

Complementary therapy self-care information for patients

Catarrh and sinusitis

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Summary

Although there is a lack of gold standard research evidence in this area, we both experience that the therapies listed here can be useful in everyday healthcare. We believe the relevant information should be made available if there is some evidence of benefit, positive clinical experience, an absence of safety concerns and patients wish to try them. Hence the return of this popular series on the evidence-informed potential for trying complementary therapies and self-care approaches.

Catarrh – a rather old-fashioned term for over-production of mucus – can be in response to infection or an allergy or – so it is often said, because a person is eating a ‘mucus-producing diet’. (The idea is controversial but anecdotal evidence suggests that persistent ‘catarrh’ is sometimes due to a food intolerance). Allergy to pollen, house dust mite or animal dander (the dead skin shed by pets) is certainly a common cause, and this would usually stop once exposure to the allergen ceases.

The sinuses are hollow air-filled cavities in the head situated behind the nose and eyes and in the cheeks and forehead. They make the skull lighter. The cavities are lined with mucus-secreting membrane and are connected to the nasal cavity by narrow channels. If the sinuses become inflamed, the condition is known as sinusitis. If the channels that connect the sinuses to the nose become blocked, mucus can collect in the sinuses causing a build up of pressure and pain possibly accompanied by a raised temperature.

Acute sinusitis is usually caused by a virus. As with colds, the immune system generally deals with the virus within a couple of weeks. Antibiotics do not kill viruses, and even if the infection is bacterial, the immune

system will usually clear it up. So antibiotics are not needed for most cases of acute sinusitis and most GPs will not prescribe them. So are there other options?

Chronic sinusitis lasts more than 12 weeks or may be a recurring problem. It is an uncommon cause of headaches. If you suffer this way, knowing why you are susceptible and what might be triggering attacks could help prevent them.

Blockage of the sinus channels is more likely in people with an abnormality of the nose, such as a deviated nasal septum or nasal polyps.

Harmless airborne substances trigger allergic reactions in some people. People with allergies such as hay fever are more likely to suffer from catarrh and develop sinusitis. Some allergens, notably pollen, cause seasonal rhinitis. This affects one in five people; half also suffer from asthma and many people get eczema too. Non-seasonal allergens can cause perennial rhinitis possibly due to allergies that include dust mites, fungus spores, animal dander and workplaces irritants such as wood dust and chemicals. Allergy tests would be useful, but are not always accurate.

It has been proposed that over-breathing (which may cause the problem or be due to breathing

difficulties connected to having a blocked nose) can increase nasal congestion (James 2005). Over-breathing (with the upper chest) could be due to anxiety, posture or simple habit. Learning slow breathing techniques could be helpful.

Catarhal children may develop 'glue ear'. Ask your doctor to order a hearing test if you or teachers at school suspect your child has a mild hearing problem. Children who are breast-fed seem to be less prone to glue ear – possibly because the shorter teats on bottles fail to exercise muscles that open the eustachian tubes through which middle ear normally drain away).

Symptoms

Symptoms of catarrh include:

- a persistently runny or blocked nose
- a cough and irritation caused by mucus running down the back of the throat
- mouth-breathing.

Symptoms of sinusitis include:

- pain and tenderness in the face that may be worse when bending forward
- nasal discharge
- nasal congestion or blockage
- headache and possibly toothache, if the sinuses behind the cheeks are affected
- raised temperature.

Caution: See your doctor if symptoms do not improve within three days.

Evidence rankings

- ☹️ Anecdotal or traditional evidence only to suggest this might be worth trying, but trials in this area are lacking – likely safe
- ☹️☹️ Minimal research to suggest this might be worth trying, but no firm conclusion can be drawn – likely safe
- ☹️☹️☹️ Some positive findings from research to suggest this is worth trying – likely safe

Movement and muscle approaches

Osteopathy ☹️

Cranial osteopaths gently manipulate the skull of a child with glue ear to improve fluid drainage through the middle ear.

Naturopathy ☹️

A naturopath might suggest hot showers, mustard baths, saunas, and steam baths to help clear mucus. For sinusitis, holding hot packs or menthol or eucalyptus packs over the forehead and cheeks might be suggested.

Metabolic approaches

Nasal irrigation ☹️☹️

Clinical research shows that administering nasal saline irrigation significantly reduces symptoms of chronic sinusitis and improves quality of life, compared to no treatment or placebo (Harvey *et al* 2005).

