SUMMARY AND CONCLUSION

The relationship of nasal polyposis and bronchial asthma has long been recognized and has been shown in different studies ***(Kordash et al., 1978).*** The association between nasal polyps and bronchial asthma may be explained by the fact that bacteria also play a role in the development of asthma ***(Hallen et al., 1994).***

Much controversy existed about the effect of removal nasal polypi on subjects with asthma or with bronchial hyperreactivity. ***Jankowski et al. (1992)*** reported that removal of nasal polyps in subjects with bronchial hyperreactivity causes marked improvement in ventilatory function test and marked decrease in bronchial hyperreactivity of subject after surgery.

Korchia et al. (1992) found that polypectomy of subjects with proved bronchial asthma does not increase the severity of asthma and with no significant improvement in ventilatory function tests after surgery.

On the other hand, ***MacFaden et al. (1990)*** stated that after intranasal polypectomy there is marked improvement in the subjects with asthma with decrease the frequencies of attacks and less need for medical treatment especially steroids.

Our study was carried on 54 subjects, their ages ranged from 17-53 year, they were selected randomly from those attending the

E.N.T. and surgery outpatient clinic of Benha University Hospital during the period from November 1994 to February 1997.

Every subject was subjected to thorough history taking, clinical examination including otolaryngological and chest examination, routine pre-operative laboratory investigations and radiological investigation of chest and nose and paranasal sinus.

All subjects were evaluated pre-and three months after surgery as regarding :

A- Ventilatory function test.

B- Methacholine bronchoprovocation challenge test.

The subjects were classified into three groups : group I included 10 non asthmatic non hyperreactive subjects without nasal polypi, group II included 23 subject with nasal polypi and without chest complication and group III included 21 subjects with bronchial asthma and nasal polypi.

In group I there was non significant results of the ventilatory function test and methacholine bronchoprovocation challenge test.

In group II, there was significant improvement in the bronchial hyperreactivity in the subjects of group (II-A), also there was significant increase in all parameters of the ventilatory function test except for the $FEV_1/FVC\%$, for the subjects of group (II-B) there was non significant change in bronchial hyperreactivity and non significant change in the ventilatory function test.

In group III, there were non significant changes in the bronchial hyperreactivity as well as in the ventilatory function test.

This present study presents an objective evidence for the value of endoscopic intranasal polypectomy in decreasing the bronchial hyperreactivity in asymptomatic bronchial hyperreactive patients but not for the asthmatic one.