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# Reply to: Nasal endoscopy to characterize sinonasal disease

A.E.Dixon

M. Castro

R. I. Cohen Zucker School of Medicine at Hofstra/Northwell

L. B. Gerald

J. T. Holbrook

See next page for additional authors

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#### Authors

A. E. Dixon, M. Castro, R. I. Cohen, L. B. Gerald, J. T. Holbrook, C. G. Irvin, S. Mohapatra, S. P. Peters, S. Rayapudi, R. A. Wise, and +1 additional author



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## Reply

Anne E. Dixon, MA, BM, BCh<sup>a</sup>, Mario Castro, MD, MPH<sup>b</sup>, Rubin I. Cohen, MD<sup>c</sup>, Lynn B. Gerald, PhD, MPH<sup>d</sup>, Janet T. Holbrook, PhD<sup>e</sup>, Charles G. Irvin, PhD<sup>a</sup>, Shyam Mohapatra, PhD<sup>f</sup>, Stephen P. Peters, MD<sup>g</sup>, Sobharani Rayapudi, MD<sup>h</sup>, Elizabeth A. Sugar, PhD<sup>i</sup>, Robert A. Wise, MD<sup>h</sup>, and for the American Lung Association–Asthma Clinical Research Centers <sup>a</sup>Department of Medicine, University of Vermont, Burlington, Vt

<sup>b</sup>Department of Medicine, Washington University School of Medicine, St Louis, Mo

<sup>c</sup>The Thalheim Asthma Center Hofstra, North Shore-Long Island Jewish School of Medicine, New Hyde Park, NY

<sup>d</sup>Arizona Respiratory Center, Mel and Enid Zuckerman College of Public Health, University of Arizona, Tucson, Ariz

<sup>e</sup>Department of Epidemiology, Johns Hopkins University, Baltimore, Md

<sup>f</sup>Department of Medicine, University of South Florida, Tampa, Fla

<sup>g</sup>Section on Pulmonary, Critical Care, Allergy & Immunologic Diseases, Wake Forest University, Winston-Salem, NC

<sup>h</sup>Department of Medicine, Johns Hopkins University, Baltimore, Md

<sup>i</sup>Department of Biostatistics, Johns Hopkins University, Baltimore, Md

## To the Editor

We agree with Dr Lipworth<sup>1</sup> that our study does not address whether treating complex sinonasal disease documented by endoscopy would affect asthma outcomes. This was not the purpose of our study. The purpose of our study was to determine whether treating

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chronic sinonasal disease in a diverse patient population in a manner analogous to that widely practiced in non-tertiary care specialty practices would improve asthma control.<sup>2</sup>

Sinonasal disease was determined by using a validated questionnaire with high sensitivity and specificity for determining the presence of sinonasal disease, which was superior to endoscopy and computed tomographic imaging.<sup>3</sup> The reason for using a questionnaire rather than invasive testing to document disease was to mirror common clinical practice.

Research personnel were trained in drug administration, and these personnel instructed all participants in use of the study drug. Sinus symptoms improved significantly in adults, suggesting efficacy of the dose of medication used in this population. Our findings are entirely consistent with those of other multicenter studies of nasal steroids in the treatment of asthma.<sup>4,5</sup>

Our overall goal was to study the treatment of sinonasal disease in a diverse patient population with poorly controlled asthma to maximize the generalizability of the results to clinical practice rather than to test the unified airway disease hypothesis in a highly select group of patients.

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