

### PF Sinusitis Pathway Summary: For 12 years and over

This summary does not replace the PGDs or Clinical Pathway. Please make sure you have read, understood and signed the PGDs.

#### To meet Gateway criteria (and be eligible for PGD):

The patient must have:

1. Nasal blockage or discharge **AND**
2. At least ONE of facial pain/ pressure (headache), reduction or loss of sense of smell, or cough(children)
3. Symptoms for more than 10 days

For patients who do not meet the criteria consider pain relief. Symptoms can last up to 3 weeks.

**Exclusions:** If the patient has any of the following, refer them to their GP surgery or other provider

- Under 12yrs
- Severe immunosuppressed
- Pregnancy or suspected pregnancy in under 16 years
- Had symptoms for more than 12 weeks
- Currently taking oral, inhaled, topical or parenteral corticosteroids for any reason (consider oral antibiotic)
- Blurred vision or other visual disturbances
- Known or suspected glaucoma or raised intraocular pressure
- Nasal trauma or undergone nasal surgery where full healing has not occurred
- Epistaxis (nose bleeds)
- Foreign body in the nasal passage
- Recurrent sinusitis (4 or more episodes in 1 yr without persistent symptoms in the intervening periods)
- Anatomic defect(s) causing nasal obstruction
- Co-morbidities complicating management such as nasal polyps.
- Signs of a more serious illness or condition e.g. within or around the eye such as swelling, displaced eyeball, double vision, or newly reduced vision
- Symptoms or signs of meningitis
- Patients with known Chronic Kidney Disease (CKD) stage 4 or 5 (oral antibiotics only)

#### Treatment:

**1<sup>st</sup> Choice: Nasal Corticosteroid for 14 days** (Avamys or Mometasone nasal sprays) two sprays twice a day.

**2<sup>nd</sup> line** if 1<sup>st</sup> choice is unsuitable or symptoms have not improved **and the patient has at least 2** of the following:

- a. Fever more than 38°C
- b. Purulent nasal discharge
- c. Severe unilateral pain (particularly the jaw or teeth)
- d. Recent marked deterioration

**2<sup>nd</sup> Choice:** Oral antibiotic for 5 days

Penicillin V, four times a day. Clarithromycin or Doxycycline should be used when Penicillin V is contraindicated, Erythromycin should be used when Penicillin V is contraindicated and pregnancy or suspected pregnancy.

#### Advice/Safety Netting:

- If symptoms do not improve in 7 days of using nasal spray patient should return to pharmacy for further advice/ treatment.
- If symptoms worsen rapidly or significantly at any time or do not improve in 5 days of oral antibiotics the patient should contact their GP surgery or other provider as appropriate.
- Provide the TARGET RTI leaflet
- Provide advice on pain management: where appropriate, paracetamol, alone or combination with ibuprofen.
- Little evidence that nasal saline (salt water) or nasal decongestants (over the counter) help relieve nasal congestion, but patients may want to try them (if not already).
- Healthier Together guidance (rhinosinusitis/persistent runny nose) for children.