Lavender for the treatment of acute rhinosinusitis

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Background: Acute viral sinusitis (ARS) is defined as self-limiting inflammation of nasal and paranasal mucous membranes. Although ARS is considered harmless, it impairs the quality of life (QoL) of affected patients. Various treatment options including nasal irrigation, flue remedies and phytotherapeutic agents aim at alleviating ARS-symptoms. Nasal irrigation is safe but lacks efficacy. Flue remedies are effective but might cause serious side effects. In contrast, phytotherapeutic agents are considered both – a safe and effective treatment option for ARS. Thus, phytotherapeutic agents are recommended as complementary treatment option in current guidelines (1-3). However, the mechanisms of action of the currently commercially available phytotherapeutic agents is frequently unknown. For Tavipec® (Spicae aetheroleum), a phytomedicine obtained by steam distillation of the flowering tops of Lavandula latifolia, the mechanism of action has been thoroughly explored (4-6). Tavipec is considered anti-inflammatory (4), antibacterial (5), secretolytic (6) and expectorative (6). In a randomized, multicenter clinical trial we evaluated the efficacy and safety of Tavipec® as compared to placebo in patients suffering from ARS (7).
Methods: Patients with ARS were randomly assigned to treatment with 2 capsules of 150mg Tavipec® or placebo thrice daily over a period of 7 days in a double-blind, parallel-group design. No additional treatment was admitted. The efficacy endpoints comprised the improvement of the main rhinosinusitis symptoms as per Major Symptom Score (MSS) and Sino-Nasal Outcome Test (SNOT-22) as well as of QoL by global assessment scale, evaluated at baseline, day 5 and day 8, respectively.
Results: 288 patients were enrolled and randomized to treatment. At day 8 the patients in the Tavipec® group had a significantly lower MSS compared to placebo and the impact of rhinosinusitis symptoms on QoL was significantly reduced. A significantly higher proportion of Tavipec® treated patients experienced a change in SNOT-22 score greater than or equal to 10 points at day 5 or day 8. No new safety signals were identified.
Conclusion: The treatment with Tavipec® effectively reduced the symptoms of ARS in adult patients.

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