Western herbalism ☹️

Practitioners might suggest echinacea to help boost the immune system, although it should not be taken for more than 8 weeks at a time.³ A herbalist (or an aromatherapist) might advise adding lemon, eucalyptus, or cedarwood essential oils to bathwater. Or for sinusitis, a steam inhalation with eucalyptus, lavender, or tea tree oil. Olbas Oil is a popular choice. CAUTION: If you have asthma, inhalations might possibly trigger an attack.

Nutritional therapies ☹️

Allergies and/or food intolerances could contribute to excess mucous production and sinusitis. It is important to understand the difference between an inhaled (eg house dust mite) allergy which can inflame the mucus membranes directly, and a food intolerance to a substance such as wheat or milk which affects the immune system but not in the same way as an allergy. Inhalant allergies can be detected by blood tests; food intolerances cannot be reliably identified in this way. So keeping a food diary is the most reliable (but difficult to follow) way to identify whether certain foods make symptoms worse. Foods that people are commonly intolerant to include milk, wheat, eggs and citrus fruits. Clinical experience suggests that some children are less catarhal if sugar and/or dairy are reduced (CAUTION: dairy foods are a major source of essential calcium). (Wüthrich *et al* 2005).

Food intolerance is a genuine problem but its role in mucus over-production remains unclear so more research is needed. Nutritional therapists consider food intolerances to be related to underlying digestive issues such as intestinal permeability (leaky gut) and suggest a '4R programme': removal of the likely irritants plus supplementation with digestive enzymes, probiotics and substances that soothe the gastro-intestinal mucosa. A nutritional therapist could offer personalised advice if you have reason to suspect an intolerance but this is unlikely to be available in the NHS.

Probiotics ☹️☹️

Initial studies exploring the use of the probiotic *Enterococcus faecalis* bacteria to treat sinus inflammation appear promising, but further studies are needed (Vouloumanou *et al* 2009).

Bromelain ☹️☹️ (caution side effects)

Bromelain (extracted from pineapple plant) can reduce inflammation/swelling. Some studies report It might be a useful addition to other therapies used for sinusitis (such

as antibiotics) for reducing swelling and improving breathing (Braun *et al* 2005). There are reports of allergic and asthmatic reactions to bromelain products, including throat swelling and difficulty breathing. (Allergic reactions to bromelain are more likely in individuals allergic to pineapples or other members of the Bromeliaceae family, but caution should be advised in anyone with allergies).

Avoid bromelain in pregnancy or if breastfeeding.

Sinupret 😊😊

In Germany this herbal formula has been widely prescribed for 70 years as a ‘mucoactive’ agent for the symptoms of respiratory infections. A systematic review of research evidence suggests sinupret ‘combined with standard antibacterial therapy, significantly reduces the acute symptoms and signs of sinusitis’ (Melzer *et al* 2006).

Homeopathy 😊

There is limited evidence to suggest homeopathy helps people with sinusitis, but clinical experience suggests it may so further trials are needed (Witt *et al* 2009).

Homeopaths say there are no reliable guidelines for over the counter purchasing; the remedy has to be expertly chosen. Various remedies traditionally recommended for symptoms, include Kali bich, for thick stringy discharge, Stica pulmonaria for chronic sinusitis, and Pulsatilla for a creamy discharge. Tub Bov is a nosode that homeopaths say can help reduce mucus production.

Mind and mood approaches

A study (from some years ago but still of interest) of 128 patients with perennial rhinitis or hay fever concluded that psychological factors are of much more significance in perennial rhinitis than in hay fever (Czubalski and Zawisza 1976). The link might be due to overbreathing due to anxiety.

Relaxation and breathing techniques 😊

If stress is a factor then techniques to help you to relax at will could help reduce stress and tension that make you more susceptible to respiratory infections that lead to sinusitis and overbreathing.

Self-help techniques

- If you are a smoker, stop. Smokers are more prone to catarrh and sinusitis.
- Consider trying essential oil steam inhalations (not recommended for people with asthma).
- Don't use an over the counter nasal spray containing a decongestant for more than three days because the mucus membrane swelling may get worse when you stop using the medicine (rebound rhinitis).
- Practice stress management skills daily, be sure that you get plenty of restful sleep and make time to relax each day, even if only for half an hour. Learn relaxation and slow breathing techniques.
- If airborne allergies are a problem try to stay inside and keep windows closed, especially mid-morning and early evening, when the pollen count is highest.
- Vacuum regularly and dust surfaces with a damp cloth.
- Keep any pets out of bedrooms.
- Splash your face with water to flush away pollen and dust.
- Shower and wash your hair to remove pollen each evening.
- Cover your bed during the day.
- Wash bedding and pillows at over 140°F (60°C) to kill dust mites.

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