

For the Patient

The full report is titled “Chronic rhinosinusitis with nasal polyps management in the age of biologics.” It is in the November 2020 issue of the *Allergy Asthma Proceedings* (volume 41, pages 413 to 419). The author is Michael Blaiss.

For the Patient is provided to physicians so that the patients can better understand the language of modern medicine.

For the Patient is written by the editors (Bellanti, JA and Settignano, RA) and provided to practitioners so that patients can better understand the usefulness of new information resulting from medical research.

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CHRONIC RHINOSINUSITIS WITH NASAL POLYPS MANAGEMENT IN THE AGE OF BIOLOGICS

Chronic rhinosinusitis (CRS) is a condition that occurs when the spaces inside the nose and head (sinuses) are swollen and inflamed for ≥ 3 months, despite treatment. This common disorder can be brought about by conditions that lead to swelling of the lining of sinuses, such as allergy, infection, or growths, called nasal polyps, within the sinuses. This common condition interferes with the way mucus normally drains the sinuses, which makes breathing through the nose difficult. CRS is seen both in children and adults, and can occur with or without the presence of polyps and together affect $>10\%$ of the Western population. CRS has long been managed by topical and/or systemic corticosteroids and sinus surgery, if steroids are unsuccessful. Recently, a number of new therapies, referred to as biologics, have become available for the treatment of many conditions, including the allergic disorders and CRS. These are agents that target inflammatory molecules that cause these disorders. By targeting these molecules, biologics work to disrupt the pathways that lead to inflammation that causes symptoms. In the case of CRS, biologics lead to a reduction of the disease burden caused by polyp size and sinus involvement, and result in symptom improvement and an important increase in quality of life. In a recent report, Blaiss, a clinical professor of pediatrics at the Medical College of Georgia in Augusta, Georgia, studied the current status of the use of the biologics for the treatment of CRS with nasal polyps.

Why Did the Researcher Do This Particular Study?

The study was done to assess where biologics that affect the inflammatory pathways that contribute to CRS with nasal polyps fit into the therapeutic regimen of agents available for the treatment of this disorder.

Who or What Was Studied?

The study was an analysis of recent studies on the efficacy and safety of biologics in comparison with other treatment modalities used for therapy of this condition.

How Was the Study Done?

The study was performed by review of the literature on the standard-of-care measures and surgical interventions in CRS with nasal polyps.

What Were the Limitations of the Study?

The report emanated from a single center.

What Are the Implications of the Study?

This study identified that biologics not only play a significant role in the management of CRS with nasal polyps but also that shared decision-making should be used in determining whether biologics should be started instead of an initial surgical intervention in patients in whom standard-of-care medical management had failed. In patients for whom surgery has already failed and in patients with moderate-to-severe symptoms associated with related disease comorbidities, *e.g.*, asthma, a trial of biologics is suggested as a rational therapeutic choice. □