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Atrophic Rhinitis is a chronic inflammatory condition of nose characterised by atrophic changes of mucosa of nose, and underlying bone of the turbinates and very roomy capacious nasal fossae, the formation of thick crusts and foetor to which is attributed the term ozaena. The main presenting feature of the Patients includes, Dryness of nose, Crust formation, Nasal obstruction, Headache, Nasal discharge, Epistaxis, Anosmia.

The aetiology of atrophic rhinitis is still unknown. Infection, endocrine imbalance; deficiency of iron, zinc and fat soluble vitamins, wide breath of nasal cavity and small antra; and at times DNS are contribute to atrophic changes in nasal mucosa while chronic sinusitis, lupus, tuberculosis, syphilis, leprosy, surgery and accidents have role in causing atrophic rhinitis.

Foud et al (1980) studied cellular immunity in the patients with atrophic rhinitis. There was altered cellular reactivity or loss of tolerance to nasal tissues.
The present study has been under taken a view of the above mentioned facts with the following objectives:

♦ Prevalence of primary atrophic rhinitis and secondary atrophic rhinitis.

♦ Prevalence of different Baterias in atrophic rhinitis.

♦ Histopathology of nasal mucosa in atrophic rhinitis whether it is purely bacterial infection or associated with auto immune disease or other diseases.

♦ Radiological examination of paranasal sinuses in correlation of atrophic rhinitis.