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IS POST NASAL DRIP DRIVING YOU CRAZY?

* Do you have allergies? Is a sore throat and cough driving you to distraction? If you answered yes, chances are your **sore throat and cough might be symptoms of post nasal drip caused by allergic rhinitis**. The most common cause of rhinitis (runny nose) is allergy. **Symptoms of allergic rhinitis** include a runny nose, an itchy nose, sneezing and/or congestion, red and watery eyes, ear infections, fatigue, headaches and cough. Some people have chronic or year-round (perennial) rhinitis caused by both indoor environmental allergy to things like dust mites, pet dander, dust, mold, or cockroach droppings plus allergy to outdoor environmental pollen allergens or irritants and pollution. One of the **complications of chronic rhinitis is post nasal drip**.

* **Glands** in our nose and throat **always produces thin beneficial mucus to moisten and clean nasal membranes, trap foreign particles** so they aren't swept into our lungs, **humidify and warm the air** on its way to our lungs and **help fight infection**. Normally, we swallow this thin mucus without being aware of it. But **if the mucus gets thick** and there's a build-up of this mucus, or some other cause prevents thin mucus from draining, then **we have post nasal drip** down the back of the nose into the throat which can cause a sore throat and/or chronic cough.

* There are many **reasons nasal mucus thickens**: colds, flu, allergy, cold temperatures, pregnancy or other hormonal changes, smoke, even certain foods, spices or bright lights might trigger a build-up in nasal fluids. Sometimes medications like birth control pills or high blood pressure meds or sinus structural problems like a deviated septum can trigger this build-up. It's very common to have more post nasal drip during winter months due to indoor dryness, too.

* **Reasons normal thin mucus doesn't drain properly can include** swallowing problems caused by age, stress, narrowing of the throat due to tumors or other conditions such as stroke or muscular disorders. **Parents take note**: if you notice only one side of your child's nose has a thick discharge, ask your healthcare provider to check if a foreign object (like a bean, wad of paper, small piece of a toy, a crayon, etc.) is lodged in the nose. This is actually not uncommon with young children and can also result in post nasal drip.

* Healthy secretions or mucus is usually clear in color, but if the secretions change color from clear to yellow or green, it may indicate a bacterial sinus infection. **Colds or flu are caused by viruses** but colds and flu **can also cause secondary bacterial infections, such as sinus infections** which will increase post nasal drip. If you think you might have a sinus infection ask your healthcare provider if antibiotics will help.

* Because of the danger of chronic sore throat or cough it is **important to treat post nasal drip** immediately. The **best treatment is to find the cause and then eliminate that cause**. **If caused by colds or flu**, try to prevent these illnesses by getting a flu shot and developing good hygiene habits of washing hands well and frequently, covering a sneeze or cough in the crook of your arm rather than a hand, getting adequate sleep, eating healthy foods and avoiding contact with those who have flu or colds.

* **If post nasal drip is caused by allergy**, eliminate or avoid the allergens that cause your allergic symptoms. [For more information on eliminating allergens, email info@aafatexas.org]. Once you've identified your allergens, immunotherapy or allergy shots may be an excellent method to control the allergic rhinitis that is triggering your post nasal drip. Ask an immunology specialist if you're a good candidate for immunotherapy.

* There are **medications which can help control or relieve post nasal drip**. Prescription medications include **steroid nasal sprays**, the first line of medication treatment. Their use must be monitored and tapered off by the physician because long-term use may have significant side effects. **Oral steroids** like prednisone are also effective but because of their potential serious side effects they should only be used for a short period of time and even then only in patients where other control methods don't work. The newer **non-sedating OTC antihistamines** may help better than the old ones which actually caused the mucus to dry-up and thicken nasal secretions. **Spray OTC decongestants** are for short-term use only since they are addictive and have a re-bounce effect, and **oral OTC decongestants**, although beneficial to a degree, can cause problems for those with high blood pressure, glaucoma, heart, bladder or thyroid problems. For more information about asthma and allergy, email info@aafatexas.org or visit www.aafatexas.org

Upcoming AAFA-TX programs: 1) Applications and qualifications for the AAFA-TX Kareem Bacchus Merit Scholarships are available on our website www.aafatexas.org. Completed applications **MUST be returned to AAFA-TX before March 15, 2010**. 2) **April 9** "Asthma Management & Education" a continuing education program for nurses, respiratory therapists and educators worth 3 CEU. Chicago, IL. 3) **May 12** "Tools To Manage Your Asthma & Allergies" Citi Group, Irving, TX Andrew D. Beaty, MD, instructor 4) **May 15** "Manage Adolescent and Adult Asthma with a Team Approach: Apply NHLBI Guideline to Your Practice" a CME symposium worth 4.5 category 1 credits (4.5 AOA category 1-B credits and 4.5 ACPE contact hours) for physicians, nurse practitioners, physician assistants, pharmacists, nurses and respiratory therapists. Arlington, TX. To register see <http://aafatexas.org/registration.htm> Questions? Visit www.aafatexas.org for complete symposium details or contact info@aafatexas.org

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