# Persistent runny noise / rhinosinusitis - Advice Sheet





Advice for parents and carers

A runny nose is extremely common in young children. It is usually caused by coughs and colds, which your child can catch repeatedly, especially over the winter months. It is more common in children attending nursery/childcare. A cold typically lasts 7-10 days but when your child catches another infection before they have fully recovered from the first it can seem like it is going on forever! Very few children with persistent runny noses require prescribed treatments such as antibiotics.

### When should you worry?



RED

If your child has any of the following:

- Becomes pale, mottled and feels abnormally cold to touch
- Is going blue around the lips
- Has a fit / seizure
- Becomes extremely agitated (crying inconsolably despite distraction), confused or very lethargic (difficult to wake)
- Develops a rash that does not disappear with pressure (the 'Glass Test')

You need urgent help.

Go to the nearest Hospital Emergency (A&E) Department or phone 999

#### If your child has any of the following:

- Severe pain in eyes
- Redness and swelling of the skin around the eyes
- Extreme sensitivity to light (photophobia)
- Changes in vision including flashing lights (vision can appear blurred or misted because of discharge smeared over the surface of the eye, but this will usually clear on blinking or wiping the eyes)
- Severe headache
- Persistent vomiting
- Babies under 28 days with a red eye(s) or lots of thick pus from their eye(s). A sticky eye(s) without redness or swelling is quite common in babies due to blocked tear ducts - this does not require review by a doctor
- Is having breathing problems, such as rapid breathing, shortness of breath or laboured breathing (drawing in of muscles below the lower ribs when they breath in)
- Seems dehydrated (dry mouth, sunken eyes, no tears, drowsy or passing less urine than usual)
- Is becoming drowsy (excessively sleepy) or irritable (unable to settle them with toys, TV, food or picking up) - especially if they remain drowsy or irritable despite their fever coming down
- Has extreme shivering or complains of muscle pain
- Is under 3 months of age with a temperature about 38°C/100.4°F or 3-6 months of age with a temperature above 39°C/102.2°F (but fever is common in babies up to 2 days after they receive vaccinations)
- Is getting worse or if you are worried

You need to contact a doctor or nurse today.

Please ring your GP surgery or call NHS 111 - dial 111



AMBER

■ If none of the above features are present

Self Care
Continue providing your child's care at home. If you are still concerned about your child, call NHS 111 – dial 111

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## Symptoms that suggest that specific treatment is required

- Persistent offensive discharge (green or bloody mucus) lasting longer than 10 days
- Completely blocked nose
- Pain and tenderness on one side of the face, around eyes or forehead
- Headache
- Fever

### Causes of rhinosinusitis

Most cases of rhinosinusitis in children are caused by an infection; your child may also have a sore throat, cough or earache.

### **Treatment**

Most children with rhinosinusitis do not need treatment with antibiotics - they recover just as quickly without them and can avoid some of the side effect that antibiotics can cause.

If your child has any features of severe infection (amber or red features), they will need to be assessed urgently by a healthcare professional.

You can help relieve symptoms by:

- Giving your child paracetamol or ibuprofen to help relieve pain
- Holding a warm clean flannel over their face for a few minutes several times day
- Encourage your child to drink plenty of fluids

It can take up to 2 weeks for a child to fully recover from rhinosinusitis.