

Methods: Two prospective, nonrandomized comparative studies were conducted. All patients had a documented history of cat-induced allergic conjunctivitis.

In the first study, 13 patients had one eye rubbed 15 times without allergen exposure. Both eyes were evaluated after 5, 15, 30, and 60 minutes, using questionnaires and slit-lamp examination. At least 1 week later, each subject was exposed to cat dander via a cat exposure room. Fifteen minutes after entering the room, each subject had one eye rubbed 15 times. Total exposure continued for 75 minutes, after which similar evaluation was conducted.

Twenty patients in the second study were subjected to the same protocol, except one eye was rubbed for 20 minutes, more forcefully, and the patients wore masks during the exposure.

Results: At the first visit, rubbed eyes exhibited more itching than non-rubbed eyes at 5 minutes, but were not significantly different at other time points or for other

measures. Following cat-room exposure, rubbed eyes showed more itching at 5, 15, and 30 minutes, but no difference with respect to hyperemia or chemosis.

In study two, more vigorous eye rubbing resulted in increased itching, chemosis and hyperemia compared with the non-rubbed eyes. Following cat-room exposure, the difference between rubbed and non-rubbed eyes was more pronounced when more vigorous rubbing had occurred.

Editor's Comments

Eye rubbing produces transient changes similar to those produced by allergen exposure, but following allergen exposure, eye rubbing produces more prolonged and more dramatic changes, supporting the belief that eye rubbing adds to the intensity of the allergic conjunctivitis, possibly because the mechanical forces contribute to mast-cell degranulation.

Topical Olopatadine and Loratadine Compared with Loratadine Alone

Lanier BQ, Gross RD, Marks, BB, *et al.*: **Olopatadine ophthalmic solution adjunctive to loratadine compared with loratadine alone in patients with active seasonal allergic conjunctivitis symptoms.** *Ann Allergy Asthma Immunol* 2001, 86:641–648.

Rating: •Of importance.

Introduction: Therapy for allergic conjunctivitis has moved from systemic medication to topical agents. While the newer antihistamines are effective, they have a slow onset of action for the relief of ocular symptoms and they may cause "dry eye," further adding to discomfort. It is to be expected that the newer, potent, topical agents offer several advantages over oral therapy for the patient with allergic conjunctivitis.

Aims: This study compares the efficacy of the combination of olopatadine and loratadine with loratadine alone in patients with seasonal allergic conjunctivitis (SAC).

Methods: This study was designed as a three-center, observer-masked, treatment-controlled, randomized, parallel-group study. It was conducted during the 1998 pollen season. Ninety-four patients between the ages of 7 and 74 years were randomized to one of two treatment groups, although only 84 were evaluable for efficacy. All

had a history of SAC with a positive skin test to a relevant pollen allergen. Patients were randomized to one of two groups: 45 received olopatadine ophthalmic solution 0.1% twice a day plus loratadine 10 mg daily, while 49 received loratadine 10 mg daily for a period of 7 days. Patients' symptoms, patients' and physicians' impressions, and safety parameters were evaluated at days 0, 3, and 7. Daily diaries were kept. Investigators were masked, as there were no control eye drops, so patients knew their treatment group.

Results: Patients receiving both topical and oral medication had significantly less ocular itching, and rated their ocular condition more improved than those receiving oral medication alone. Both treatment groups had significant meaningful improvements in quality-of-life measures, but these were significantly better for the combined treatment group at day 7.

Editor's Comments

This study supports the known advantages of targeted, topical therapy for the treatment of SAC. It has a prompt onset of action, and reduces the possibility of systemic side effects.