



## Sinusitis and Allergy

### Frequently Asked Questions

This document has been developed by [ASCIA](#), the peak professional body of clinical immunology/allergy specialists in Australia and New Zealand. ASCIA information is based on published literature and expert review, is not influenced by commercial organisations and is not intended to replace medical advice. For patient or carer support contact [Allergy & Anaphylaxis Australia](#) or [Allergy New Zealand](#).

#### Q 1: What is sinusitis?

Sinusitis is an inflammation of the tissue that lines the hollow spaces within the cheekbones, around the eyes and behind the nose known as the sinuses. It is commonly caused by bacterial infection following a viral infection such as the common cold.

The sinuses are connected to the nose by narrow tubes and their function is to warm, moisten and filter the air we breathe on its way to the lungs, and to help form certain sounds during speech. The sinuses also produce fluid (mucus) which drains out of the narrow passages in the nose, keeping it clean and free of bacteria, allergens, and other germs.

When there is inflammation of the sinus tissue, the narrow tubes become blocked. This stops mucus draining out of the nose causing pain and discomfort in the face as the pressure inside the sinuses increases. Blocked sinuses create an environment where bacteria may overgrow, causing infection.

#### Q 2: What increases the risk of developing sinusitis?

Factors that increase the risk of developing sinusitis include:

- Problems with the structure of the cartilage tissue in the nose (such as a deviated septum).
- Smoking
- Nasal polyps
- Overuse of decongestant nasal sprays.
- Allergies such as allergic rhinitis, especially if untreated or poorly controlled.

#### Q 3: Why is allergy a risk factor for developing sinusitis?

People with allergy are at risk of developing sinusitis due to chronic inflammation of the nasal sinus and mucus linings. When these areas become inflamed, the narrow tubes become blocked and are no longer able to drain mucus from the sinuses. Bacteria can become trapped in the sinus cavities causing what is known as a secondary bacterial infection.

A doctor or pharmacist can advise the best way to manage symptoms, reducing the risk of developing sinusitis. This might include avoiding the allergens that trigger symptoms or taking prescribed medications to control them. It is also important to avoid environmental irritants such as tobacco, smoke, and odours, as these may make symptoms worse.

### Q 4: What are the symptoms of sinusitis?

The symptoms of sinusitis vary depending on the severity of the inflammation, and which of the sinuses are involved:

- Blocked nose.
- Pain and tenderness around the cheeks, eyes, or forehead.
- Sensation of congestion or pressure in the head that is worse with leaning forward.
- Loss of sense of smell or taste.
- Bad breath and/or bad taste in the mouth.
- Sore throat and/or cough.
- Poor sleep (often due to obstructive sleep apnoea/snoring) and tiredness during the day.
- Headache.
- Toothache and/or pain along the jawline.
- Postnasal drip (mucus running down the throat, often causing a cough).
- Thick, green, or yellow coloured mucus from the nose or going down the back of the throat. \*
- High temperature and/or shivering (fever). \*

\*It is important to see a doctor if these symptoms are present.

### Q 5: What types of sinusitis are there?

**Acute sinusitis** can last for up to three weeks and is caused by bacterial infection in most cases. This usually occurs as a secondary complication of a viral respiratory infection such as the common cold, or because of untreated allergies.

**Chronic sinusitis** can last for more than three weeks. This can also be caused by bacterial infection or a chronic inflammatory disorder such as asthma. Chronic sinusitis can last for months or years if not treated. Allergies, structural problems in the nose or conditions affecting the immune system may also lead to chronic sinusitis.

### Q 6: How is sinusitis diagnosed?

To confirm the diagnosis, a doctor will ask about medical history and conduct a physical exam. Allergy testing such as skin prick tests or blood tests for allergen specific immunoglobulin E (IgE) may be needed. An X-ray of the sinuses can also be helpful. Once a diagnosis has been confirmed, treatment options can then be discussed.

### Q 7: Is there a difference between sinusitis and rhinitis?

Sinusitis involves the tissue that lines the sinus cavities.

Rhinitis is an inflammation of the mucus membrane of the nose. It is sometimes the result of allergies known as allergic rhinitis (hay fever). Increased sensitivity to irritants such as smoke, temperature changes or the overuse of decongestant nasal sprays can also cause rhinitis.

If the symptoms of rhinitis are not well controlled or treated it can lead to sinusitis.

### Q 8: What treatments are available for sinusitis?

Sinusitis symptoms may resolve without antibiotics. For people who experience frequent sinus infections, it is important to identify and treat the underlying problems, such as allergy. Treating symptoms quickly will often prevent the need for antibiotics.

Examples of treatments include:

- **Steam inhalations** - using a bowl of hot water with a towel over the head and breathing in the steam helps to thin the mucus, making it easier to drain.

- **Saline (salt water) treatments** - using a spray or rinse can help to wash the surface of the sinuses and thin mucus allowing it to drain more easily.
- **Antibiotics** may be prescribed by a doctor for symptoms that do not resolve.
- **Surgery** by an ear nose and throat specialist to drain the sinuses, remove polyps and/or diseased tissue may be required for some people with chronic sinusitis if medications do not control symptoms.

© ASCIA 2024

Content updated February 2024

For more information go to [www.allergy.org.au/patients/allergic-rhinitis-hay-fever-and-sinusitis](http://www.allergy.org.au/patients/allergic-rhinitis-hay-fever-and-sinusitis),  
[www.allergy.org.au/patients/asthma-and-allergy](http://www.allergy.org.au/patients/asthma-and-allergy) and [www.allergy.org.au/patients/allergy-treatments](http://www.allergy.org.au/patients/allergy-treatments)

To support allergy and immunology research go to [www.allergyimmunology.org.au/donate](http://www.allergyimmunology.org.au/donate)