Practice Guidance for Judicious Use of Antibiotics

In the well-appearing patient, antibiotics are not the answer.

Acute Sinusitis / Rhinosinusitis — Adults

Sinus congestion/pressure, nasal discharge

UPPER RESPIRATORY INFECTION WITH MILD TO MODERATE DISCHARGE LASTING < 10 DAYS

OR

Severe symptoms lasting < 3 days

Purulent nasal secretions or sputum do not predict bacterial infection.

The majority of case of acute rhinosinusitis seen as outpatients are caused by uncomplicated viral upper respiratory infection.

Treatment of viral infections with antibiotics does nothing to prevent complications or improve symptoms.

Management

Nasal corticosteroid spray (particularly in patients with allergic rhinitis)

Sinus irrigation

Acetaminophen or ibuprofen as needed

Supportive care

These guidelines were produced in collaboration with the Infectious Diseases Society of Oregon.

Oregon Alliance Working for Antibiotic Resistance Education
Oregon Health Authority/Public Health Division
Acute and Communicable Disease Prevention
800 NE Oregon, Ste. 772, Portland OR 97232
Phone: 971-673-1111 Fax: 971-673-1100
www.healthoregon.org/antibiotics
oregon.aware@state.or.us

Persistent symptoms for > 10 days
WITHOUT IMPROVEMENT

OR

SEVERE SYMPTOMS AND PURULENT NASAL DISCHARGE OR FACIAL PAIN FOR >3 DAYS AT BEGINNING OF ILLNESS

OR

Worsening of Symptoms (New Fever, Headache, Nasal Discharge) after having initially Improved after 5 days of a typical upper Respiratory infection

Management

Amoxicillin 1g po bid x 5–7 days (macrolides are not recommended due to high rates of resistance).

Use high dose amoxicillin (2g po bid) if risk factor for penicillin-resistant pneumococcus (PCN resistance ≥ 10%, severe infection, day care exposure, advanced age, immunocompromise, recent hospitalization or antibiotic use in past 3 months)

Treatment failure: High dose amoxicillinclavulanate

If PCN allergic: Doxycycline

Consider Adjunctive Therapy:

- Nasal corticosteroid spray
- Sinus irrigation

If still no improvement after 72 hours, consider imaging or ENT consultation.