I N T R O D U C T I O N

A N D

AIM OF WORK

INTRODUCTION

Atrophic rhinitis is a chronic nasal disease characterised by atrophy of the turbinates, crust formation and foul odour. This disease is common in Egypt, with a high incidence in middle aged females. It is responsible for many social and marital troubles, and makes the patient anxious to seek medical advice.

The aetiology of atrophic rhinitis is still unknown. Different theories have been put to explain the pathogenesis of the disease, namely, the deficiency theory (Donaldson, 1955 and Bernat, 1968), the endocrinal theory (Eagle, et al., 1939 and Proetz, 1951), the infective theory (Rosen, et al., 1953), the sinus infection theory (Bosworth, 1889 and Grunwald, 1902), the developmental theory (Wachsberger, 1934 and Pesti, 1949) and the autonomic imbalance theory (Ruskin, 1932).

New light has been shed on the significance of immune and autoimmune reactions in atrophic rhinitis. Ricci (1959), was the first to suggest that atrophic rhinitis is an autoimmune disease related to the group of collagen diseases.

This work is a trial to throw lights on the cellular immunity status in atrophic rhinitis. The aim is to find out to what extent, the cell mediated immune reactions participate in the pathogenesis of this disease. The leucocyte migration inhibition test was used in this study.

It is one of the most reliable tests in evaluating cellular immunity or delayed hypersensitivity reactions in vitro. A crude homogenate of adult healthy nasal mucosa was used as antigen.

The spontaneous rosette test was also done to determine the absolute number of T-lymphocytes in the peripheral blood of the patients.