

Sinusitis: what is it?

Sinusitis occurs when there is an inflammation of one or more of the paranasal sinuses, the hollow cavities within the cheek bones found around the eyes and behind the nose. The primary function of these sinuses is to warm, moisten and filter the air in the nasal cavity.

Sinusitis is very common in the winter and can last for months or years if inadequately treated. It can affect the nose, eyes or middle ear. Symptoms of sinusitis include some or all of the following:

- Thick yellow-green nasal discharge
- Bad-tasting, post-nasal drip
- Cough
- Head congestion and an accompanying headache
- Feeling of facial swelling
- Toothache
- Constant tiredness
- Occasional fever

Sinusitis can be divided into several classifications: acute, sub-acute, chronic and recurrent. The classifications are based on length of symptoms, the specific sinus involved or both. The classification is as follows:

- **Acute sinusitis**

Symptoms last for less than four weeks, consisting of some or all of the following:

- Persistent symptoms of an upper respiratory tract infection
- Post-nasal drainage
- Nasal congestion
- Facial pain
- Headache
- Fever
- Cough

- **Sub-acute sinusitis**

Symptoms last approximately 4-8 weeks.

- **Chronic sinusitis**

Symptoms last for eight weeks or longer and vary in severity. The symptoms consist of the same symptoms as seen in acute sinusitis. In chronic sinusitis, there are often abnormal findings on CT or MRI. Some patients with chronic sinusitis might present with vague or insidious symptoms.



- **Recurrent sinusitis**

Symptoms consist of three or more episodes of acute sinusitis per year. Patients with recurrent sinusitis might be infected by different organisms at different times.

Causes

Although colds are the most common cause of acute sinusitis, it is more likely that people with other allergic diseases such as allergies or asthma, will develop sinusitis. Allergies can trigger inflammation of the sinuses and nasal mucous linings. This inflammation prevents the sinus cavities from clearing out bacteria and increases your chances of developing sinusitis. The incidence of sinusitis in asthma patients ranges from 40%-75% as well.

Diagnosis

Sinusitis is diagnosed based on a combination of clinical history, physical examination, imaging studies and/or laboratory tests. An allergist/immunologist can determine if a visit with an ENT/otolaryngologist is necessary.

Treatment

An allergist/immunologist may prescribe a medication to reduce blockage or to control allergies to help keep the sinus passages open. This medicine may be a decongestant, a mucus-thinning medicine or a cortisone nasal spray. Antihistamines and topical steroid nasal sprays help control allergic inflammation. Other treatments that can be helpful include breathing in hot, moist air, applying hot packs, and washing the nasal cavities with salt water.

If you have questions about sinusitis, be sure to ask your allergist/immunologist for more information.

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