



Research project summary

Updating Needs and Network Meta-analyses for the Canadian Guidelines for Chronic Rhinosinusitis

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- Co-Investigators: David Moher, James Bonaparte, Dianna Wolfe, Dean Fergusson, Adrienne Stevens
- Awarded \$187,425 from the Canadian Institutes of Health Research (CIHR) in January 2018

Chronic rhinosinusitis (CRS), also called chronic sinusitis, is a very common life-long disease affecting over 5% of the Canadian population, and this number increases with age. The annual cost of chronic sinusitis for Canada is estimated at \$1.3 billion while the government pays an estimated \$860 million yearly for chronic sinusitis treatment. Past research has shown the quality of life in CRS sufferers to be comparable to that of patients with poorly controlled asthma and kidney failure requiring dialysis. CRS sufferers have also been shown to miss considerable amounts of work, suffer from more depression and require more mental health care visits and healthcare resources than the average person. Guidelines provide doctors information for treating diseases. Canadian guidelines for CRS were last updated in 2011, and since that time more than 50 new research studies of relevance have been published. Systematic reviews (i.e. reviews which assess the totality of relevant evidence) are a vitally important study design in the practice of evidence based medicine, which are commonly performed to inform the development of clinical guidelines. Given the vast amount of new evidence, there is an imperative need to update the information used to inform recommendations for CRS management in Canada using a systematic review approach. These efforts will establish new levels of evidence for CRS interventions, thereby improving the health of Canadians and reducing variation in clinical practice. This research program will use rigorous systematic review methodology and will directly incorporate input of the Canadian CRS guidance panel to inform the update of the Canadian guidelines in 2018-19.

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