If you are one of the 33 million people suffering with a sinus infection, then this special report will be of great interest. Not a day goes by in my office that I don't see a patient who is complaining of a runny nose, facial pain, "sinus" headache, you know the pain...it is simply just "miserable".

This report is a brief summary of a patient I treated with chronic sinusitis.

The patient's name is Marilyn. Marilyn is a 38 year old mother of two who happens to work as a part-time legal secretary for a prominent personal injury law firm.

Marilyn's sinus problems go back over four years. She was first seen by her primary medical physician, then referred to an allergist, then referred to an internist and actually consulted with a chiropractor hoping just maybe chiropractic adjustments would rid her of her chronic sinus suffering.

Needless to say, Marilyn's problem did not improve. If anything, she got worse (excuse the English slang). As typical for many sinus sufferers, Marilyn was prescribed clarithromycin, an antibiotics, pseudoephedrine and phenylpropanolamine, both oral decongestants, phenylephrine hydrochloride, a nasal spray decongestant, anti-histamines, and finally a short course of steroids.

Nothing worked "long term".

Marilyn was, to say the least, extremely frustrated and to be quite honest very reluctant to see me. She figured after four years of trying "the best that medicine has to offer", that she would simply have to settle for the fact that sinus pain will be a permanent part of her life.

On Marilyn's first visit, I could sense that she had "mixed" feelings being in my office. On one hand, she was "fed up" having to go day after day with a runny nose and all the terrible symptoms and on the other hand, she pretty much was resigned to "make due" with her present circumstances. Overall, deep down, Marilyn was really hoping I could help, but on the surface, I could tell she was not expecting anything much more in the way of relief.

Prior to seeing Marilyn, as with all patients, I requested a copy of all her medical records and saw that she had been seen by three different physicians. As is noted above, Marilyn was prescribed various medications and also told to avoid cat dander, pollen, dust and a number of common trees. Obviously, the impossible was asked of her. If only she was living in a "bubble" just maybe she could avoid such things. (Sorry for my sarcasm).

As Marilyn "poured" her heart out, she explained how disappointed she was having to go year after year with these symptoms. She kept telling me that she realized that there were people with worse problems then hers and felt silly being in my office. I re-assured her that her problem...although not life-threatening deserved the same attention as any other condition. I further explained that any condition that interferes with your life and your ability to be productive, is worthy of my or any physician's time.
After carefully reviewing Marilyn's case, I decided to order an **IgG Food Sensitivity Assay and an Airborne IgE Assay.**

Let me explain....

Marilyn was tested approximately 2 years ago by an allergist using the traditional "skin prick or scratch test". This test **will only detect** an IgE reaction, meaning an "immediate" reaction and is commonly referred to as Type I immune reaction.

An IgG Food Sensitivity Assay is commonly referred to as a **Type 3 Delayed-Onset Immune Reaction.**

The IgG Food Allergy Test and the IgE Airborne Test both required "one" vial of blood and were sent off to Immuno Labs. The turn-around time is usually 10 working days.

When I received the results, I was surprised to discover that Marilyn's IgG food allergy test **DID NOT** reveal any allergic reactions to a specific food, however, what was discovered on her IgE airborne allergy test was to be the "**answer**" to her **four year battle with sinusitis.**

As mentioned a few moments ago, Marilyn was tested using the traditional skin prick method for an IgE allergen and found to be reactive to cat dander, pollen and specific tree. When I reviewed the results of the test I ordered, Marilyn was indeed reactive to cat dander and weed pollen, however, one allergen was **totally overlooked** and was "off the charts". Allergic reactions are graded 0, +1, +2, +3, +4 with 0 indicating no reaction and +4 indicating a severe reaction. Her test revealed a **+4 Alternaria reaction.**

Let me quote a few lines from the Mayo Clinic article written by Ronald Lawrence M.D.

### Mayo Clinic Findings on Sinus Infections

New research reveals that more than **90%** of sinus problems are caused by an immune system response to a common **fungus**. Recently, the Mayo Clinic study confirmed the findings of additional studies indicating that **fungi** cause may cause many types of sinus problems.

