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Hay fever (allergic rhinitis) and chronic sinus disease (chronic rhinosinusitis) are often dismissed as minor, yet can affect sleep, energy, mood and breathing. Medicines help many people, but symptoms may persist; surgery for resistant chronic sinus disease is invasive and not suitable for everyone. Safe non-drug options need study. In this presentation, I will share initial results from a longitudinal study of acoustic nasal therapy, delivered by a device providing low-frequency sound vibration inside the nasal cavity during breathing. Audience members will learn what changed after treatment, what did not, and why symptom, breathing and biological measures need to be considered together. Thirty adults with hay fever, chronic sinus disease, or both were assessed before treatment, after four weeks of device use, and after stopping treatment. Nasal airflow was assessed using peak nasal inspiratory flow (PNIF), a clinical measure of nasal breathing strength. Symptoms and well-being were assessed using the Sino-Nasal Outcome Test-22 (SNOT-22), a validated questionnaire on sinonasal symptoms and quality of life. Blood samples were analysed for immune changes, and nasal swabs were collected to profile the nasal microbiota. Preliminary results show that participants felt better during active treatment. Two-thirds achieved a clinically meaningful reduction in symptom burden, defined as at least a 9-point SNOT-22 improvement. Improvements were seen across nasal symptoms, sleep, daily function and emotional well-being. PNIF was variable and did not closely align with symptom relief. Blood measurements of allergy-related immune signals showed no clear differences attributable to device use. Ongoing work will examine whether immune or nasal microbiota patterns relate to improvements in symptoms and breathing. This will help frame acoustic nasal therapy as a non-invasive, drug-free candidate for future trials.

**Keywords**

Rhinitis, Allergic, Seasonal, Sinusitis, Nasal Obstruction, Quality of Life, Cytokines, Microbiota