

البحث السادس (بحث مشترك غير مشتق من رسالة)

عنوان البحث باللغة الانجليزية :

Nasalance measures outcome in Vasomotor rhinitis patients after treatment with intranasal Corticosteroids versus hypertonic saline irrigation

Objective

The objective of this study was to evaluate the effect of intranasal corticosteroid versus hypertonic saline irrigation on the nasalance scores in patients with vasomotor rhinitis (VMR).

Patients and methods

The study was conducted on 71 patients recruited from the Otolaryngology Department, Kasr El-Aini Hospital, Cairo University, with a history of nasal obstruction for at least 6 months, clinical and endoscopic evidence of VMR, and negative skin prick test. The patients were subjected to nasometric evaluation to obtain their nasalance scores before treatment. The patients were then randomly classified into two groups: group A, which included 33 patients who were instructed to apply mometasonefuroate nasal spray two puffs in each nostril once per day for 3 months, and group B, which included 38 patients who were instructed to apply hypertonic saline nasal spray three times per day for 3 months. Patients of the two groups were re-evaluated by means of nasometry to assess the change in their nasalance scores after each treatment plan.

Results

The mean pretreatment nasometry score for group A was 34.55 ± 7.71 , the minimum score was 18.7, and the maximum score was 48. The post-treatment nasometry score for the same group showed a mean of 46.44 ± 7.76 and ranged from a minimum of 29.9 to a maximum of 58.2. The difference between the two scores was found to be statistically significant ($P = 0.014$). As regards group B, the mean pretreatment nasometry score was 36.04 ± 7.36 , the minimum score was 17.4, and the maximum score was 47.3. The post-treatment nasometry score for the same group showed a mean of 45.57 ± 7.4 and ranged from a minimum of 29.3 to a maximum of 55. The difference between the two scores was found to be statistically highly significant ($P = 0.001$).

Conclusion

It appears that intranasal hypertonic saline is highly effective in the treatment of VMR and approaches the effect of intranasal corticosteroids.