THE PROFESSIONAL
ASSISTANT
LEARN & ADVISE

MODULE 13: MAY 2016

Nasal conditions

As well as giving us the ability to smell, the nose plays an important role in the respiratory and immune systems and also contributes to our ability to hear and taste. So it's no wonder that nasal conditions can make us feel particularly unwell.

The sinuses are four pairs of air-filled cavities found in the bones of the face, around the nose and eyes.

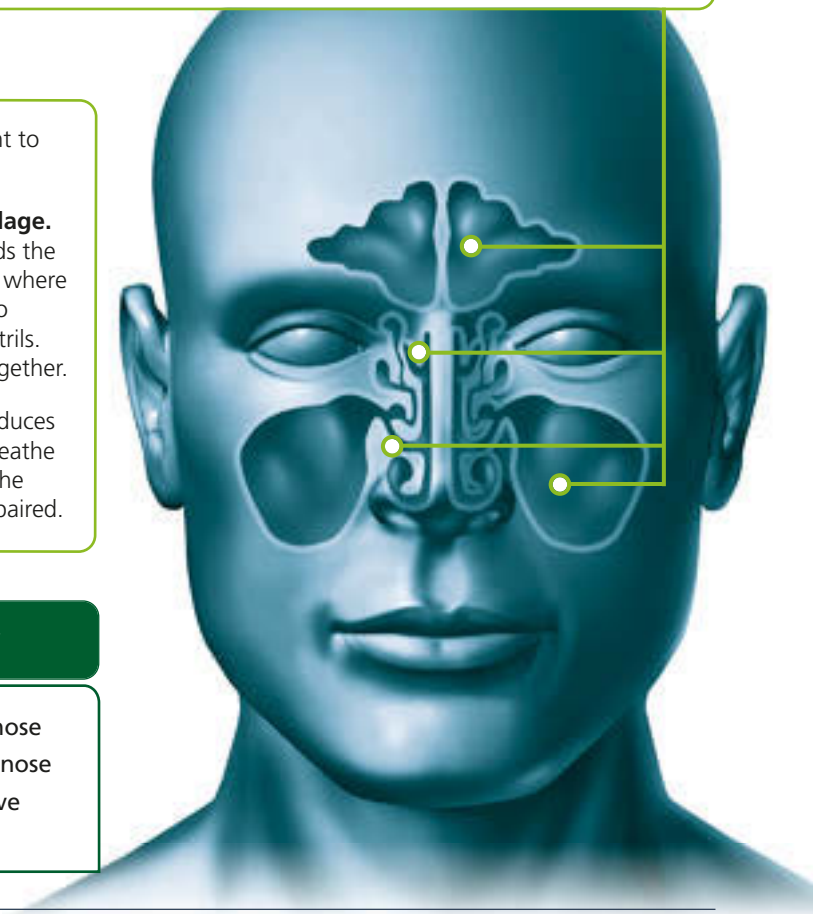
The mucus membrane that lines the nasal cavity also coats the inside of the sinuses. Mucus produced here drains into the nose. Anything that blocks this drainage can lead to a build up of pressure in the sinuses, which can be felt as sinus pain or a headache.

If the sinus cavities become blocked, bacteria in the mucus may grow, leading to a sinus infection.

To understand how conditions affect the nose, it's important to know a little about its structure.

The nose is made up of a **combination of bone and cartilage.** At the top, around the bridge, the structure is bone. Towards the front, the nose is mostly cartilage and this continues inside, where a cartilage called the nasal septum divides the nose into two halves. Air enters into each of these halves through the nostrils. Towards the back of the nose, the two nasal cavities join together.

The entire nasal cavity is **lined with a membrane** that produces a thin film of clear mucus. This helps humidify the air we breathe in and traps particles like allergens, bacteria and viruses. If the inside of the nose is too dry, its various functions will be impaired.



OBJECTIVES After studying this module, assistants will:

- Have a basic understanding of the structure of the nose
- Be familiar with common conditions that affect the nose
- Know what treatment options are available to relieve these conditions.

This module is suitable for all members of the pharmacy team who wish to increase their knowledge of common conditions, treatment options and communication skills. This module has been endorsed with the NPA's Training Seal as suitable for use by pharmacy teams as part of their ongoing learning.
This module can also form part of your Team Tuesday training.

DID YOU KNOW?
Children with sinusitis may be irritable, breathe through their mouth, and have difficulty feeding.

Understanding the problem

From viral infections and allergies to environmental triggers, nasal conditions can be caused by a range of factors and are among some of the most common complaints seen in pharmacy.

Many of these conditions tend to have some degree of overlap, so it can be difficult to distinguish between them. For instance, it's possible for someone with rhinitis to report nasal congestion too, or for someone with a stuffy nose to suffer from sinus pain. It's therefore important to ask customers to describe their symptoms carefully as this will help you to offer effective treatment and advice.

