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LETTER TO THE EDITOR

Rhinosinusitis invisible in the IPCRG Research Needs Statement?

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Dear Sir.

With great interest I read the *PCRJ* supplement 'The International Primary Care Respiratory Group (IPCRG) Research Needs Statement' published in June this year.

However, to my great disappointment, the word 'rhinosinusitis' was invisible in this research needs paper. We now have (still unpublished) data from the GA2LEN questionnaire confirming that rhinosinusitis affects 10-20% of the European population.

Only recently, you published our primary care-focussed summary of the EPOS Guidelines.² In the summary of this paper we wrote:

"This paper is a summary of the 2007 European Position Paper on Rhinosinusitis and Nasal Polyps (EP3OS) which was published in *Rhinology* in 2007. In order to widen dissemination of the EP3OS paper, the editors of *Rhinology* and the *Primary Care Respiratory Journal (PCRJ)* have agreed to publish this summary – which is focussed on the needs of general practitioners and community-based non-specialist clinicians – in the *PCRJ*. In the EP3OS process, an evidence-based methodology was used to identify evidence and to grade recommendations for clinical practice for the management of rhinosinusitis. The EP3OS Taskforce was commissioned by the European Academy of Allergology and Clinical Immunology (EAACI) with the aims of:

- Presenting specialist and generalist clinicians with an updated summary of knowledge of rhinosinusitis and nasal polyposis
- Providing clinicians with an evidence-based summary of diagnostic methods appropriate for specialist and generalist settings
- Providing evidence-based recommendations for management in specialist and generalist settings
- Proposing guidance for definitions and outcome measurements in clinical practice and in research in different settings.

The current document aims to distil the information presented in the full EP3OS document into a shorter and more concise format suitable for use in primary care generalist settings. The summary recommendations for generalists are that clinicians should be aware that rhinitis and sinusitis usually co-exist, and that management strategies should encompass this "

Apparently, the latter has not been achieved yet. I hope that in any future Research Needs statement, 'rhinosinusitis' finds its place. If the EP3OS group or myself can be of any help, please let me know.

Conflict of interest declaration

None.

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Authors' reply

We thank Professor Fokkens and her colleagues for their interest¹ in the International Primary Care Respiratory Society (IPCRG) Research Needs Statement,² and fully concur with the aim of the European Position Paper on Rhinosinusitis and Nasal Polyps to raise the profile of rhinosinusitis amongst generalist clinicians.³ Although it is very frequently encountered, this condition is widely unrecognised and under-diagnosed potentially leading to inappropriate treatment. We also agree that rhinosinusitis is an area which requires further research within the primary care arena.³

However, the primary focus of the IPCRG Research Needs Statement was the three common lung conditions (asthma, COPD and lower respiratory tract infections), along with two important related conditions (nicotine dependence and nasal allergy). For this reason we concentrated on allergic rhinitis rather than rhinosinusitis, a maladaptive response to infection. This does not deny the importance of rhinosinusitis, but merely reflects the need for focus within the confines of a word-limited document. For similar reasons, the Research Needs Statement also specifically excluded discussion of upper respiratory tract infections.

Recent publications in the *Primary Care Respiratory Journal* provide evidence of the increasing importance attached by respiratory-interested primary care professionals to the challenge of raising the profile of this all too prevalent problem.³⁻⁵ It may be that future iterations of the IPCRG statement will extend the focus to include a discussion of the research needs related to rhinosinusitis.

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