

## Editorial

This December issue is wide-reaching in its content but has a strong emphasis on diagnosis. Following hard on the heels of EPOS2012<sup>(1)</sup>, we have the Executive Summary of the European Task Force on Diagnostic Tools in Rhinology, authored by some of the 'usual suspects' but with an additional allergic perspective<sup>(2)</sup>. The importance of an accurate history however, is correctly emphasised with the use of a wide range of quality of life instruments to quantify and qualify the impact of the symptoms. The increasing emphasis on QoL by clinicians, patients and politicians is to be commended and allows everyone to engage in sequential assessment of outcomes without recourse to expensive and/or complex instrumentation. However, there is also a range of simple tests that can be undertaken in most clinics such as nasal inspiratory peak flow (NIPF), a wide range of smell tests and saccharine transit time to consider mucociliary clearance which have been available for a long time.

Notwithstanding this, normative data for some of these tests has been relatively slow in coming. Chaves et al and Ottaviano and colleagues attempt to redress some of these previous omissions with their studies of nasal airflow using NIPF in children and adolescents and by undertaking the assessment of one side versus both sides of the nose<sup>(3,4)</sup>. It is also important to consider whether there may be geographical/ethnic differences<sup>(5)</sup> so there is still a wealth of opportunity for any young investigator looking for a straightforward project. Given the simplicity of NIPF and the fact that it correlates reasonably well with rhinomanometry<sup>(6)</sup>, it seems extraordinary to me that the majority of septal and turbinate surgery is still undertaken around the world without any objective confirmation of genuine mechanical obstruction. As demonstrated by Holmström<sup>(7)</sup> it cannot be a surprise to discover that patients who have objective evidence of blockage get better results from septal surgery than those who don't!

The saccharin test has been around for nearly 40 years and remains one of the few tests to assess the entire nasomucocili-

### Diagnosis is not the end, but the beginning of practice.

*Martin Fischer 1879-1962*

*US Physician*

ary clearance (NMCC) system<sup>(8)</sup>. Ciliary beat frequency, expired nitric oxide and electron microscopy may all assist in confirming ciliary problems but screening with the simple saccharin test should not be forgotten. Impaired NMCC, be it primary or secondary, may explain why patients are predisposed to chronic rhinosinusitis but unfortunately does not generally correlate with symptoms such as rhinorrhoea or post-nasal discharge.

Similarly, the difficulties of correlating objective tests with symptoms such as facial pain are highlighted by Amir et al in their audit of CT scans<sup>(9)</sup>. As in previous studies<sup>(1,10,11)</sup>, they again demonstrate that facial pain in the absence of endoscopic findings and other symptoms of chronic rhinosinusitis is rarely supported by evidence of inflammatory change on CT. The application of EPOS 2012 and International Headache Society criteria will reduce the number of patients submitted to unnecessary scans<sup>(1,12)</sup>.

Many of you will know how much an editor relies on the able assistance of their colleagues in the many tasks that make up the production of a journal and I am particularly fortunate in this respect. It seems therefore, a more than appropriate moment to invite Professor Fokkens to join me as Co-Editor and to promote Professor Hellings to be Associate Editor. As a consequence, in future you may receive correspondence from any one of us as well as from our new Rhinology Secretary, Mrs Judith Kosman. I would also like to take this opportunity to thank Mrs Margalith van Huiden for all her help in recent times and for the continued support from our Managing Editor, Dr Wilfred Germeraad.

And finally on behalf of the journal, I would like to wish all our contributors, readers, Editorial Board and reviewers and the entire membership of ERS the very best compliments of the season and peace and prosperity in 2013.

## References

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