age and older.²

Flonase® Allergy Relief (fluticasone propionate aqueous nasal spray) is indicated for the treatment of the symptoms associated with seasonal allergic rhinitis including hay fever, and perennial rhinitis and the management of sinus pain and pressure symptoms associated with allergic rhinitis.²

FOOTNOTE:

* BTC in Quebec, Schedule II.

Nasal allergy symptoms may be having a negative impact on your patients' lives

Left untreated, allergic rhinitis can impact quality of life due to:

- Fatigue
- Trouble sleeping
- Difficulty breathing

The estimated number of workdays lost to allergies per year is 3.5 million

Allergy season is every season

Outdoor seasonal triggers:

- Ragweed
- Grass
- Tree pollen
- Mold spores

Indoor year-round triggers:

- Pet dander
- Dust mites
- Mold

More people are affected than ever before and need effective options

MORE URBANIZATION	MORE TRAVEL	MORE EMISSIONS	WORSE WEATHER PATTERNS	MORE PETS	BIGGER, BADDER ALLERGENS
Increases CO ₂ and pollen 1960: 34% urban 2014: 54% urban 2030: 79% urban	Greater exposure to unfamiliar allergens 1950: 25 million tourists 2012: 1 billion tourists	Increases CO ₂ and pollen 1990-2010: ↑46%	<ul style="list-style-type: none">• Longer growing season• More fungus (e.g., mold)	704 million cats and dogs	1700-2010: CO ₂ ↑ 40% <ul style="list-style-type: none">• Larger plants• More pollen• Longer, allergy season

INS treatments, like Flonase® Allergy Relief,* are recognized as the most effective treatment option for allergic rhinitis

While decongestant nasal sprays cannot be used for more than 3 days, Flonase® Allergy Relief can be used every day* for sustained symptom relief.²

For maximum benefit, remind your patients to make Flonase® Allergy Relief a part of their daily routine.

FOOTNOTE:

* When used as directed. After 3 months of daily use, patients should ask their doctor if they can keep using Flonase® Allergy Relief.

An MOA that controls 6 inflammatory mediators*

COPY:

Flonase® Allergy Relief does more to control the allergic cascade:
It works to control 6 key inflammatory mediators – not just histamine

INS		Single-ingredient antihistamines
✓	Histamine	✓
✓	Cytokines	NONE
✓	Leukotrienes	NONE
✓	Chemokines	NONE
✓	Prostaglandins	NONE
✓	Tryptases	NONE

Fast onset

Some patients may feel relief as soon as the first day ²	12-24 hours
Maximum effect could take 2–3 days after the start of therapy ²	2-3 days

24 hour relieve OF ALLERGY SYMPTOMS†

* Mechanism vs. most OTC allergy pills. Flonase® Allergy Relief acts on multiple inflammatory substances (histamine, chemokines, leukotrienes, cytokines, tryptases and prostaglandins). The exact number and precise mechanism are unknown.

†Flonase® Allergy Relief provides relief of sneezing, itchy nose and throat, runny nose and itchy, watery eyes. It also relieves nasal congestion and sinus pain and pressure.

More relief of allergy symptoms*

The first prescription to over-the-counter[†] intranasal corticosteroid (INS) spray indicated for relief of the following allergy symptoms:

- Sneezing
- Itchy nose and throat
- Runny nose
- Itchy, watery eyes
- Nasal congestion
- Sinus pain and pressure

Trusted formula

- Fluticasone propionate, the active ingredient in Flonase® Allergy Relief, has a well-established safety profile with **over 20 years of clinical experience.**

FOOTNOTE:

* vs. single-ingredient antihistamines, which are not indicated for sinus pain and pressure.

† BTC in Quebec, Schedule II.

Who is your Flonase® Allergy Relief patient?

Flonase® Allergy Relief is indicated for the treatment of the symptoms associated with seasonal allergic rhinitis including hay fever, and perennial rhinitis and the management of sinus pain and pressure symptoms associated with allergic rhinitis.²

Diagnose allergic rhinitis by examining your patient’s history of allergic symptoms in combination with diagnostic tests.

Ask your patients:

Do you have **2 or more** of the following symptoms for **more than 1 hour on most days**?

- Watery, runny nose
- Sneezing, especially violent and in bouts
- Nasal obstruction
- Nasal itching
- Conjunctivitis (red, itchy eyes)

Evaluate:

Watery, runny nose + ≥1 other symptom	→	Allergic rhinitis
Watery, runny nose alone	→	May have allergic rhinitis
Sneezing, nasal itching and/or conjunctivitis BUT NO watery, runny nose	→	Consider alternate diagnosis/refer to a specialist

Other:

Recommend the following diagnostic tests:*

- 1) Allergen-specific IgE in the skin
- 2) Blood (specific IgE)

Recommended first line, year round†

First line

ARIA treatment guidelines, issued in partnership with the World Health Organization, recommend INS treatments like **Flonase® Allergy Relief as first-line treatment for allergic rhinitis**, calling them “the most efficacious medication available for the treatment of allergic and nonallergic rhinitis.”

