



# Nasal Irrigation (Rinse) and Nasal Lavage

## Simple and Effective Methods

*by Dr. Anita Kracke, Germany*

The development of paranasal sinuses is initiated in the 2nd-4th month of pregnancy. They begin as evaginations of the nasal mucous membrane. Further development takes place after birth. Particularly at age 6, with the start of the 2nd dentition, a further growth begins. The development is complete after puberty, whereby the construction of the single sinus can be individually quite different and also dissimilar on both sides of the same person.

The paranasal sinuses are laid out in pairs. They enlarge the surface of the nasal cavity. Few mucous glands are found to be embedded in the respiratory epithelium. According to the anatomical situation and development we discriminate the frontal sinus, the maxillary sinus, and the sphenoid sinus. They all have different entrances to the different meatuses of the nose. Because of their situation in direct proximity to the brain, to the roots of the teeth, and/or to the orbita, a mutual influence in cases of an illness has a significant meaning. An inflammation of the ethmoidal cells for instance can infect the brain or the orbita and develop

into meningitis or retrobulbar abscess. The maxillary sinus is easily irritated by granuloma of the roots of the 2<sup>nd</sup> premolar and 1st molar teeth. The hiatus semilunaris, which is the opening of the maxillary sinus to the middle meatus of the nose is not located at the lowest point of the sinus, therefore, a congestion of secretion is very likely.

Since the intestinal epithelium and the respiratory epithelium emerge from the same blastodermic layer, (entoderm), it is always useful to check the relation between a disturbed intestine and diseased paranasal sinuses.

Medical professionals such as Dr. Rau and Dr. Werthmann repeatedly point out to the paranasal sinuses and teeth as possible disruptive factors in intestinal illnesses. Since the paranasal sinuses build a narrow system of cavities with possibility of poor drainage, it is especially important to take care that secretions do not accumulate there, but that an excretion as described by Reckeweg can take place. Since dust from inhaled air can be amassed, the secretion must be

kept in a fluid condition or the viscous mucous must be removed. Nasal irrigation (rinse) and nasal lavage support the cleansing process of the paranasal sinuses. Patients can be easily taught to use both of these methods at home.

In oriental cultures, the nasal lavage has a long tradition. It is a very effective and simple form of therapy with almost no side effects and very low costs. The easiest way is to sniff the fluid from the palm of the hand. With "nasal showers" which are marketed in health food stores and medical markets the fluid can be brought into the nose. The mechanical rinsing frees the nasal mucous membranes of any congested secretions and mucous, which create a culture medium for bacteria. Dust and the body's own mediators are simultaneously removed. Local inflammation processes are lowered substantially through this cleansing. Circulation and regeneration of the epithelia increase, which consequently significantly improves the immunological defensive condition of the patients. The effectiveness of this simple application has been proven by military personnel who used the



rinse on a regular basis. Their susceptibility to colds decreased considerably in comparison with other people. This simple therapy is also very beneficial to people with allergies as the inflammatory mediators, which maintain the rhinitis, are washed away. Fresh water can also be used as rinsing fluid and special salts can be added. The solution must be isotonic.

Camomile steam baths are also recommendable, performed in the old proven way, over a bowl with a cloth over the head. Also other ethereal oils, for instance eucalyptus, pine tree, fir and peppermint are suitable to decrease swollen mucous membranes and to dissolve secretion congestions. These ethereal oils should not be used when the patient is being treated with homeopathic remedies.

If we want to treat the sinuses thoroughly, a nasal lavage as suggested by Dr. Werthmann (see also "Successful treatments for allergies and chronic disorders" by Dr. Konrad Werthmann) is recommended. Only by applying this treatment the convoluted entrances of the

paranasal sinuses can be affected, the secretions can be dissolved by the preparations and the regeneration of the mucous membranes can be supported by SANUM preparations.

The patient must be in a lying position with the head reaching over the top edge of the table resting in the lap of the therapist and the tip of the nose vertically to the ceiling. The therapist drips 2-5 drops of a solution prepared from NOTAKEHL 5X drops 2 ml, Mucosa comp. (Heel) 2.2 ml, FORMASAN Amp. 2 ml and physiological saline solution 10 ml, (if necessary, additionally Traumeel Amp. 2.2 ml) alternately in each nostril. It is very important to allow the solution to run slowly along the nasal septum of the treated side. The head of the patient is carefully rocked from one side to the other to let the fluid be distributed in the cavities. This process takes 5 to 10 minutes. This kind of treatment is easily done at home either by the patient or with the help of another person.

Congested secretions and swollen mucous membranes can

be easily treated with teas from camomile, aniseed, verbascum blossom, primrose, and especially thyme.

It is shown in children with sinubronchitis that the application of thyme tea in a chest wrap yields good results, as the ethereal oils are simultaneously inhaled. Warm footbaths with ethereal oils, especially with 2-3 tablespoons of mustard added, help secretions to flow.

According to Dr. Werthmann it is a lapse to omit treatment of sinusitis during the therapy of colitis syndrome. The combination of the isopathic SANUM preparations with other medicines enable us to treat patients without antibiotics or cortisol and to really cure them.

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