Patient 1: History

- CC: "I'm constantly clearing my throat"
- 72 year-old male
- Three month history of thick mucus in the back of throat
- Post-nasal drip (PND)
- No facial pain
- Intermittent nasal congestion, especially when lying down at night
- Thinks he may have some environmental allergies, but never tested
- Help me, doc!

Patient 1: Exam

- Nose: Swollen turbinates?
- Mouth/throat
- no erythema, no mucus
- ? Cobblestoning of posterior pharynx
- Sinuses: non-tender
- Neck: no adenopathy/tenderness

Patient 1: Exam

- Nose: Swollen turbinates?
- Mouth/throat:
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Patient 1: Exam: Turbinates

Patient 1: DDx: PND

- Sinusitis
- Allergic rhinitis
- Vasomotor rhinitis
- GERD: gastroesophageal reflux disease
- LPR: laryngopharyngeal reflux
- Pulmonary disease

Patient 1: Possible treatments

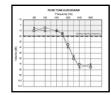
- Nasal irrigations
- Mucus thinning agents: guaifenesin
- Drying agents: ipratroprium spray
- Nasal steroid sprays
- Allergy: antihistamines
- Dietary: milk, gluten restriction
- GERD/LPR: anti-reflux regiment

Patient 2: Sudden Hearing Loss

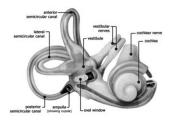
- 41 year-old female
- Sitting at breakfast table 1 week ago
- Right ear suddenly became blocked
- No ear pain or drainage
- No tinnitus or vertigo

Patient 2: Sudden Hearing Loss

- Unilatera
- Less than 30 days
- Normal external auditory canal and tympanic membrane
 - No wax
 - No infaction
- Sensorineural
- Tuning fork tests
- Audiogram



Patient 2: Sudden Hearing Loss



Patient 2: SHL: Treatment

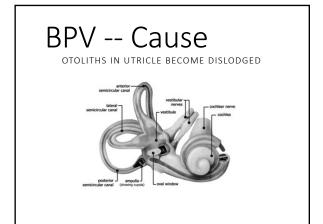
- Prednisone 60 mg taper (?2 weeks)
- Increases full recovery from 33% to 50%
- Consider: ENT referral for intra-tympanic steroid injections

Patient 3: Sudden Onset Vertigo

- 53 year-old female
- Became very dizzy when she got out of bed one week ago
- Severe dizziness lasted about 2 hours
- Mild nausea, but no vomiting
- Called covering physician who prescribed Antivert (meclizine)
- Is much better now, but still mild sensation of unsteadiness at times, especially when looking up (such as to reach for something on a high shelf) or turning over in bed
- No ear pain or drainage
- No tinnitus or noticeable hearing loss

Patient 3: BPV: Benign Positional Vertigo

- Benign Positional Vertigo vs. Positional Vertigo
- Nystagmus
- Dizziness exacerbated by rapid accelerating movements



Patient 3: BPV: Treatment

- Meclizine (Antivert)
- Phenergan
- Epley Maneuver (may need to be repeated after one week)
- Most vertigo is self-limiting
- ENT referral if persistent (>3 months)

Patient 4: Sinusitis

- 42 year-old female
- URI one month ago
- Persistent nasal congestion especially when lying down at night
- Mild cheek pressure throughout the day
- Discolored post-nasal drip
- No frontal headaches
- Sense of smell is subjectively intact
- Lethargy

Patient 4: Sinusitis: Thoughts

- Acute vs. Chronic
- Viral vs. Bacterial
- Triggered by infection vs. allergy

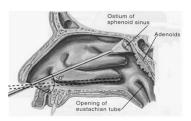
Patient 4: Sinusitis: Exam

- Swollen inferior turbinate
- Nasal mucus

Patient 5: Eustachian Tube Dysfunction

- 28 vear-old male
- CC: bilateral ear blockage for 6 months; worse past 2 months
- Normal otoscopy
- Normal hearing tuning fork test, audiogram
- No vertigo, tinnitus

Patient 5: Eustachian Tube Dysfunction



Eustachian Tube Dysfunction

Ear exam

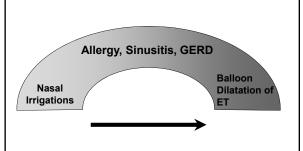
Valsalva maneuver

Decongestants, nasal steroid spray



Allergy, Sinusitis, GERD (LPR)

Patient 5: Eustachian Tube Dysf.



Patient 5: Eustachian Tube Dysfunction

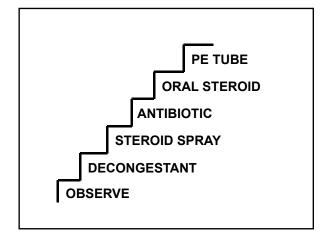
- Valsalva maneuver
- Nasal steroid sprays
- Oral decongestants
- Anti-reflux regimen
- Saline irrigations
- If severe, consider balloon dilation
- Recurrent middle ear effusions
- Barotrauma

Patient 5: Eustachian Tube Dysfunction

- Valsalva maneuvers
- Nasal steroid sprays
- Oral decongestants
- Anti-reflux regimen
- Saline irrigations
- If severe, consider balloon dilation
- Recurrent middle ear effusions
- Barotrauma

Patient 6: Middle Ear Effusion

How long do you follow an effusion before doing something about it?



Patient 7: Recurrent Sore Throat

- 23 year-old male
- CC: Sore throat 3-4 times a year
- Usually responds to antibiotic
- No history of reflux/heartburn
- No environmental allergies
- Non-smoker

Patient: Persistent Hoarseness

- 56 year-old male lawyer
- CC: Intermittent hoarseness for 6 months
- No recent URIs
- Occasional antacids for heartburn
- No environmental allergies
- Non-smoker