

Nasal Polyps

John is 50 years old. He gets a cold along with the rest of his family of five. While his family makes an uneventful recovery, his cold symptoms do not seem to go away. Now, it is three months since he has had the cold. He has constant nasal congestion and stuffiness, discolored nasal mucus, fullness of head and bad smell to his breath. What is worse, he is frustrated by the fact that he can not smell or taste anything including food. His wife complains that he is snoring loudly and tosses and turns in his sleep. He is fatigued due to lack of good sleep and lacks energy from not eating properly. He has tried several OTC medications including aspirin and NSAIDs unsuccessfully! In fact, he suspects they made his symptoms worse! To top it all, all of a sudden one day he starts wheezing and coughing. He has had enough! He decides to go to his doctor! If this sounds familiar, please read on!

If you have constant symptoms of nasal stuffiness, runny nose, sneezing, reduced sense of smell and taste; it could signify the presence of nasal polyps and not just allergies. While it is considered an uncommon condition, as many as 4% of adults may suffer from nasal polyps.

What are nasal polyps?

Nasal polyps are white, semi-translucent, grape-like structures that develop as protrusions of the lining of the sinuses that project into the nose through sinus openings. They can occur at any age, in children or adults, but most appear after the age of 40. Men outnumber women by two to one in occurrence of this condition. The cause of nasal polyps remains unknown. However, there are several speculations. The two most frequently considered include allergic disease and infection.

What causes nasal polyps?

There is a high association of nasal polyps in those who have asthma and in those who are allergic to aspirin. The frequency of asthma in people with nasal polyps has been reported to be around 20%. Besides the year-round symptoms of nasal stuffiness, runny nose, sneezing and post nasal drip, people with polyps often have a decreased sense of smell and taste. They also may have symptoms of an associated sinus infection, such as discolored nasal mucus, post nasal drip, bad breath, cough and/or facial pain. Symptoms often can be worsened by exposure to environmental irritants, such as fumes, odors, dust, chemicals and temperature changes. A major complication of nasal polyps is chronic sinusitis. Presence of nasal polyps predisposes to development of sinus infections and these in turn, worsen the nasal polyps. This makes it a vicious cycle.

Conversely, several studies have cast doubts on the importance of allergy as a cause of polyps. One study found the frequency of nasal polyps to be lower in the allergic population. Another study found no greater frequency of allergy among people with nasal polyps than in the general population. Studies will likely continue to be conducted to obtain additional information about nasal polyps.

How are nasal polyps diagnosed?

Nasal polyps are diagnosed by getting a good history from the patient and by examination of the nostrils carefully. However, small nasal polyps higher up in the nose may not be visible

on routine examination. If there is a high degree of suspicion, your doctor may refer you to an ear, nose and throat specialist or order CT scan of the sinuses for further evaluation. Nasal polyps are unusual in children in whom it is often associated with cystic fibrosis. Sweat test will help identify this condition.

How are nasal polyps treated?

Sometimes the nasal mucosa gets so much swollen and pale it may resemble nasal polyps. It is called nasal polypoid change. Regular use of intranasal corticosteroid nasal sprays will shrink the swelling and bring normality to the nasal mucosa. Nasal polyps are treated both medically and surgically. Intranasal corticosteroid nasal sprays are the mainstay of treatment for nasal polyps. At times, a short course of oral corticosteroids may be used to help reduce the size of the nasal polyps, and then continuous use of a corticosteroid nasal spray helps to prevent it from becoming enlarged. In fact, nasal polyps recur about 50% of the time following surgery. Regular use of prescription nasal sprays twice daily will help reduce this recurrence.

When there is an associated sinus infection, it is important that your physician prescribe an appropriate antibiotic to treat the infection. In cases of associated allergic rhinitis, allergy injections may be helpful, but the treatment does not affect the existing nasal polyps. Surgery is reserved for those cases in which the polyps are unresponsive to medical management or if there is concern about the potential side effects of the medications.

Taking medications such as aspirin and NSAIDs may aggravate nasal polyps in some patients- especially the ones with coexisting asthma and raised eosinophil count in the peripheral blood. Ask your doctor about this next time you see him or her. It may become necessary to stop these medications.

About the author:

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