Breathe easy

If you have trouble breathing through your nose, you may be suffering from sinusitis, writes **Aneeta Sundararaj**

YOUR nose is blocked. You feel pain in the area just below your eyes. And it seems that you have been coming down with a cold too often. When you see the doctor, he says: "You've got sinusitis."

What does this mean?

"Sinusitis is a common condition that occurs when there's something blocking the opening to the sinus such as allergies, upper respiratory tract infections, polyps and tumours," says Datuk Dr Kuljit Singh, consultant ear, nose and throat specialist at Prince Court Medical Centre in Kuala Lumpur.

"The sinuses are air-contained cavities that connect the space between your nostrils and the nasal passage," he explains. In addition to insulating the human skull against compression pressure, the sinuses help to give resonance to our speech. There are four pairs of sinuses: Frontal sinuses, maxillary sinuses, ethmoid sinuses and sphenoid sinuses.

Tips for sufferers:

1. Avoid **dusty** places. If you have to work in a dusty area, wear a mask.
2. **Quit** smoking.
3. **Treat all infections** and allergies early.

PAIN AND HEADACHE

Sinusitis occurs when there is an inflammation of the membranes lining the sinuses. "The common symptoms are facial pain, green discharge, persistent sore throat, teeth pain and headache," he says.

"You must not confuse this with rhinitis," he warns. "Rhinitis occurs when there is an inflammation of the mucous membranes of the nose."

A diagnosis is made after examining the patient using a scope. "It's a painless procedure and the scope is no more than 4mm in diameter," says Dr Kuljit. "If the infection persists, I suggest that the patient undergo a CT scan to determine the extent of the problem."

TREATMENT OPTIONS

Currently, there are three treatment options. For the first, the patient is prescribed simple nasal sprays, antibiotics or given a nasal saline wash.

In cases of chronic sinusitis, a more traditional approach is carried out. Dr Kuljit refers to this as a "functional endoscope sinus surgery".

"This involves removing bone and tissue in the sinus or drilling a passage into the sinuses. It can be a painful procedure and there is a 27 per cent chance of the problem recurring. Sometimes, during the procedure, the use of sharp forceps can injure the paper-thin bone separating the eyeball and the nose."

NEW WAY

The third option is a relatively new procedure called "balloon sinuplasty" where a small, flexible, sinus balloon catheter is used to open up blocked sinus passageways. When the sinus balloon is inflated, it gently restructures and widens the walls of the passageway while maintaining the integrity of the sinus lining.

It was first introduced here in 2007. Since then, Dr Kuljit has carried out hundreds of cases of sinuplasty successfully.

"We copied this procedure from the cardiologists. Previously in cardiology, many believed that a diseased vessel had to be replaced. Angioplasty was not a favoured option then and was even considered a myth. Today, however, angioplasty has become the preferred option in cardiology. Likewise, we are now seeing that balloon sinuplasty has better results."

Dr Kuljit cautions: "It's not a foolproof procedure. There is a seven per cent chance of the problem recurring and you cannot carry out sinuplasty in certain cases. In situations where there are polyps or a tumour, the patient may still have to undergo surgery."

Furthermore, unlike cardiology (where medication can be delivered directly to the heart muscle), it is not possible at present to deliver drugs like steroids, anti-fungal medication and antibiotics to the affected sinuses.

The biggest drawback for sinuplasty remains the cost as it can easily set a patient back by about RM15,000. Nevertheless, Dr Kuljit remains optimistic. In his words, "there is almost no bleeding, no pain and the patient gets relief the moment he is back in the ward".

One of the common symptoms for sinusitis is headache

Obesity rates down with recession

THE number of people who have become dangerously overweight has halved. People are not only tightening their belts financially - obesity figures have fallen since the start of the recession.

A study has found that the number of people who have become dangerously overweight halved in the three years after the financial crisis of 2007.

The results have baffled researchers because they had expected waistlines to expand as the economic downturn affected family incomes. Previous studies have found that people with less money tend to buy foods which are cheaper but higher in calories - such as takeaways and prepackaged meals — which is why poorer families are more likely to gain weight.

Academics do not yet know why the most recent research appears to suggest that having less money reduces the number of people becoming fat.

But the effect was seen regardless of family income, which suggests a general trend across the population and could be a sign that the healthy-eating message is having an impact at a time when people are being more careful about how they shop.

Researchers used information collected from a study of 350,000 adults across the United States.

People were asked for their height and weight, which allows researchers to calculate their Body Mass Index (BMI). The World Health Organisation considers a person obese if they have a BMI score of 30 or over, and overweight if they have a score of between 25 and 30.

The number of people who have become dangerously overweight has halved

The Arizona State University researchers said: "In all but the poorest income group, the annual increase in BMI decelerated substantially during the recession. There is little evidence that the economic downturn has exacerbated obesity by causing people to consume cheaper foods."

Obesity rates in Britain and the US have been rising for 20 years. As many as a quarter of all Britons are officially classed as so overweight it threatens their health, and British women are the fattest in Europe. **Daily Mail**