



Beneficial Effect of Mustache Washing on Seasonal Allergic Rhinitis Symptoms

By Patricia McNally, MD
John Simpson, MD
John Vroom, MD
Pamela Winder, MS, RN

Mustaches serve as reservoirs from which impacted pollen grains are inhaled. The resulting increase in seasonal allergic rhinitis symptoms can be ameliorated by mustache washing.

Introduction

Several patients with seasonal allergic rhinitis and mustaches noted symptom improvement after mustache washing, suggesting that mustaches serve as reservoirs from which impacted pollen grains are inhaled. Nasal vibrissae trap particles larger than 15 μ in diameter.¹ If mustache hairs serve a similar function, they trap airborne pollen grains (14-60 μ),² specifically oak (32 μ)³ and grass (20-25 μ).³

Methods

All male patients with mustaches seen between April 1 and June 30, 1996, who had at least three of four symptoms of seasonal allergic rhinitis (nasal obstruction, rhinorrhea, sneezing, nasal or palatal pruritus) and positive skin tests to the major spring allergens of oak and grass mix in the Washington, D.C. area were included in the potential study population. After three weeks of stable avoidance and nasal steroid use (four also using nasal cromolyn regularly and four also were receiving maintenance immunotherapy for longer than 18 months), we suggested that patients also shampoo their mustaches BID with a liquid soap or shampoo for two weeks.

The study group consisted of eight patients 35-50 years old who met the inclusion criteria and for whom there was no significant change in the counts for the pollens to which they reacted between the standard treatment period and the period during which mustache washing was added. Six had positive skin tests to oak and grass mix, one to oak mix, and one to grass mix. Four of the study group were also using nasal cromolyn regularly, and four were also receiving maintenance immunotherapy for longer than 18 months. Because record analysis was done retrospectively for patients seen in a clinical office, there was no control group studied.

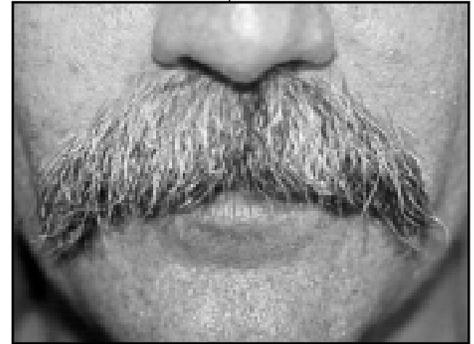
Results

After two weeks of mustache washing, the eight patients reported less frequent use of oral antihistamines and decongestants and decreased symptoms (8/8 with less obstruction, especially nocturnal; five with less rhinorrhea; and three each with less sneezing and pruritus).

Discussion

This small study suggests that mustaches serve as first a filter and then a reservoir from which pollen grains are inhaled, increasing rhinitis symptoms. Mustache washing was added after three weeks of stable avoidance and nasal steroid use, making it unlikely that the symptom reduction seen with mustache washing was due to standard treatment. Pollen counts were stable for the five study weeks, so the symptom reduction was not from a decreased allergen load coincident with the end of the season but probably from mustache washing. The symptom most reliably reduced was obstruction, probably by decreasing the persistent antigen load driving this late phase response.

Studies using a control group with unwashed mustaches correlating mustache allergen levels with rhinomanometry, nasal lavage volume and analysis, and symptoms could confirm our observation that pollen grains filtered by mustaches are later inhaled, increasing symptoms of seasonal allergic rhinitis. ❖



References:

1. Druce HM. Allergic and nonallergic rhinitis. In: Middleton E, editor. *Allergy: Principles and Practice*. 4th ed. St. Louis: Mosby; 1993:1434.
2. Platts-Mills TAE, Solomon WR. Aerobiology and inhalant allergens. In: Middleton E, ed. *Allergy: Principles and Practice*. 4th ed. St. Louis: Mosby; 1993:481.
3. Gutman A, Bush RK. Allergens and other factors important in atopic disease. In: Patterson R, editor. *Allergic Diseases: Diagnosis and Management*. 4th ed. Philadelphia: Lippincott; 1993:107-9.

PATRICIA MCNALLY, MD, JOHN SIMPSON, MD, and JOHN VROOM, MD are Board certified allergists who have 23 years experience in allergy care for the Mid-Atlantic Permanente Medical Group (MAPMG) in Virginia. PAMELA WINDER, MS, RN is the Clinical Coordinator of the Allergy Department in Virginia.