

RHINITIS PHARMACOLOGY

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The effectiveness of topical steroid therapy is assessed using clinical and patient assessment of changes in both objective and subjective symptoms obtained from clinical interviews and diaries. Subjective assessments are used to complement objective measures in nasal cytology, function, and biochemistry.

Instead of acquiring Afrin spray over the counter which worsens the situation, patients are encouraged to seek proper medical intervention where nurses will assess them using both subjective and objective measures for seasonal allergic rhinitis (SAR). Subjective assessments by patient and nurse will comprise symptom scores and overall therapeutic response evaluation whereas objective measures will include nasal cytology, nasal airway resistance, olfactory functions, nasal biochemistry and mucociliary clearance (Brozek et al.,2017). Intranasal topical glucocorticoids are effective in reducing both subjective and objective measures of allergic rhinitis and also decreases mediator release and cytokine immunoreactivity. Mometasone being a new glucocorticoid is efficient in managing the condition when administered intranasally. Those of age twelve years and older will be prescribed 200 µg mometasone furoate nasal spray (n=80) or placebo spray (N=41) to be used once in a day for a period of two weeks.

Mometasone furoate is more effective in subjective measures treatment of the condition than placebo in total symptom score, total nasal score, individual nasal symptom scores, and overall therapeutic response. In objective measures, mometasone furoate is also significant in mucociliary clearance, basophil, eosinophil and neutrophil counts, odor identification, albumin

and tryptase, NAR, and eosinophilic cationic protein (Klimet, et al.,2016). SAR subjective measures are improved by the use of mometasone furoate as well as the subjective treatment measures after the using mometasone furoate in the treatment of the condition.

References

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