124

190 Pathology of allergic rhinitis

- A Oedematous swelling of the mucosa occurs.
- B There is infiltration with giant epithelioid cells.
- C Seromucinous glands atrophy.
- D Venous stasis results in a dusky swelling of the inferior turbinates.
- E Polyp formation is a rare complication.

191 Clinical features of allergic rhinitis

- A Symptoms may be seasonal or perennial.
- B Age of onset is usually in the fourth decade.
- C Anosmia is the main complaint.
- D Sneezing attacks may be incapacitating.
- E Polyps should be suspected if nasal obstruction is permanent.

192 Treatment of allergic rhinitis

- A Avoidance of allergens is frequently impractical.
- B Desensitization based on skin testing is useful in some cases of hav fever.
- C Vasoconstrictor drops provide effective immediate relief.
- D Sedation is the major side effect of antihistamines.
- E Local steroids and sodium cromoglycate both act to reduce the hypersensitivity reaction.

193 Surgical treatment of allergic rhinitis

- A Is preferable to long term medication in children.
- B Is indicated where chronic nasal obstruction is due to polyps.
- C Adenoidectomy is the first line of treatment in children.
- D Reduction of inferior turbinates is indicated for sneezing.
- E Vidian neurectomy can be performed by a transantral approach.