Sinusitis

The term sinusitis simply means that the sinuses are inflamed. This is usually caused by an infection or an allergy.

Normally, mucus drains through small channels into the nose. However, if these channels get blocked, the sinuses can become congested and inflamed. Sinusitis is often acute (lasting two to three weeks). However, it can be chronic (lasting at least 12 weeks). Symptoms may include:

- Pain or tenderness in the forehead, cheeks or around the eyes, which is worse on bending down
- Headache
- Fever
- A blocked or runny nose
- Cough
- Loss of smell or taste
- Bad breath.

In addition, nasal secretions may be thick and range in colour from white to yellow/green or even tinged with blood. This may indicate an infection, so refer these customers to the pharmacist.

Rhinitis

Rhinitis is the medical term for inflammation and swelling of the mucus membrane inside the nose. This inflammation increases the amount of mucus produced and, as a result, customers may complain of a runny nose, sneezing, nasal congestion and a feeling of mucus dripping or trickling down the back of their throat.

Rhinitis can be defined by the duration of symptoms – acute (short-lived) or chronic (longer-lasting). Here, we focus on acute rhinitis:

1 Acute allergic rhinitis

Allergic rhinitis is triggered by an allergic reaction to an allergen such as pollen, pet dander or house dust mites.

2 Acute non-allergic rhinitis

Non-allergic rhinitis can be caused by:

- **A viral infection –** e.g. the common cold
- **Environmental factors –** e.g. a dry atmosphere, smoke, a change in temperature
- **Hormonal imbalance –** e.g. during pregnancy, puberty or when taking oral contraceptives or hormone replacement therapy
- **Rebound congestion –** the medical name for this is 'rhinitis medicamentosa' and it is caused by the overuse of nasal decongestants. Anyone with repeated symptoms of congestion following use of a nasal decongestant should be referred to the pharmacist.

Post-nasal drip

Normally, all mucus secretions from the nose drain into the back of the throat and are swallowed in a process that we're not usually aware of.

However, a person may feel as if mucus is accumulating at the back of their throat. This is termed 'post-nasal drip'. This may be described as a feeling of mucus dripping or trickling down the back of their throat, which may trigger a cough. Post-nasal drip may occur when a person is suffering from a cold or an allergy.

DID YOU KNOW?
It is estimated that one in every five UK adults is affected by allergic rhinitis.

Don't forget...

Sinusitis is normally caused by a viral infection, so most people with the condition won't need to see their GP as it will clear up on its own. However, if symptoms are severe, don't improve within seven to 10 days, or are getting worse, additional treatment from a GP may be necessary.

Added advice

Pass on the following advice to help customers stay congestion-free and breathe easy:

- Keep nasal passages moist by using sea water or saline sprays or washes
- Drink plenty of fluids
- Use steam inhalation. A hot steamy shower or a vaporiser may help
- Do not smoke and avoid smoky atmospheres
- Be scrupulous about personal hygiene. Cover the nose and mouth when sneezing; wash hands regularly; discard used tissues immediately
- Raise the head of the bed a few inches or use extra pillows to ease any breathing difficulties.

Treatment options

The treatment of choice will depend on an individual's symptoms and their cause, although this may not always be obvious. Ask the WWHAM questions and refer to your pharmacist when necessary.

1 Sea water and saline nasal sprays

Nasal sprays based on natural ingredients such as sea water or saline can provide relief from a number of nasal conditions.

Products containing sea water (e.g. Stérimar Nasal Hygiene) work by washing away allergens and rebalancing nasal functions. Some have additional ingredients such as manganese, calcium and purified water (e.g. Stérimar Stop & Protect Allergy Response) to inactivate and neutralise allergens in the nose and form a barrier to prevent allergens from irritating the nasal mucosa. These products can be used alone or alongside medication and are suitable for pregnant women, babies, young children and those who can't take medicated treatments.

2 Decongestants

Decongestants work by constricting the blood vessels in the lining of the nose, reducing swelling and opening up the nasal passages. Decongestants are not usually recommended for children under 12, breastfeeding women or those who have certain health conditions, such as high blood pressure. They should also be avoided by anyone taking antidepressants called monoamine oxidase inhibitors. Decongestants are available as:

- **Tablets** – useful for people who want a convenient, long-lasting treatment. Examples include phenylephrine (e.g. Non-Drowsy Sudafed Congestion & Headache Relief Capsules) and pseudoephedrine (e.g. Contac Non Drowsy 12 Hour Relief)
- **Nasal sprays or drops** – useful for people who want immediate relief. Examples include xylometazoline (e.g. Otrivine Nasal Spray range) and oxymetazoline (e.g. Vicks Sinex Decongestant Nasal Spray), which are effective for eight to 10 hours. Shorter-acting ingredients include ephedrine and phenylephrine (e.g. Ephedrine Nasal Drops). Prolonged use for a week or more can cause rebound congestion.

