

Verapamil benefits chronic rhinosinusitis with nasal polyps

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(HealthDay)—For patients with chronic rhinosinusitis with nasal polyps

(CRSwNP), the first-generation inhibitor of epithelial P-glycoprotein (P-gp; an efflux pump that is overexpressed in CRSwNP), verapamil hydrochloride (HCl), is associated with improvement in outcome measures, according to a letter to the editor study published online Jan. 23 in the *Journal of Allergy and Clinical Immunology*.

Marcel M. Miyake, M.D., from Harvard Medical School in Boston, and colleagues conducted a randomized placebo-controlled trial comparing oral verapamil HCl to placebo over eight weeks. Patients were followed up at weeks two, four, and eight. Eighteen [patients](#) completed the study: 10 from the verapamil group and eight from the placebo group.

The researchers found that from baseline to week eight, the least squares mean change in the validated disease-specific 22-item Sinonasal Outcome Test was -27.3 and 0.4 in the verapamil and placebo groups, respectively, resulting in a final difference between the groups of -27.7 ($P = 0.01$). The final least squares mean between-group difference in visual analogue scale score was -37.97 ($P = 0.001$). There was a significant difference favoring the verapamil group in the Lund-Mackay computed tomography score (absolute mean difference, -5.20 ; $P = 0.02$). The verapamil group also had a significant reduction in total Lund-Kennedy endoscopic score at week four (least mean squares difference of -2.8 between the groups; $P = 0.003$).

"Our data demonstrate that low-dose verapamil monotherapy is well tolerated by patients, with [fewer] side effects and lower costs than those reported in previous studies using biologic agents," the authors write.

Several authors disclosed financial ties to medical technology companies; one author provided expert testimony on ENT-related cases, and has a patent for P-gp inhibition for [chronic rhinosinusitis](#).

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