

Developing a Routine Method for the Analysis of Nasal Mucus.

Murphy, Loretta; David, Hill; Ben-Cofie, Charles

Published: 19/05/2017

Cyswllt i'r cyhoeddiad / Link to publication

Dyfyniad o'r fersiwn a gyhoeddwyd / Citation for published version (APA): Murphy, L., David, H., & Ben-Cofie, C. (2017). Developing a Routine Method for the Analysis of Nasal Mucus.. Poster session presented at British Rhinological Society Annual Meeting.

Hawliau Cyffredinol / General rights
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
 - You may not further distribute the material or use it for any profit-making activity or commercial gain
 You may freely distribute the URL identifying the publication in the public portal?

Take down policyIf you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Developing a Routine Method for the Analysis of Nasal Mucus.

Loretta Murphy¹, Charles Ben-Cofie¹ and David Hill²,

¹School of Chemistry, Bangor University, Gwynedd

²Ysbyty Gwynedd, Bangor, Gwynedd,



Bwrdd Iechyd Prifysgol Betsi Cadwaladr University Health Board







Ysgol Cemeg
School of Chemistry
Rhagoriaeth ers 1884 | Excellence since 1884

1 Objectives

If there were tests on nasal mucus, equivalent to the venous blood sample, the knowledge and clinical gain would be significant. No such test is in routine use.

2

Method

Healthy volunteers had nasal mucus passively collected from the nose for 15 minutes without local anaesthesia (Figure 1). On one side an inert plastic splint was used, on the other simple cotton wool. The splint was a standard 42 mm silastic blue nasal splint (Exmoor Plastics), the cotton wool varied in weight from 120 to 300 mg. We measured the yield by weight of mucus on each side. The participant experience is reported in a sister paper.



Figure '

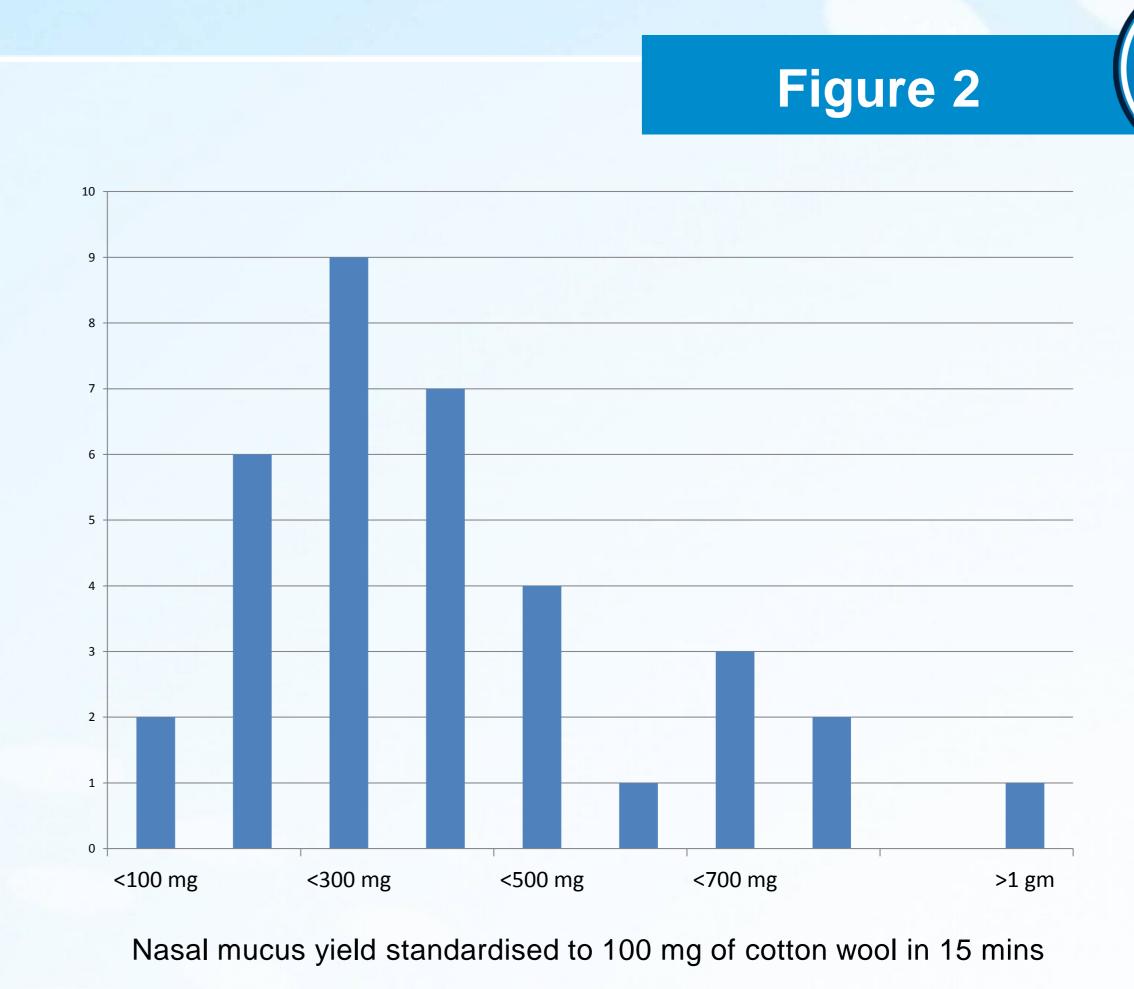


Participant During Mucus Collection



Results

36 subjects have been tested, of whom all 36 tolerated the cotton wool, but only 32 tolerated the plastic splint. The average yield of mucus onto the splint was 190 mg (SD 110 mg, range 80-460 mg), and onto cotton wool was 500 mg (SD 350 mg, range 110 mg - 1.52 gm).



Discussion

6

The plastic splint tended to be problematic, not only due to pain, but also with mucus failing to adhere easily, and falling off on removal. Standardising for 100mg of cotton wool in 15 minutes gave an average yield of 324 mg (SD 176 mg, range 80 - 1340 mg/15 mins). See Figure 1. The sub-group of subjects with much higher yields, giving a second peak, were apparently those with hay fever/ allergic rhinitis, but were tested out of season. No dedicated allergy testing was undertaken.

The analytic and diagnostic options with nasal mucus will vary with the amount collected, and how dilute it is. Previous approaches have either relied on collection onto paper strips followed by elution (1,2) or collecting saline after irrigation of the nasal cavity (3). Neither is an accurate quantitative method, suitable for diagnostics. These studies also attest to the great variation in nasal mucus production between individuals.

Conclusions



Using inert plastic splints to collect native nasal mucus is unlikely to be practical without dedicated design work. The rate of nasal mucus production has at least a 9-fold range. Analysis of nasal mucus chemistry may require a soft, absorbent matrix, and then secondary separation before testing, if it is to become practical and routine.