3 Corticosteroids

Corticosteroids are anti-inflammatory drugs available as nasal sprays for allergic rhinitis and are suitable for customers aged 18 years and over. Examples include beclometasone (e.g. Beconase Hayfever) and fluticasone (e.g. Pirinase Hayfever).

When to refer

You should refer a customer to the pharmacist if they:

- Have symptoms which are severe or last longer than 10 days
- Have a fever lasting for more than three days
- Produce nasal discharge that is yellow/green and accompanied by sinus pain or pressure
- Have blood in their nasal discharge or a persistent clear discharge after a head injury
- Notice a change in vision or swelling around their eyes
- Are a baby with nasal congestion that is causing feeding difficulties
- Are a child who may have a foreign object inside their nose
- Have symptoms that initially improve but then worsen
- Are taking prescribed medication for a long-term medical condition
- Have symptoms that persist despite the use of appropriate OTC medication.

SIGNPOSTING

For more information, you can:

- Use your *Counter Intelligence* Plus training guide
- Visit Allergy UK at: allergyuk.org or call: 01322 619898
- Visit Action Against Allergy at: actionagainstallergy.co.uk or call: 020 8892 2711

TEST YOURSELF ONLINE

GOOD PRACTICE KNOWLEDGE IS IMPORTANT WHEN ADVISING CUSTOMERS

Questions

1) Which of the following can cause rhinitis?
a) A cold
b) A dry atmosphere
c) HRT
d) All of the above

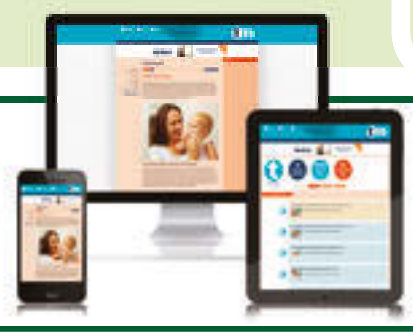
2) Which of the following statements is FALSE?
a) The nose is made up of bone and cartilage
b) The nasal septum divides the nose into two halves
c) Mucus in the nasal cavity helps to dehumidify the air we breathe
d) If the sinus cavities become blocked, bacteria in the mucus may grow, leading to an infection

3) Which of the following are symptoms of sinusitis?
a) Pain or tenderness in the forehead, cheeks or around the eyes
b) A blocked or runny nose
c) A cough
d) All of the above

4) Which of the following statements is TRUE? Decongestants:
a) Are not usually recommended for children under 16
b) Work by expanding blood vessels in the lining of the nose
c) Are useful for immediate relief of congestion
d) All of the above

5) Which of the following is NOT helpful for customers with congestion?
a) Lower the head when sleeping by using fewer pillows
b) Keep nasal passages moist
c) Use steam inhalation
d) Drink plenty of fluids

6) Which of the following customers would you refer to the pharmacist? A customer who has:
a) Persistent symptoms despite the use of appropriate OTC medication
b) Yellow/green nasal discharge accompanied by sinus pain or pressure
c) A fever that has lasted for more than three days
d) All of the above



Scenario

Oliver, a regular customer, is picking up some first aid supplies and winces as he bends down to pick up something from a low shelf. When you ask if he's feeling unwell, he tells you that his sinuses are painful and it's worse when he bends down. He's also got a blocked nose and a headache.

What would you recommend?

For each part of this scenario, think about the decision you would make and, importantly, why you would choose that option. In addition, for each decision that you make, think about how you would talk to the customer and provide the necessary advice, and discuss this with your team and pharmacist.

1. Explain that sinusitis is usually viral so will clear up on its own and there's nothing he can do to ease it.
2. Recommend a decongestant nasal spray to help unblock his nose and allow him to breathe more easily.

What if?
Oliver comments that his wife Jo, who is six months pregnant, has hayfever and asks whether the decongestant nasal spray will be suitable for her.

1. Yes, Jo can use the same product.
2. No, decongestants are not usually recommended for pregnant or breastfeeding women, but a sea water or saline nasal spray would be appropriate.

What if?
Oliver comes back to the pharmacy a week later as his symptoms haven't improved.

1. Tell him to continue using the decongestant nasal spray until it clears up.
2. Refer Oliver to the pharmacist for further advice.
3. Suggest another OTC product for him to try.

Go to www.tmmagazine.co.uk to submit your answers to these questions. When you pass, you'll be able to download a certificate to showcase your learning. You can also add this to your online, personalised learning log.

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