Cochrane Reviews on the Medical Management of Chronic RhinoSinusitis (CRS)

The following slides summarise recent systematic reviews of medical research, which have been published by the Cochrane Collaboration. Cochrane review the quality of the evidence and conclusions from related studies and tries to draw overall conclusions, together with an assessment of their strength. You can find more details by following the links below the slides to the Cochrane Review pages. You may also find something to interest you in the other links to webpages and twitter feeds at the end of the document.

**Evidence for Everyday Health Choices**

**Antibiotics for chronic rhinosinusitis**

There is little evidence that antibiotics are effective for treating chronic rhinosinusitis. A three month course of antibiotics probably leads to a modest improvement in disease-specific quality of life in people without polyps, but the benefit doesn’t appear to last.

New Cochrane review; 5 studies, 293 people (adults and children, with and without nasal polyps), comparing oral antibiotics with intranasal or oral steroids

[Links to Cochrane reviews](http://www.cochrane.org/CD011994/ENT_systemic-and-topical-antibiotics-chronic-rhinosinusitis)

**Evidence for Everyday Health Choices**

**Different types of intranasal steroids for chronic rhinosinusitis**

There is not enough reliable evidence to show the relative effectiveness of different types of intranasal steroids or how drops, sprays and aerosols compare. It is unclear if higher doses result in better symptom improvement but they probably increase the risk of nosebleeds.

New Cochrane review; 9 studies with 910 adults and children, with chronic rhinosinusitis and nasal polyps

[Links to Cochrane reviews](http://www.cochrane.org/CD011993/ENT_different-types-intranasal-steroids-chronic-rhinosinusitis)
Evidence for Everyday Health Choices

There may be some improvement in severity of all symptoms and there is probably a moderate benefit for blocked nose and a small benefit for runny nose. The risk of nosebleeds is increased.

New Cochrane review; 18 studies with 2738 people (1 study with children), with chronic rhinosinusitis. Most also had nasal polyps.

http://www.cochrane.org/CD011996/ENT_intranasal-steroids-versus-placebo-or-no-intervention-chronic-rhinosinusitis

Evidence for Everyday Health Choices

There appears to be no benefit of low volume nebulised saline over intranasal corticosteroids. There may be some benefit of daily large volume saline irrigation compared with placebo.

New Cochrane review; 2 studies, 116 adults. One compared 150ml hypertonic saline irrigation with usual treatment; the other compared 5ml nebulised saline spray with intranasal corticosteroids.

http://www.cochrane.org/CD011995/ENT_saline-irrigation-chronic-rhinosinusitis
There may be an improvement in symptom severity, polyp size and condition of the sinuses (assessed by CT scan) in people taking a short course of oral corticosteroids as well as antibiotics or intranasal corticosteroids, but this is uncertain. It is unknown whether any benefit lasts beyond the 30 day follow-up period reported in the studies.

New Cochrane review; 1 study with 30 adults who had nasal polyps and 1 study with 48 children (no polyps)

http://www.cochrane.org/CD011992/ENT_short-term-oral-corticosteroids-addition-other-treatments-chronic-rhinosinusitis
Other links:
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