INS treatments are recognized as the most effective long-term treatment option. Flonase® Allergy Relief has been approved for year-round use. After 3 months of daily use, patients should ask their doctor if they can continue using Flonase® Allergy Relief.

Suffering from allergic rhinitis may go beyond symptoms

Your patient may also be experiencing these physical and emotional impacts:

	<% of Patients>
TIREDFNESS	85% ⁵
IRRITABILITY	67%
FEELING MISERABLE	60%
SLEEP DISTURBANCES	57%
FEELINGS OF DEPRESSION	28%
EMBARRASSMENT	15%

Flonase® Allergy Relief contains the #1 prescribed allergy ingredient‡

FOOTNOTE:

ARIA=Allergic Rhinitis and Its Impact on Asthma

* Patient should consult their doctor.

† For adults 18 years of age and older. Flonase® Allergy Relief is not recommended in patients <18 years of age. Flonase® Allergy Relief should not be continued beyond three weeks in the absence of significant symptomatic improvement. After 3 months of daily use, the patient should consult their doctor if he/she can continue using Flonase® Allergy Relief.

‡ Based on U.S. data.

Instructions for use
Recommended dose

- 2 sprays (50 mcg each) in each nostril once a day

If symptoms are under control after one week of use:

- 1 spray in each nostril once a day

How to use Flonase® Allergy Relief²

1. Shake

Gently shake spray bottle.

Remove green cap.

2. Prime

Do this when:

- Starting a new bottle
- Haven't used it in a week
- Just cleaned nozzle

Otherwise go to step 3

Aim away from face. Grasp spray bottle as shown. Pump until fine mist appears.

Pumped six times and still no mist? Spray nozzle may be clogged.

3. Blow

Blow nose gently to clear nostrils.

Warning

Do not spray in your eyes or mouth. Only for use in your nose.

4. Aim

Close one nostril and put tip of spray nozzle in other nostril.

Put just the tip into your nose. Aim slightly away from centre of nose.

5. Breathe and spray

While sniffing gently, press down on spray nozzle once or twice (according to dosing instructions). You'll feel a light mist in your nose. Breathe out through your mouth.

Repeat in other nostril.

Wipe spray nozzle with clean tissue and replace cap.

Please see Product Monograph for complete patient instructions.

Some patients may feel relief as soon as the first day. Maximum effect could take 2–3 days after the start of therapy.²

TABLE:

	Flonase® Allergy Relief	Single-Ingredient Antihistamine	Other Nonprescription INS
Nasal Symptoms			
Congestion	✓	✓*	✓
Runny nose	✓	✓	✓
Sneezing	✓	✓	✓
Itchy nose	✓	✓	✓
Sinus discomfort & pressure	✓		
Ocular Symptoms			
Itchy eyes	✓	✓	
Watery eyes	✓	✓	

* Reactine only.

Frequently asked questions

Q. What is Flonase® Allergy Relief and how does it work?

A. Flonase® Allergy Relief (fluticasone propionate aqueous nasal spray 50 mcg) is an over-the-counter (OTC) intranasal corticosteroid (INS) treatment for relief of symptoms associated with seasonal allergic rhinitis (SAR) including hay fever and perennial rhinitis (PAR) as well as the management of associated sinus pain and pressure symptoms. It works by acting on several key inflammatory substances (histamine, chemokines, leukotrienes, cytokines, tryptases and prostaglandins) the body releases when it has an allergic reaction.²

Q. Is the new OTC Flonase® Allergy Relief just as strong as prescription Flonase®?

A. Yes. The dosing may be different, but Flonase® Allergy Relief is the same INS formula (fluticasone propionate) that has been trusted for over 20 years for patients 18 and older.

Q. How long does it take for Flonase® Allergy Relief to start providing relief?

A. Some patients may feel relief as soon as the first day. Maximum effect could take 2 to 3 days after the start of therapy.

Q. How does Flonase® Allergy Relief compare to other nasal sprays?

A. Flonase® Allergy Relief is the first prescription to non-prescription* INS spray indicated for relief of nasal and eye-related allergy symptoms including runny nose, sneezing, itchy nose, nasal congestion, itchy and watery eyes as well as nasal congestion and sinus pain and pressure. Fluticasone propionate, the active ingredient in Flonase® Allergy Relief, has a well-established safety profile with over 20 years of clinical experience.

Q. How is Flonase® Allergy Relief different from antihistamine pills?

A. Flonase® Allergy Relief controls several key inflammatory substances (histamine, chemokines, leukotrienes, cytokines, tryptases and prostaglandins) that the body releases when it has an allergic reaction, whereas single-ingredient antihistamine pills will only act on one of these substances (i.e., histamine).[†] INS treatments, like Flonase® Allergy Relief, are recognized as the most effective treatment option for allergic rhinitis

Q. Can Flonase® Allergy Relief prevent allergies?

A. Used preemptively whenever exposure to allergens is expected, Flonase® Allergy Relief has been shown to prevent

nasal allergy symptoms by reducing the sensitivity of the nasal membranes to allergens.

