

Sinus Infections and CLL

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Brad:

My name is Brad. I live in Friendswood, southeast of the city. I have two questions.

And the second question is you've mentioned sinus infections quite a bit, which I have had a problem with anyway. Do you go to your ENT for a sinus infection? Do you come here for a sinus infection? What would you recommend? Certainly with severe infections I can understand, but is that a gray area? And it looks like Alice is going to get to answer that.

Andrew Schorr:

What about sinus infections Alice?

Alice Lynn:

Well, I think sinus infections have been related to CLL. A lot of our CLL patients have chronic sinus infections. It's always good to have an expert ENT physician to look in your sinuses to see if this is inflammation, or is this allergies? Or is this a really good infection? So I think it's good to have an outside doctor, besides your hematologist-oncologist treating your sinuses.

Andrew Schorr:

Okay. I'll just mention that every time I got a cold, in the first few years after FCR, I would always get a sinus infection. And I always had to press my local doctor, my GP. And I said, you know, I'm

not the garden variety immune system in that, and typically he would prescribe an antibiotic, usually often a longer course, and then that worked. So, okay medicines?

Dr. Keating:

The reason that we give patients a longer course is that the antibiotics don't work. And so they give it for a longer period of time, and so that'll fix it up.

But the mechanism that people get sinus infection is that the mucous that is produced in the sinus has to get out of tiny little holes. And if you have inflammation, that hole closes off. And any organ in the body that there is a closing off of, the drainage system gets super infected.

So the antibiotics will not work unless you get adequate drainage, and that often requires what we call triple therapy, that is that you use for a few days morning and evening, a decongestant like pseudoephedrine (Afrin) or Vicks, etc. And then a half an hour later, use inhalations or get in the shower and inhale as much liquid as you can or use neti pots.

And after another half an hour or so, you've been able to clear the nasal passages of all that mucous.

Because if you just squirt steroids in there, it just hits the mucous and doesn't get to the surface. So you wait until that's all cleared out, and then you use the steroid nasal spray. And if there's a lot of yellow and greenie junk, you can do the antibiotics. But unless you drain it, it's not going to work.

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