



Avoiding sinus surgery, when possible, is a high-priority concern for Dr. Judge, here examining a new patient to discover the cause of his symptoms.

Dr. Gurdev (Dave) Judge, board-certified as an allergist/immunologist and a pediatrician, with offices in Cary, North Raleigh, and Wake Forest, often works closely with ENT surgeons when patients have serious sinus conditions.

“If the cause of chronic sinusitis is allergies, then it makes more sense to treat the cause, rather than the symptoms—once and for all!” he says. “The goal for any good allergist, including me, is to treat sinus related problems with all other means available except sinus surgery—which is the last resort—and we are successful most of the time.

“People never get sinus surgery unless it is absolutely required—and that is in instances of a blockage that needs to be removed, or an anatomical

defect—a deviated septum, for example—that needs surgical correction.

“Sinusitis is inflammation or infection of any of the four groups of air sinus cavities in the skull, which open into the nasal passages. Some patients never get a sinus infection in their entire lives, while others may have a half-dozen infections each year. Why the difference? No one really knows.

“This year,” adds Dr. Judge, “the number and severity of sinus infections continues to increase. The key, as we say repeatedly, is *prevention*—allergies lead to sinus infections. Avoid known allergens. Take your medication as prescribed.

“For people with sinus problems, surgery, generally speaking, is the last step. We have excellent antibiotics, and many more choices. Sometimes a first course of antibiotics is effective, sometimes a second course is needed, sometimes, more rarely, even a third course. Perhaps 85 percent of the patients respond positively to a first course of broad-

Surgery Is Last Resort in Treating Sinus Problems

acting antibiotics. However, proper diagnosis is essential. If a patient has allergic sinusitis or fungal sinusitis, they do not need antibiotics—they need different medication.

“If, in fact, a patient doesn’t respond favorably to these many treatment options, they may be a candidate for surgery. Certainly they need a work-up to determine if there is an anatomical problem, or perhaps a polyp in their nose, that is causing their misery.”

Health&Healing: When is immunotherapy—more commonly called allergy shots—indicated?

DR. JUDGE: Let us hypothesize a patient who has completed the very simple, quick, and effective allergy skin testing. The patient and I know what the allergens are, but that does not necessarily mean they are avoidable. This patient has severe discomfort, and so we may use antihistamines, or perhaps nasal steroids. The symptoms persist, despite these courses of treatment. In addition, there are medical complications. Perhaps the patient has hypertension, or prostate problems, contra-indicating the use of decongestant medication, for example. By this process of elimination of options, this patient becomes an excellent candidate for allergy vaccine injections.

Typically, a course of injections continues from three to five years, with varying levels of success. Initially, the patient may receive injections twice a week for a period of time. Later, that will ease to injections once a week, then once every two weeks or so. One-third of these patients achieve what they and we consider a “cure” for a very long period, perhaps for their lifetime. They are relieved of their allergy symptoms. There is really no cure for allergies; this is as close as you can come. One-third of the patients will achieve the same level of relief, but for a shorter period—perhaps for a few years. And effectiveness of the course of treatment is related to the allergic condition. For example, patients who have allergies to insect stings—honeybees, wasps, yellow-jackets—typically find immunotherapy effective at the 98 percent level. For those with allergic rhinitis, it’s effective about 85 percent of the time.

He&H: It seems that the incidence of allergies is on an upward curve.

DR. JUDGE: That’s true. One of every five Americans has an allergy or allergic rhinitis—which is a term describing the symptoms produced by nasal irritation or inflammation: runny nose, itching, sneezing,

and stuffy nose. Why so common? There are many theories. We love to garden, we love our trees and our pets. We have airtight houses and lots of dust mites. People seem to be working more and resting less, which depresses the immune system. We’re becoming more antiseptic, thus reducing our ability to fight off allergens and infectious agents.

He&H: Are air purifiers helpful?

DR. JUDGE: My patients often ask me that, and I always respond that it’s very beneficial to breathe clean, fresh air. But it’s important to get a system that will remove very tiny particles, as small as two microns, because much of what we are allergic to comes in very small sizes. **h&h**

IMMUNOTHERAPY: EFFECTIVE AND SAFE

Immunotherapy—“allergy shots,” which are an allergy vaccine—are an important option in the treatment of allergies, and are, says Dr. Judge, “both safe and effective. Most often, I recommend such treatment to patients who do not respond well to medications, have considerable side effects, or who have allergen exposure which is unavoidable.”

Dr. Judge reports that immunotherapy is effective for the treatment of asthma, allergic rhinitis, and insect venom allergies. “In a large study of results of immunotherapy injections from the Mayo Clinic over a 10-year period, the incidence of adverse reactions was less than two-tenths of one percent—and most reactions were mild and responded to immediate medical treatment,” he reports.

“As is true of many chronic diseases, you cannot cure allergies. But with avoidance, medications, and much-improved allergy vaccines you can keep them under excellent control. Patients with allergies certainly have the option of leading healthy and active lives, while preventing secondary damage to other organs.

For more information about diagnostic and treatment options for allergies, asthma, and sinus conditions, contact:

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