Homerton University Hospital NHS Foundation Trust

City and Hackney Adult Rhinosinusitis (>16 years) Pathway

Inflammation nasal + paranasal sinus mucosa.
Characterised by 2 or more sx, one of which should be either
Nasal blockage/obstruction/congestion or nasal discharge: anterior/posterior nasal drip
+/-facial pain/pressure +/-smell disturbance

Refer to Urgent ENT for:
Click for more information

NHS City and Hackney Clinical Commissioning Group

References here

Patient info: here

Examination – temp/HR Anterior rhinoscopy – using otoscope

- Presence of purulent nasal secretions
- Nasal polyps
- Mucosal swelling
- Deviated/perforated/depressed or widened nasal septum

Horizontal crease across dorsum nose – indicates allergic rhinitis

Smoking Cessation advice

Infective

< 12 weeks

Acute

Sx <5 days or improving thereafter

Common Cold = 98% cases

Symptomatic relief measures

- Paracetamol or ibuprofen
- Saline nasal irrigation
- Apply warm face pads
- Drink adequate fluids and rest

Sx >10 days or increasing after 5 days

Moderate (post viral)

No effect after 10 days

Intranasal Steroids for 2 weeks

If no effect

Refer ENT and continue treatment

≥ 12 weeks w/o complete resolution sx

Severe, including bacterial ie ≥3 of:

- Discoloured discharge,
- Severe local pain,
- Fever>38OC,
- ↑ESR/CRP,
- Double sickening (worse after initial recovery)

Intranasal steroids and antibiotics

- 1st line: Phenoxymethylpenicillin
- 2nd Line: If more severe or failure to respond Co-amoxiclav
- If Penicillin allergic: Doxycycline

Refer to local infection guidelines here

R/v 48 hours

Effective → Continue Rx 5 days

Not Effective → Refer Urgent ENT

Chronic

No polyps

Nasal Saline and Intranasal steroids (for 2-3 months. If using drops use for 2-4 weeks then step down to nasal spray)

If ongoing Sx

Refer ENT

Polyps

Nasal Saline and Intranasal steroids (for 2-3 months. If using drops use for 2-4 weeks then step down to nasal spray)

For severe nasal obstruction Oral Prednisolone (non-EC tabs) 0.5 mg/kg for 5-10days, followed by topical drops

If ongoing Sx or need to repeat frequently

Authors and date: Mr Max Whittaker (Consultant ENT Consultant), Chris Carvalho (GP Clinical Lead), Prof Raja Rajakulasingam (Allergy Consultant), May 2020
Review: May 2023

Preferred prescribing (intranasal preparations):

- 1st line: Mometasone furoate (50 micrograms per spray) 2 sprays each nostril twice a day each nostril 14 days
- 2nd line: Fluticasone furoate (Avamys® 27. 5 micrograms per spray) 2 sprays each nostril twice a day each nostril 14 days

The dose should be titrated to the lowest dose at which effective control of disease is maintained.

If severe symptoms

- 1st line: Betamethasone Betnesol ® 0.1% nasal drops 2 drops twice a day 4-6 weeks then step down to nasal spray
- 2nd line: fluticasone propionate (Flixonase® Nasule) 400 microgram/unit nasal drops:
  - 200 micrograms (equivalent to approximately 6 drops) twice a day 4-6 weeks then step down to nasal spray.

The dose should be titrated to the lowest dose at which effective control of disease is maintained.

For patients taking cobicistat or ritonavir use Beclometasone dipropionate (50 micrograms per spray) see MHRA ADVICE Dec 2016

Refer Urgent ENT

- **Orbital involvement:**
- **Peri-orbital oedema/erythema**
  Displaced globe
  Double or reduced vision
  Opthalmoplegia
- **Intracranial involvement:**
  Severe frontal headache or swelling
  Signs of meningitis
- **Neurological signs**
- **Unilateral rhinorrhoea**
- **Consider with bleeding or crusting**
- **Consider CSF leak if persistent uni / bilateral water drip from tip of nose like a tap**

Patient information
How to use nasal drops/spray correctly
Nasal Saline douching
Nasal polyps
Sinusitis
ENT UK: Sinusitis

References
NICE guidelines for sinusitis
BSACI Rhinosinusitis and Nasal Polypos

<Back

Nasal spray technique:

- Gently blow the nose to try to clear it.
- Shake the bottle well.
- Close off one nostril and put the nozzle in the other, directing it away from the midline. Tilt head forward slightly and keep the bottle upright.
- Squeeze a fine mist into the nose while breathing in slowly through the nose. Do not sniff hard.
- Breathe out through the mouth.
- Take a second spray in the same nostril then repeat this procedure for the other nostril.

