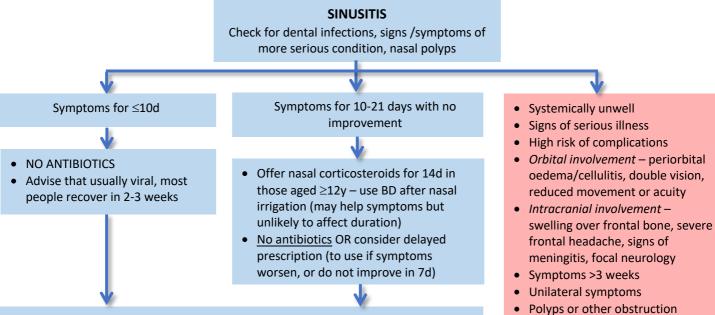


Kijabe OPD Guidelines

# Acute sinusitis

## **Key facts**

- Self-limiting and usually triggered by a viral infection (<2% cases are complicated by bacterial infection)
- Symptoms can last 2-3 weeks and most people recover in this time, regardless of cause
- Antibiotics make very little difference to the duration of symptoms and complications are rare, so **antibiotics are not needed for most people**
- The number who improve with antibiotics is similar to the number who get adverse effects (usually diarrhoea)
- Imaging not required



### Self-care

- Paracetamol or ibuprofen for pain or fever
- Trial of nasal irrigation with salt-water to ease congestion (and to do before any application of nasal steroids) see below; prescribe 2L saline and 20ml syringe
- Avoid allergic triggers and do not smoke
- <u>No evidence for</u> oral decongestants, antihistamines, mucolytics or steam inhilation

**Safety netting:** Advise to seek medical attention if symptoms worsen rapidly, if they become very unwell or if symptoms do not improve after 3 weeks total

	DRUG	DOSE	DURATION
<u>First line</u> If penicillin allergy/intolerance	Penicillin V* Clarithromycin	Child 1-11m: 62.5mg QDS or 125mg BD Child 1-5y: 125mg QDS or 250mg BD Child 6-11y: 250mg QDS or 500mg BD Adult/child>12y: 500mg QDS or 1g BD <8 kg: 7.5 mg/kg BD; 8 to 11 kg: 62.5 mg BD 12 to 19 kg: 125 mg BD; 20 to 29 kg: 187.5 mg BD 30 to 40 kg: 250 mg BD; Child ≥ 12yrs and adults: 250mg BD	5 days 5 days
Alternative first line if systemically very unwell, signs of more serious illness or high risk of complications <u>Second line</u> - if symptoms worsening after 2-3d of first-line	Amoxicillin/Clavulanic acid	1 to 11 months: 0.25ml/kg of 156mg susp TID 1 to 5 years: 5ml of 156mg suspension TID 6 to 11 years: 5ml of 250/62 suspension TID OR 375mg tablet TID 12 to 17 years: 375mg TID (625mg if severe) Adult: 625mg TID	5 days

\* First choice as narrow spectrum so lower chance of causing AMR; use amoxicillin if Penicillin V not available

#### References

Discuss with consultant



## Kijabe OPD Guidelines

### How to do a 'delayed prescription of antibiotics'

Write a paper prescription (add expiry date 5-10 days time), explain that antibiotics are not required at present and that we expect the infection to get better on its own, but incase symptoms continue/worsen, they can fill the prescription at a pharmacy after a predetermined period (e.g. 2-3d)

## **Nasal irrigation**

- 1. Use the sterile saline solution as prescribed at clinic.
- If this is not affordable or if you run out, you can make your own solution: boil 250ml of water, then leave it to cool; mix ½ teaspoon of salt and ½ teaspoon of bicarbonate of soda into the water. Make a fresh solution each time you clean your nose. You must use boiled water to avoid infection.
- 3. Wash your hands.
- 4. Fill the syringe with the saline solution.
- 5. Stand over a sink or a bowl.
- Put the syringe into one nostril and push the liquid into your nose. Breathe through your mouth and allow the water to pour back into the sink/bowl. Try not to let the water go down the back of your throat.
- 7. Repeat until the liquid runs clear and then do the same in the other nostril.
- 8. Do this 2 or 3 times each day until your nose feels more comfortable.
- 9. If you were prescribed a nasal spray, then use this *after* the nasal irrigation.