The airborne mold **Alternaria** is a common cause of fungal sinusitis. The study revealed that both Aspergillus and Alternaria not only interfere with the nerve impulses in your nasal passages but also take up lodging there, paving the way for a full-blown infection. The presence of both molds accelerate redness and swelling.

Unfortunately, **antibiotics and decongestants can actually worsen the condition by allowing the fungus to thrive. Antibiotics were designed to eliminate bacteria, not fungi. Decongestants are incapable of stopping the spread of fungi in the sinuses**.

Wow! Isn't that interesting?

I remember reviewing the results with Marilyn and going over all the medical abstracts supporting the relationship between chronic sinusitis and fungal infections. Marilyn looked at me with a "blank" stare and asked "why didn't the three doctors she saw over the last four years ever check her for fungal infections?" I reassured her that her doctors were doing what they had been trained to do and in no way wanted her to suffer over these last four years.
Based on this new information, the following were the "exact" treatments I recommended:

a) I personally called her primary physician and reviewed Marilyn's findings and asked if he would prescribe an anti-fungal medication. Of course, he was reluctant at first. However, after he reviewed the medical support documentation (see below), he was willing to do a trial of Fluconazole.

b) I recommended following the Fluconazole with a natural anti-microbial product for two weeks.

c) I had Marilyn do a thorough check of her home and see if she could find any mold build-up (which she did on her bedroom window baseboard)

d) I suggested that Marilyn purchase a "micro" hepa filter to use in her bedroom.

Marilyn's Results:

One week following her first prescription with Fluconazole, Marilyn was 50% better. Three weeks after starting the natural anti-microbial and purchasing a "micro" hepa filter, Marilyn admitted to feeling 90% better. Just recently, I spoke to Marilyn and she has not had problem with her sinuses for over three months. She was ecstatic and couldn't contain her enthusiasm. Matter of fact, her physician expressed an interest in learning more about functional medicine and wanted to have lunch with me.

Dr. Grisanti's Comments:

I am glad to see that Marilyn has done so well and that we finally found the reason for her chronic sinus problems. I want to be certain that everyone reading this DOES NOT phone their doctor and ask for a prescription for Fluconazole or any other anti-fungal medication. Although it is entirely possible that you just might be suffering with an Alternaria fungal infection, I wouldn't attempt to self-treat.

You see, I see many patients with different health challenges and understand that their is NO "one treatment fits all" solution to the array of health conditions. You have heard me say that "I treat the patient not the condition."

Unlike the drug ads on television or any major magazine that promote a drug for XYZ disease, my approach is very logical. I look for the underlying "cause(s)" of a patients problem. Remember this... and remember it well..I can have three patients suffering with sinus problems and each one of these patients may have a different reason for their sinus condition. One may be suffering with an Alternaria fungal infection, another from a food allergy and yet another from poor detoxification function (yes I did say detoxification). Each of these patients would require completely different treatments.

Ask yourself this question: What would happen if I treat the patient suffering with a food allergy-related sinus problem with an anti-fungal medication? Yes, you are right ... nothing. the patient would simply not improve...

Remember, find the cause, match it with the correct treatment and many times the patient experiences an amazing improvement. Please understand that finding the cause(s) of a patient's health challenge is not always simple but is worthy doing your due diligence to be uncovered.
Remember, if you suffer with sinus problems or any health challenge, I want to challenge you to see if your physician is looking for the cause or simply "masking" the symptoms with the most popular advertised drug on the market. Think about it.

Ronald Grisanti D.C., D.A.B.C.O., M.S., is medical director of Functional Medicine University. If interested in improving your diagnostic skills and increasing your community reputation and recognition, we strongly recommend subscribing to our Free Clinical Rounds Series. These challenging case studies will give you the unique opportunity to test your clinical skills and, at the same time, improve your ability to handle many of the most difficult cases. Go to the following link to get your free access: www.Clinical-Rounds.com.

REFERENCES:


