

Sinus Congestion

What is sinus congestion?

When your child has sinus congestion, he or she will have a sensation of fullness, pressure, or pain on the face in an area overlying a sinus. The nose has seven bony air-filled chambers (sinuses) that help to warm and humidify the air passing through it.

With sinus congestion:

- The pain can be above the eyebrow, behind the eye, or over the cheek bone.
- The pain is usually on just one side of the face.
- The nose is runny or blocked.
- Your child has a sensation of continuous postnasal drip.

It is helpful if a physician has diagnosed your child with sinus congestion one or more times in the past. This condition tends to be recurrent.

What is the cause?

Sinus congestion occurs when the sinus openings are blocked and normal sinus secretions build up and cause a sensation of pressure and fullness. Sinus congestion occurs mainly with colds and hay fever.

How long does it last?

Without treatment, the sinuses usually open after about a week. The main complication occurs when bacteria multiply within the blocked sinus, causing a sinus infection (sinusitis). This leads to fever and increased pain. Sometimes the overlying skin (around the eyes or cheeks) becomes red or swollen. This type of sinusitis needs antibiotics.

Frequent throat-clearing of postnasal secretions usually leads to a sore throat. Recent studies have shown that sinus infections can cause a chronic cough (or even wheezing by children with asthma).

How can I take care of my child?

- **Nasal washes**

Use warm water or saline nosedrops followed by suction or nose blowing to wash dried mucus or pus out of the nose. Do these nasal washes at least four times a day or whenever your child can't breathe through the nose. If the air in your home is dry, run a humidifier.

- **Decongestant nosedrops or spray**

If the sinus still seems blocked after the nasal washes, use long-acting decongestant nosedrops or sprays. These are nonprescription items; ask your pharmacist to recommend a brand. The usual dose for adolescents is two drops or sprays per side, twice a day. For children over age 6 use one drop or spray.

Before you use nosedrops or a spray, your child should clear his nose by sniffing or nasal suction. The openings to the sinuses are on the outer side of the nasal passages. Point the nasal spray in this direction. To deliver nosedrops to the sinuses, put them in while your child is lying on a bed with his head tipped back and turned to one side.

Use nosedrops or a spray routinely for the first 2 or 3 days of treatment. Then don't use them again unless the sinus congestion or pain recurs. The drops or spray must be stopped after 5 days to prevent rebound swelling.

- **Pain relief**

Your child may take acetaminophen or ibuprofen to relieve pain until the obstructed sinus is opened. The application of ice over the sinus may also help to relieve pain.

- **Oral antihistamines**

If your child also has hay fever, give him his allergy medicine.

- **Contagiousness**

Sinus infections are not contagious. Your child can return to school or day care when he is feeling better and the fever is gone.

- **Prevention**

Jumping into the water feet first can cause sinusitis of the frontal sinuses and should be avoided unless the nose is pinched. Swimming does not worsen sinusitis, but deep diving should be forbidden unless your child wears nose plugs.

When should I call my child's health care provider?

Call **IMMEDIATELY** if:

- Redness or swelling occurs on the cheeks or eyelids.
- Your child starts acting very sick.

Call within 24 hours if:

- Sinus pain persists more than 1 day after your child starts treatment.
- The sinus congestion persists for more than 1 week.
- Your child has a fever for more than 3 days.
- Nasal secretions become yellow or green for more than 3 days with sinus pressure.
- You have other concerns or questions.

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