

Recognizing and Treating Nonallergic Rhinitis

AMA/CME Test 225

(Test valid through August 31, 2003)

CONTINUING MEDICAL EDUCATION

Goal

To increase physician awareness of the prevalence of nonallergic rhinitis (NAR) in women so that patients can receive more appropriate diagnosis and treatment.

Objectives

1. To raise physicians' index of suspicion for NAR when assessing women who present with persistent rhinitis, especially in association with hormonal changes (eg, menstruation, pregnancy, oral contraceptive use).
2. To emphasize the importance of history in diagnosing NAR, particularly with regard to environmental triggers, and the use of tests to rule out other disorders.
3. To promote a therapeutic approach that favors azelastine and corticosteroid nasal sprays over oral antihistamines, as most patients have both NAR and AR.

Accreditation

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of Albert Einstein College of Medicine and Quadrant HealthCom Inc. Albert Einstein College of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

This activity has been peer reviewed and approved by Brian Cohen, MD, professor of clinical OB/GYN, Albert Einstein College of Medicine. Review date: July 2002. It is designed for Primary Care Physicians.

The Albert Einstein College of Medicine designates this educational activity for a maximum of 1 hour in category 1 credit toward the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she spent in the educational activity. Participants who answer 70% or more of the questions correctly will obtain credit.

To earn credit, see the instructions on page 53 and mail your answers according to the instructions on page 54.

DISCLOSURE

The Faculty Disclosure Policy of the College of Medicine requires that faculty participating in a CME activity disclose to the audience any relationship with a pharmaceutical or equipment company that might pose a potential, apparent, or real conflict of interest with regard to their contribution to the activity. This disclosure also applies to any discussion of unlabeled or investigational use of any commercial product or device not yet approved in the United States. Dr. Kaliner reports that he has received grant/research support from GlaxoSmithKline, Aventis Pharmaceuticals, Schering Corporation, Pfizer Inc, Wallace Pharmaceuticals, AstraZeneca, Merck, and Muro Pharmaceutical, Inc; he is a consultant on the advisory board for GlaxoSmithKline, Novartis, Genentech, Inc, and Aventis Pharmaceuticals; and he is on the speaker's bureau for GlaxoSmithKline, Aventis Pharmaceuticals, Novartis, Schering Corporation, Pfizer Inc, Wallace Pharmaceuticals, AstraZeneca, Merck, and Muro Pharmaceutical, Inc. Dr. Brian Cohen reports no conflict of interest.

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This activity has been planned and produced in accordance with ACCME Essentials.
The estimated time to complete this activity is 1 hour.

Instructions: Read the article beginning on page 29 and select the best answer for each of the following questions. Test form and mailing instructions are on the next page.

1. One possible indication that physicians are under-diagnosing nonallergic rhinitis (NAR) is that:
 - a. about 75% of patients have inconclusive skin-test results.
 - b. more than 66% of patients have rhinitis year-round.
 - c. only 25% of patients undergoing treatment for allergic rhinitis (AR) report adequate control of their symptoms.
 - d. almost 33% of patients require three to five different medications to control their rhinitis.
2. With regard to the US incidence, the ratio of AR to NAR is estimated at:
 - a. 3:1.
 - b. 1:1.
 - c. 2:3.
 - d. 2:1.
3. According to the research, what percentage of NAR patients are women?
 - a. About 50%
 - b. Almost 90%
 - c. Fewer than 10%
 - d. More than 70%
4. Nasal congestion and hypersecretion have been associated with:
 - a. oral contraceptive use.
 - b. use of hormone replacement therapy.
 - c. pregnancy.
 - d. all of the above.
5. The most prominent symptom of vasomotor rhinitis (VMR) is:
 - a. postnasal drip.
 - b. nasal congestion.
 - c. episodes of repeated sneezing.
 - d. persistent rhinorrhea.
6. Rhinitis with pale, boggy turbinates accompanied by symptoms of asthma and dermatitis tend to suggest:
 - a. AR.
 - b. NAR.
 - c. VMR.
 - d. mixed rhinitis.
7. Diagnostic studies are most useful in the clinical setting when:
 - a. radioallergosorbent testing shows a rise in serum immunoglobulin E levels in response to certain allergens.
 - b. rhinitis can be triggered in the office using stimuli such as perfume, tobacco smoke, and paint remover.
 - c. there is a strong, positive skin reaction to specific allergens.
 - d. a nasal smear shows the presence of eosinophils.
8. Azelastine plus a corticosteroid nasal spray is a good empiric choice for first-line therapy because most NAR patients:
 - a. need an agent that specifically addresses VMR.
 - b. have an AR component.
 - c. have severe nasal inflammation.
 - d. have a poor response to azelastine alone.
9. Patients with NAR and severe rhinorrhea often respond well to:
 - a. a combination of a steroid nasal spray and an oral antihistamine.
 - b. oral prednisone plus azelastine.
 - c. oral prednisone and allergy immunization injections.
 - d. a combination of intranasal ipratropium and a corticosteroid spray.
10. While pregnant patients with NAR are best treated nonpharmacologically with saline nasal spray, steam inhalation, and adhesive strips that help to keep the nares open, severe cases may require:
 - a. oral prednisone.
 - b. cortisone injections.
 - c. corticosteroid nasal sprays.
 - d. surgical drainage of the nasal sinuses.

The FEMALE PATIENT® / Test 225

Recognizing and Treating Nonallergic Rhinitis Michael A. Kaliner, MD

(Test valid through August 31, 2003. No credit will be given after that date.)

Record your answers here by circling the appropriate letter:

1. a b c d
2. a b c d
3. a b c d
4. a b c d
5. a b c d
6. a b c d
7. a b c d
8. a b c d
9. a b c d
10. a b c d

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I have read this article and completed this activity in _____ hours.

Signature

Date

For you to obtain credit, 70% or more of your answers must be correct. To cover costs of processing, please enclose a check for \$10, which is tax-deductible, payable to the Division of Continuing Medical Education (TFP), and mail with this answer sheet to:

TFP-CME BOX #2
QUADRANT HEALTHCOM INC.
26 Main St., Chatham, NJ 07928-2402

Participants will receive certification for their records in approximately 10 to 12 weeks.

Course Evaluation

Albert Einstein College of Medicine would like to have your opinion. Your evaluation will help us to plan future CME tests for *The Female Patient*®. We urge you to complete this questionnaire and mail it back to us with your completed test. Thank you for your cooperation.

1. How do you rate the information in this article?
 Superior Satisfactory Unsatisfactory
2. Will the materials presented influence the way you treat your patients?
 Yes No
3. Did this activity meet its objectives?
 Yes No
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 Yes No

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 Yes No

Comments

