

CT SCAN USE IN AN ALLERGY OFFICE FOR POLYPS

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ABSTRACT:

Purpose

Polyps may be visible on otoscopic or endoscopic nasal examination when they are in the nasal cavity or protruding into the nasal cavities from sinuses. Nasal endoscopy is done by some allergists but mostly by otolaryngologists. Swollen turbinates can easily be confused for polyps on otoscopic examination. Polyps not protruding into the nasal cavities (Maxillary, Frontal, Ethmoid and Sphenoid Polyps) cannot be visualized even by endoscopic exam.

Methods

We retrospectively reviewed Sinus CT Scans done in 2009 for presumptive diagnosis of sinusitis and polyps in a busy allergy practice in Central California. Xoran MiniCAT was used for imaging. Patient data base was also searched for patients who were thought to have sinusitis and nasal polyps on clinical history and nasal examination but CT scan was not done because of insurance denial or financial reasons.

Results

3276 patients were diagnosed clinically with either sinusitis or polyps in 2009. Out of these 765 patients had a CT scan done and 676 (88%) were found to have polyps. The mean age was 45 years with gender distribution being 36% male and 64% female.

Conclusion

88% of patients who had the CT scan done were positive for polyps. Considering this high percentage of polyp prevalence on imaging, it's concluded that a large number of all the patients who are seen for sinusitis and polyps are missed due to lack of access to CT Scans either because of not being readily available to allergists or because of insurance restrictions. Upright CT scan use exposed patients to minimum radiation with great yield in diagnosing sinus polyps. Definitive diagnosis of polyps after having the scan done also significantly increased the treatment and follow up compliance in patients for nasal polyps.