

THE BLOCKED NOSE

Many people spend their entire life without appreciating that they suffer from nasal obstruction. They may describe it as having a blocked nose and having to breathe through their mouth.

People who develop nasal obstruction more readily recognise this symptom and the most common situation when this arises is when an upper respiratory tract infection or a "cold" occurs. This is normally a temporary situation which resolves over a matter of days and is treated adequately with sprays or oral decongestants. These people most frequently recognise that this condition affects their sleep patterns adversely.

Mouth breathing is not a normal situation when at rest or even undergoing mild exertion. Air inspired through the nose is humidified to the comfort of the lower airways. Those who breathe through their mouth will recognise that they develop a dry mouth and throat which can become uncomfortable.

COMMON CAUSES OF NASAL OBSTRUCTION

Adults / Chronic rhinosinusitis (including hayfever and infective causes)

This condition can be associated with or without polyps.

Other symptoms associated with a blocked nose can include a postnasal drip, pressure or pain symptoms over the forehead and cheeks, and a tendency to develop prolonged bouts of sinusitis following a "cold" which lasts for longer than the usual 2-3 days. The sense of smell can also be reduced and sometimes people are aware of polyps inside their nose which may also cause people to experience a ball valve effect.

These symptoms are in keeping with a chronic rhinosinusitis and the initial treatment should be in the form of intranasal steroids such as Flixonase for at least one month to see if there is a benefit. If this treatment fails, surgery is indicated when symptoms are deemed to be intolerable. Surgery can take the form of reduction of inferior turbinates and/or endoscopic sinus surgery.

Internal nasal valve obstruction

People of Caucasian descent are more prone to this problem as they breathe through a rather narrow cleft which surprisingly is situated about 1 cm behind the tip of the nose and this constitutes the narrowest portion of the nose. These people may notice that when they elevate their cheek or elevate the tip of their nose that their airway is also improved. The internal valve can be artificially widened by applying strips across the top of the nose and by inserting a narrow splint into the nasal airway. There are also very successful surgical techniques which can be undertaken to widen and stiffen the internal nasal valve area. This operation is called a functional septorhinoplasty.

Adenoid enlargement

Normally, adenoid tissue disappears at the age of 8 years old. Very occasionally even young adults can present with nasal obstruction secondary to adenoid tissue.