

This PhD research aimed to fill gaps in our understanding of rhinitis control in a real-life population. Additionally, it aimed to enhance the understanding of nasal decongestant overuse by investigating patients' motives for long-term use, underlying nasal conditions, and a structured withdrawal program. Chapter 2 describes the findings of an observational study in community pharmacies, revealing suboptimal control in almost 60% of patients with persistent rhinitis, along with issues such as improper treatment selection, poor adherence, and poor nasal spray technique. In Chapter 3, the results from a qualitative interview study highlighted that patients consider the nasal decongestant to be indispensable. Patients face a dilemma in which the barriers to withdrawal currently outweigh the potential benefits. Chapter 4 reveals that many patients with long-term nasal decongestant use have underlying nasal conditions. Our newly-developed withdrawal program demonstrates potential, enabling 70% of patients to fully stop using nasal decongestants with minimal relapse. Rapid reduction in nasal congestion, improved rhinitis control, and improved quality of life were observed. Furthermore, sleep disturbance was not increased after withdrawal. The findings on the efficacy of the withdrawal program will have to be validated in future trials.