

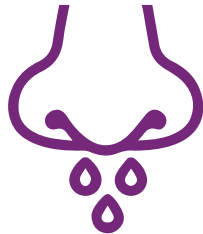
# Rhinitis, Chronic Rhinosinusitis & Severe Asthma

## WHAT IS RHINITIS?

**Inflammation of the nasal mucous membranes.**

### Symptoms:

- Nasal obstruction
- Nasal discharge
- Sneezing



*Can be allergic or non-allergic*

## WHAT IS CHRONIC RHINOSINUSITIS (CRS)?

**Persistent inflammation in the nose & sinuses (>3 months)**

### Symptoms:

- Facial pain/pressure/fullness
- Nasal obstruction/blockage
- Purulent nasal drainage (discharge may be nonpurulent, nondiscolored)
- Hyposmia/anosmia (smell)



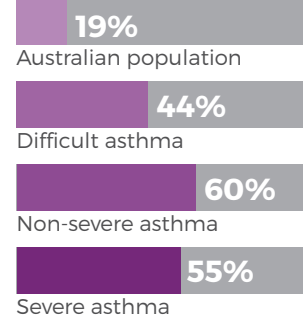
## HOW DOES IT RELATE TO ASTHMA?



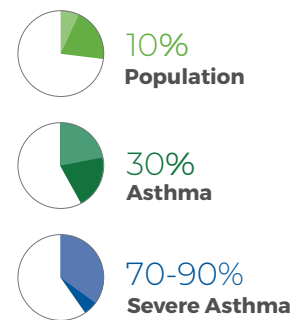
Comorbid nasal disease contributes to **reduced asthma control** and **quality of life** and **increased attacks**



### ALLERGIC RHINITIS



### CHRONIC RHINOSINUSITIS



## DIAGNOSIS:

- Diagnosis: sinonasal symptoms  $\geq 12$  weeks
- Objective tests: nasal endoscopy, sinus CT
- Sinonasal Outcomes Test (SNOT-22) for symptom severity & quality of life; Chronic Sinusitis Survey
- Assess if nasal polyps are present
- Consider systemic diseases (Granulomatosis with Polyangiitis; Eosinophilic Granulomatosis with Polyangiitis)



## MANAGEMENT OPTIONS:

**Treatment of rhinitis can improve asthma outcomes. Options include:**

- Antihistamines/Decongestants
- Intranasal corticosteroids
- Trigger avoidance
- Nasal saline irrigations



### Additional Options for CRS:

- Nasal saline irrigation
- Intranasal corticosteroids
- Surgery and/or monoclonals for nasal polyps
- Antibiotics or oral steroids