

On the risk of carcinomatous change in atrophic rhinitis

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Dear Sirs

I read, with great interest, the review article by Dutt and Kameswaran.¹ I compliment the authors on their useful summary of the current knowledge on atrophic rhinitis. However, although the review was comprehensive, the authors make no reference to the risk of malignancy in the nasal mucosa of these patients.

Squamous metaplasia of the nasal mucosa is well known in atrophic rhinitis. Generally, any metaplasia is a harbinger of malignant change.² In a descriptive preliminary report of 20 patients with atrophic rhinitis, I described two cases of precancerous changes.³ I strongly believe that this was not mere coincidence.

There can be several hypothetical explanations as to why these patients should be more prone to carcinomatous change. As ciliary clearance is hampered in atrophic rhinitis, inhaled environmental carcinogens probably remain on the nasal mucosa for a prolonged period, increasing the risk of induced neoplasia. Proposed aetiologic agents for atrophic rhinitis, such as vitamin A deficiency and oestrogen

imbalance, are well known to be associated with malignancy. Therefore, further studies are needed to understand the risk of malignancy in atrophic rhinitis.

Although the causal relationship between atrophic rhinitis and malignancy is uncertain at present, such a possibility deserves to be mentioned in an educative review.

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References

- 1 Dutt SN, Kameswaran M. The aetiology and management of atrophic rhinitis. *J Laryngol Otol* 2005;**119**:843–52
- 2 Slack JMW. Metaplasia. In: McGee JOD, Issacson PG, Wright NA, Dick HM, Slack MPE, eds. *Oxford Textbook of Pathology*. Oxford: Oxford University Press, 1992;**1**: 565–8
- 3 Raveenthiran V. Pre-cancerous changes in the nasal mucosa of atrophic rhinitis: a preliminary report. *Indian Journal of Otorhinolaryngology and Head & Neck Surgery* 2005;**57**: 28–9

The authors did not wish to respond.