

PARISH NURSE MINISTRY NEWSLETTER

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Get Rhinitis Relief and Breathe Easier

Jesus My Love; My All.

ALLERGIC RHINITIS

Rhinitis is characterized by inflamed, irritated nasal passages and a drippy or stuffy nose and post nasal drip. Rhinitis is frequently triggered by allergies, which tend to fade as we age. Not all allergies dissipate with age, and not all cases of rhinitis are caused by allergies. Allergic rhinitis affects roughly 10 to 30 percent of adults. One study estimated that 60 percent of people over age 50 who suffer from rhinitis have the non-allergenic variety.

If you suffer from the condition, you know how uncomfortable it can be. "At the very least, rhinitis can be a drain on your quality of life," says Dr. Bruce Bochner, M.D., director, division of allergy and clinical immunology, Johns Hopkins School of Medicine. "But it can also have a much more profound consequence on your health." For instance, it can worsen symptoms of sleep apnea, in which breathing stops for short periods of time during the night. That, in turn, can boost heart attack risks.

Common allergy triggers include: dust mites, insects such as cockroaches, pet dander (from a new animal companion, perhaps) mold, pollens and aromatic flowers. A move to a different region may expose you to new plants that can set off allergies or to dampness that brings mold. If you suspect you might have allergies, an allergist can test you for reactions to a variety of airborne substances; pinpointing the possible cause to your trouble.

You may find some relief simply by reducing your exposure to your particular allergy triggers. If seasonal pollen is causing your rhinitis, most doctors recommend you limit outdoor activities when pollen counts are high. Local information on pollen counts and forecasts are posted at www.pollen,com or the National Allergy Bureau (www.aaaai.org/nab; telephone: 800-9-POLLEN). If your symptoms remain bothersome, or you have seasonal allergies, your doctor might suggest that you use both an antihistamine and steroid nasal spray during peak allergy season. If you are using beta blockers or ACE inhibitors for high blood pressure you should skip allergy shots (immunotherapy) as suggested by Dr. Bochner. You should also avoid immunotherapy if you have coronary artery disease, which can boost the likelihood of a negative reaction to the shots. Avoid oral and nasal decongestants (unless your doctor okays them). Over time, decongestants can make rhinitis symptoms worse, raise your blood pressure, and increase urine retention if you have an enlarged prostate.

NONALLERGIC RHINITIS

If allergies are not your problem, you might want to see an ear, nose, and throat specialist to be checked for non-allergic (vasomotor) rhinitis. Aging is one of the most common causes. Nasal passages often change as we get older. The nasal septum can weaken, become crooked, and obstruct airflow (deviated septum). Nasal passages may be less able to remove mucous as quickly as they once did. A variety of other conditions can cause non-allergic rhinitis, including sinus infections, hypothyroidism, alcohol, spicy or cold foods, and exposure to dry, chilly air. Medications such as aspirin and drugs used for erectile dysfunction may also be to blame.

Treatments vary depending on the diagnosis. If a bacterial sinus infection, you may receive antibiotics; thyroid replacement medication can normalize levels of your thyroid hormone, if that's the problem. Nasal moisturizers, home humidifiers, avoiding known triggers, and treatments for polyps and tumors on the advice of your physician may be necessary. Always consult your physician for diagnosis and treatment.

Information from: Health After 50, The Johns Hopkins Medical Letter ,April 2011, pg.6. Happy Spring and avoid Allergies. Your Parish Nurse.