

Study: No link between depression, nasal obstruction

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While mood disorders like depression or anxiety tend to negatively affect treatment for allergies and chronic rhinosinusitis, the same cannot be said for patients with nasal obstructions such as deviated septum, according to researchers at Henry Ford Hospital.

The new study shows [mood disorders](#) are not linked to either nasal obstructive symptoms or the failure of nasal obstruction surgery.

Results also suggest that those patients with nasal obstruction caused by septal deviation – a blockage of the nasal airway caused by a portion of cartilage or bony septum – who do not have signs and symptoms of allergic rhinitis would not benefit from depression screening if nasal treatment is unsuccessful.

"Although the literature supports more negative outcomes of allergic rhinitis and chronic rhinosinusitis patients with mood disorders, our data does not show a similar relationship for septal deviation," says study author Lamont R. Jones, M.D., vice chair, Department of Otolaryngology-Head and Neck Surgery at Henry Ford.

"It's unclear why depression would exacerbate symptoms after certain nasal procedures, but not others; although it's very likely that the difference could be due to the inflammatory nature of rhinosinusitis and seasonal allergies."

The study will be presented this week at the Combined

Otolaryngological Spring Meetings in San Diego.

Nasal obstruction is a common complaint among patients in otolaryngology (ear, nose and throat) clinics. It is often caused by inflammation from inhalant allergies, mucosal edema from chronic rhinosinusitis, and mechanical obstruction from a deflected [septum](#).

Treatment ranges from nasal saline irrigations, topical corticosteroid sprays, [allergy](#) control and surgery. Yet some patients lack long-lasting benefit from treatment. According to some research reports, many of these difficult-to-treat nasal patients may also have a mood disorder.

While the effect of [depression](#) on chronic rhinosinusitis has been widely reported – with patients requiring longer follow-up and having less satisfaction with nasal and sinus surgery outcome – little is known about the effect of mood disorders on nasal obstruction symptoms and surgical outcomes.

To determine if there might be a possible link between surgical failure of non-allergic nasal obstruction and a co-morbid mood disorder, Dr. Jones and Brandon Musgrave, M.D., conducted a retrospective review of 437 patients who had surgery between 2005 and 2010 for septal deviation at Henry Ford.

Among the patients, 398 (91 percent) had a successful surgical outcome for nasal obstruction, while 39 (nearly 9 percent) did not.

Within the surgical success group, 31 percent had a co-morbid mood disorder, compared to 36 percent of the surgical failures. The researchers note, however, that this difference in mood disorder prevalence was not statistically significant.

According to study findings, the only significant result was that

successfully treated [nasal obstruction](#) patients had shorter post-operative follow up.

That finding, notes Dr. Jones, is to be expected as patients with persistent nasal symptoms are more likely to continue following up with their surgeon for potential relief.

Provided by Henry Ford Health System

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