Q. Should I recommend Flonase® Allergy Relief as the first-line treatment for nasal allergies?

A. Canadian guidelines recommend INS treatments for moderate to severe intermittent symptoms, or mild persistent rhinitis, alone or in combination with antihistamines. INS treatments are recognized as the most effective long-term treatment options.

Q. What should I tell my patients if they are concerned about taking a steroid nasal spray?

A. Flonase® Allergy Relief is not an anabolic steroid. Flonase® has been used for over 20 years as a prescription product and has a well-established safety profile. With less than 1% systemic absorption, it does not cause drowsiness or sleeplessness.

Q. Is Flonase® Allergy Relief covered by insurance?

A. Patients should contact their insurance provider for coverage information.

Q. Where can I get more information about Flonase® Allergy Relief?

A. Please visit **flonaseprofessional.ca** for more information.

FOOTNOTE:

* BTC in Quebec, Schedule II.

† Mechanism vs. most OTC allergy pills. Flonase® Allergy Relief acts on multiple inflammatory substances (histamine, chemokines, leukotrienes, cytokines, tryptases and prostaglandins). The exact number and precise mechanism are unknown.

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Product Information

Indications and clinical use:

Flonase® Allergy Relief (fluticasone propionate aqueous nasal spray) is indicated for the treatment of the symptoms associated with seasonal allergic rhinitis including hay fever, and perennial rhinitis; and the management of sinus pain and pressure symptoms associated with allergic rhinitis.

Contraindications:

Flonase® Allergy Relief (fluticasone propionate aqueous nasal spray) is contraindicated in patients who are hypersensitive to fluticasone propionate, or to any ingredient in the formulation or component of the container and patients with untreated fungal, bacterial or tuberculosis infections of the respiratory tract.

Flonase® Allergy Relief is not recommended for children and adolescents younger than 18 years of age.

Most serious warnings and precautions:

Patients should be informed that the full effect of Flonase® Allergy Relief (fluticasone propionate aqueous nasal spray) therapy is not achieved until 2 to 3 days of treatment have been completed. Treatment of seasonal rhinitis should, if possible, start before the exposure to allergens.

Although Flonase® Allergy Relief will control seasonal allergic rhinitis in most cases, an abnormally heavy challenge of summer allergens may in certain instances necessitate appropriate additional therapy.

Under most circumstances, treatment with corticosteroids should not be stopped abruptly but tapered off gradually. Patients should be advised to inform subsequent physicians of prior use of corticosteroids.

Other relevant warnings and precautions:

Ear/Nose/Throat: Epistaxis, nasal ulceration, *Candida* infection, nasal septal perforation, impaired wound healing.

Endocrine and Metabolism: Hypercorticisms and adrenal suppression, effects on growth, hypothyroidism.

Hematologic: Acetylsalicylic acid should be used cautiously with corticosteroids in hypothermia.

Hepatic/Biliary/Pancreatic: Concomitant use of fluticasone propionate and ritonavir should be avoided, unless the potential benefit to the patient outweighs the risk of systemic corticosteroid side effects. There is an enhanced effect of corticosteroids in patients with cirrhosis.

Immune: Hypersensitivity reactions including anaphylaxis, immunosuppression; use with caution in patients who have had recent nasal surgery or trauma.

Ophthalmologic: Close monitoring is warranted in patients with a change in vision or with a history of increased intraocular pressure, glaucoma, and/or cataracts.

Psychological and Behavioural: Rare: psychological and behavioural effects including psychomotor hyperactivity, sleep disorders, anxiety, depression or aggression.

Respiratory: Careful attention must be given to patients with asthma or other clinical conditions in whom a rapid decrease in systemic steroids may cause a severe exacerbation of their symptoms.

Pregnant and Nursing Women: The safety of fluticasone propionate in pregnant and nursing women has not been established. If used in pregnancy, the expected benefits should be weighed against the potential hazard to the fetus, particularly during the first trimester of pregnancy. The use of fluticasone propionate in nursing mothers requires that the possible benefits of the drug be weighed against the potential hazards to the infant.

Please consult the product monograph at www.gsk.com or by calling 1-800-250-8866 for information relating to adverse reactions, drug interactions, and dosing information.

DISCOVER MORE RELIEF OF YOUR ALLERGY SYMPTOMS

Flonase® Allergy Relief provides relief of sneezing, itchy nose and throat, runny nose and itchy, watery eyes. It also relieves nasal congestion and sinus pain and pressure.

GlaxoSmithKline Consumer Healthcare Inc.

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*vs. single ingredient anti-histamine pills, which are not indicated for sinus pain and pressure.