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A Comparative Study of Intranasal Fluticasone Versus Intranasal Budesonide for Prevention of Nasal Polyposis after Polypectomy

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Abstract

Background: Nasal polyposis is a common clinical condition it is histologically an inflammatory disease surgical removal is the preferred treatment. studies have demonstrated that topical corticosteroids are effective in reducing the size of the polyps, nasal symptoms after surgical treatment, and the recurrence rate of polyps after polypectomy. The aim of this study is the comparison of fluticasone propionate nasal spray with Budesonide in the prevention of nasal polyposis following surgery. **Method:** A total of n=90 cases were included**.** After the selection of cases, they were randomly allotted in three groups FPANS (n=30) (patients were advised to use fluticasone propionate nasal spray at a dose of 200 mcg/day). Group BUDNS used Budesonide nasal spray at a dose of 128 mcg/day (n=30). Group Control (n=30) was the control group that did not receive any intranasal spray. **Result:** In our study nasal obstruction seen in n=90 patients 100%, nasal discharge n=90 patients) 100%, sneezing n=90 patients 100%, altered smell in n=25 cases (27.77%) and headache in n=74 cases (82.22%). N=21 cases (23.33%) undergone conventional polypectomy, where n=69 cases (76.66%) undergone Functional Endoscopic sinus surgery guided polypectomy. In our study n=2 cases (7%) recurrence of nasal polyposis in fluticasone group, n=4 cases (14%) in budesonide group and n=9 cases (30%) in control group. **Conclusion**: comparison of fluticasone propionate nasal spray with budesonide in the prevention of nasal polyposis after surgery. No statistical significance was found in their efficacy which was assessed by their recurrent rate by proportion, which implies that topical intranasal spray (FPANS and BUDNS) having an equal role in preventing nasal polyposis.