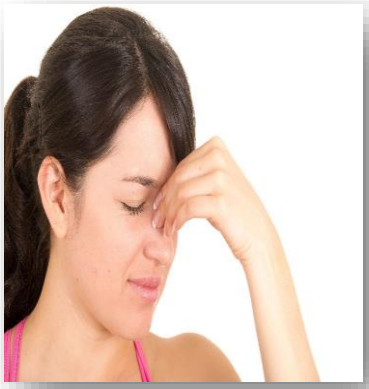
THE PARISH NURSE NEWS…

Sinusitis

Signs and symptoms



- Pain about your eyes or cheeks
- Fever
- Difficulty breathing through your nose
- Toothache (uncommon)

Your sinuses are cavities in the bone around your nose. There are four pairs of sinuses: the frontal (in your forehead), ethmoid (between your eyes), sphenoid (deeper in your head, behind your eyes), and maxillary (in your cheekbones). They are connected to your nasal cavities by small openings. Normally, air passes in and out of your sinuses and mucus drains through these openings into your nose.

Sinusitis is an infection of the lining of one or more of these cavities. Usually, when your sinus is infected, the membranes of your nose itself also swell and cause a nasal obstruction. Swelling of the membranes of your nose may close off the opening of your sinus and thus prevent drainage of pus or mucus. Pain in your sinus may result from inflammation itself or from the pressure within your sinus that results from closure of the opening.

The infection can be bacterial, viral, or fungal. A common cold is the most frequent precipitating factor in sinusitis. Because the mucous membranes of your nose extend into and line your sinuses, a bacterial infection in your nose easily spreads into your sinuses.

Secondary infections from colds are the most common causes but not the only ones. Chronic allergic rhinitis (hay fever) can cause sinusitis because infections can easily form in the mucus present in your nose and spread to your sinuses. A severely deviated septum can lead to sinusitis by obstructing your sinus openings. A dental abscess can extend from the root of an upper tooth to infect your sinuses.

There are two forms of sinusitis, acute and chronic. Acute sinusitis is more common by far and usually is a bacterial infection. Examples include an infection after a cold, a dental abscess, and a deviated septum.

Chronic sinusitis is most often the result of repeated or untreated acute infections. The opening of your sinus becomes narrowed or closed due to scarring form previous infections, making it difficult for your sinus to drain.

Some people never get sinusitis. Others seem to get it every time they have a cold. In some, it develops as a result of jumping into water so that their noses and sinuses are suddenly flooded. The irritation and contamination result in sinusitis.

Diagnosis

If you experience symptoms of sinusitis, see your physician. If you have repeated or chronic sinusitis, your physician may recommend X-rays or a CT scan to discover how serious your infection is. Your physician may take a sample of the mucus or pus, if present, for laboratory analysis.

How Serious Is Sinusitis?

Before the advent of antibiotics, sinus infections commonly spread into the bones of the face and occasionally into the brain. Today, sinusitis is unpleasant, but it rarely is a threat to general health. If left untreated, however, sinusitis can become chronic, making it more difficult to treat.

Treatment

There are a few things you can do yourself to lessen the symptoms. Stay indoors in an even temperature. Refrain from bending over with your head down-this movement usually increases the pain. Try applying warm facial packs or inhale steam from a kettle or basin of boiling water. (Be careful not to scald yourself.) Drink plenty of liquids to help dilute the secretions.

Medication

If your infection is bacterial, your physician will prescribe a course of oral antibiotic therapy lasting 10 to 14 days. You may take over-the-counter decongestants in the form of drops, sprays, or tablets to open the passages and encourage drainage of your sinuses. However, take care when using decongestants. They can do more harm than good by drying out your nose too much. Use them only on recommendation of your physician, and follow instructions carefully.

Surgery

Occasionally, sinusitis will persist despite medical treatment. If this happens, an experienced surgeon may perform a new surgical procedure called endoscopic sinus surgery. It offers relief with no external incisions or scarring, the option of local anesthesia, and minimal pain and swelling. The procedure gets its name from the instruments that ear, nose, and throat specialists use for the operation. Endoscopes are pencil-thin instruments of various sizes. They are equipped with viewing devices and used with tiny cutting tools. This surgery clears a tiny, yet critical, nasal passage that, when blocked, causes recurrent sinus infections. Yet this procedure often requires no hospital stay, and you can sometimes return to work the next day.

Endoscopic surgery leaves your sinuses basically undisturbed and restores natural drainage. In a pre-surgery evaluation, your physician takes 5 to 10 minutes to view the interior of your nose with an endoscope, using a local anesthetic. Your physician may also request a CT scan of your sinuses to refer to during surgery. After you're sedated and given a local anesthetic, your physician inserts an endoscope and delicate cutting tools into your nostrils and blocked sinuses. From the image projected on a monitor by the endoscope, your physician removes infected sinus membranes, polyps, and small bone fragments that block your sinuses, enlarges the sinus opening, and inserts a small vacuum to drain trapped fluids. The procedure takes 30 to 90 minutes. As a rule, you have no headaches, numbness, or swelling from the operation, although you may need antibiotics and pain medication. During the first 2 weeks, it's normal to have some discomfort and bleeding from your nose. You'll also have to make weekly visits to your physician for about 3 weeks to have dried blood and secretions removed. Occasionally, sinus blockage redevelops, and surgery must be repeated. Complications, although rare, can be serious, so choose an experience surgeon.

If endoscopic surgery is not available or cannot be performed, conventional surgery using local anesthesia may be considered. The surgeon makes a small opening in the bone between the nose and infected sinus, and then the sinuses are flushed out with sterile water.

Postnasal Drip

Mucus produced in your nose and sinuses travels in a thin film to the back of your throat. It serves to protect your lungs by trapping dust and other particles that you inhale. Generally, you are unaware of this process and swallow the mucus and the impurities it captures. Swallowing this mucus does no harm. It does not need to be spit out.

Normally, your nose and sinuses produce a cupful or more of mucus daily. However, when smoke or other irritants aggravate your nose, the amount of mucus will increase. This extra mucus, secreted to remove more irritants, is often the cause of the discomfort commonly referred to as postnasal drip.

In a sense, mucus is nature's ointment, because it helps soothe an irritated nose. You may become more conscious of it when the air is dry because then the mucus in your nose and throat may become thicker and more difficult to expel.