(a)

1. Shake bottle well
2. Look down
3. Using RIGHT hand for LEFT nostril put nozzle just inside nose aiming towards outside wall
4. Squirt once or twice (2 different directions)
5. Change hands and repeat for other side
6. DO NOT SNIFF HARD

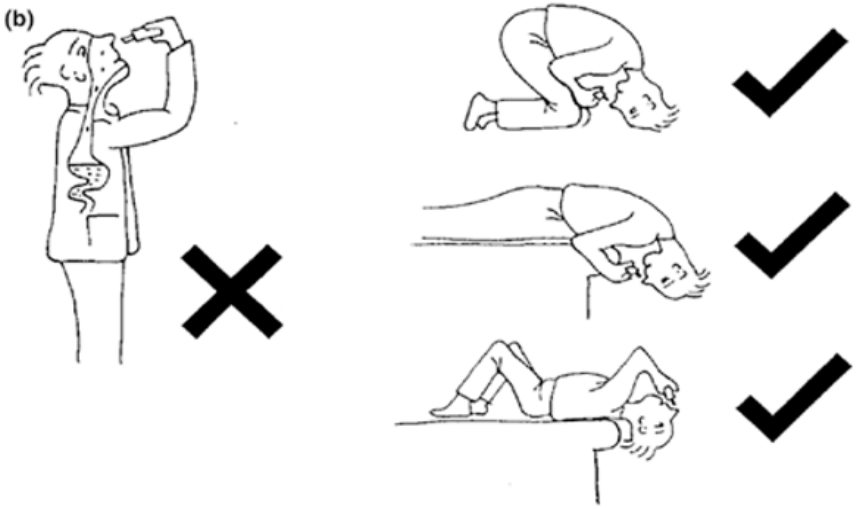


Reference: Adapted from http://cks.nice.org.uk/allergic-rhinitis#!references/-291616 (Scadding, G.K., Durham, S.R., Mirakian, R. et al. (2008) BSACI guidelines for the management of allergic and non-allergic rhinitis.Clinical and Experimental Allergy38(1), 19-42)) Last updated October 2015

Nasal drop technique:

- Gently blow the nose to try and clear it.
- Shake the container well.
- Tilt the head backwards.
- Place the drops in the nostril (squeeze the container gently if necessary).
- Keep the head tilted and inhale gently through the nose to let the drops penetrate.
- Repeat for the other nostril, if required.

(b)



Wrong

Choose any position you feel comfortable with

Reference -Adapted from http://cks.nice.org.uk/allergic-rhinitis#!references/-291616 Last updated Oct 15

<Back

Forward>

Nasal Saline Irrigation also known as Nasal Douching

Rinsing the nose with salty water is important as it keeps the nose clean, washes out mucus, helps reduce inflammation and infection and therefore can help relieve nasal symptoms. It is a safe, natural way to help wash crusts and mucus from your nose. The salty water helps to pull fluid out of any swollen lining of your nose helping you to breathe. This also helps to open up the sinuses.

The following is a solution for you to make at home.

Ingredients

- ½ teaspoon salt
- ½ teaspoon bicarbonate of soda
- ½ pint of warm clean water

Method

- Mix the ingredients together
- Stand over a sink or in the shower/bath
- Pour some of the solution into the palm of your hand and sniff it up into each nostril or administer using a syringe or other device such as a Neti pot (which look like a very small watering can and can be bought on the internet or from yoga shops!!)
- The mixture should come into your mouth - spit this out
- If you swallow the mixture it will do you no harm
- Blow your nose gently
- Rinse your nose in this way two or three times a day
- After douching rinse the syringe/ bottle in warm, soapy water

Please note

This may all feel a bit odd initially and occasionally the mixture may cause some slight burning sensation, but this should stop in a day or 2, so do try to stick with it.

Commercial saline irrigation preparations can be purchased from a pharmacy or reputable online supplier

Reference: Adapted from:
South Devon Healthcare NHS Foundation Trust. Patient Information. Nasal Douching and how to take your nasal medication
Review date 10/16

<Back