SYMPTOM

Stuffy or runny nose - adult

A stuffy or runny nose is nasal blockage, excess drainage, or both.

WHAT IT FEELS LIKE
A blocked nose, dripping mucus, or both

WHERE IT IS FELT
Inside the nose and sometimes the face

MOST COMMON CAUSES
Colds, allergies, smoke or other irritants

WHEN IT IS URGENT
Eye swelling or vision changes with sinus symptoms

USUALLY LASTS
Days with a cold; longer with allergies or structural causes

SEE A DOCTOR IF
Symptoms lasting over ten days without improvement

Overview

A stuffy nose happens when tissues inside your nose become swollen. A runny nose happens when the nose makes extra mucus. You may have either symptom or both at the same time.

Common causes include a viral cold, allergies, and irritation from smoke, perfume, weather changes, or pollution. Some medicines and problems with the shape or lining of the nose can also cause ongoing symptoms.

The colour or thickness of mucus cannot identify the cause by itself. Yellow or green mucus can occur during a viral cold and does not automatically mean that antibiotics like amoxicillin or doxycycline are needed.

What it may feel or look like

Your nose may feel partly or completely blocked. You might have trouble breathing through one or both nostrils, especially when lying down. Mucus may drip from the front of your nose or down the back of your throat. This backward drainage is called postnasal drip.

Other symptoms depend on the cause:

One-sided blockage can happen because of swelling or the shape of the nose. If it continues, keeps bleeding, or produces foul-smelling drainage, arrange a medical assessment.

- Sneezing, itchy eyes, and clear drainage often occur with allergies
- Sore throat, cough, tiredness, or mild fever can occur with a cold
- Facial pressure and reduced smell may occur when the sinuses are inflamed
- Dryness, crusting, or small nosebleeds may follow irritation or dry air
- Mouth breathing may cause a dry mouth, poor sleep, or snoring

Common causes

The pattern of your symptoms often gives useful clues, but several causes can feel similar.

Less commonly, persistent one-sided symptoms may result from a growth or another local problem. This does not mean that a serious condition is likely, but it should be checked.

- Viral infections: Colds are a frequent cause. Symptoms often begin with a sore throat or sneezing, then develop into congestion and drainage.
- Allergic rhinitis: This means inflammation inside the nose caused by an allergen, such as pollen, dust mites, mould, or animal dander. It often causes itching, repeated sneezing, and watery drainage.
- Non-allergic rhinitis: Smoke, strong smells, pollution, cold air, spicy food, or changes in temperature can trigger symptoms without an allergy.
- Sinus inflammation: The sinuses are air-filled spaces around the nose. A cold or allergy can block their drainage and cause pressure, congestion, and reduced smell. Most short-lasting sinus infections are viral.
- Medicine-related congestion: Using certain decongestant nasal sprays longer than directed can make blockage return or worsen. Some other medicines may also contribute.
- Structural causes: A bent wall between the nostrils, called a deviated septum, or growths called nasal polyps can cause persistent blockage.
- Hormonal changes: Pregnancy and other hormonal changes can sometimes swell the nasal lining.

When to seek medical care

Call emergency services if nasal symptoms occur with severe trouble breathing, swelling of

the tongue or throat, faintness, or widespread hives. These may be signs of a severe allergic reaction.

Seek urgent medical care the same day if you have:

Book a routine appointment if symptoms last more than about ten days without improving, improve and then become worse, or keep returning. Also arrange an assessment for ongoing one-sided blockage, repeated nosebleeds, loss of smell, troublesome facial pain, or symptoms that regularly disturb sleep.

If allergies seem likely, seek routine advice when avoiding triggers and pharmacy treatments are not enough.

- Swelling around an eye, painful eye movement, or a change in vision
- Severe or rapidly worsening one-sided facial swelling or pain
- A severe headache with neck stiffness, confusion, or marked drowsiness
- Clear, watery drainage from one nostril after a significant head injury
- Fever with severe illness or rapidly worsening symptoms

How the cause is found

A healthcare professional will ask when the symptoms began, whether they affect one or both sides, and whether you have itching, sneezing, fever, facial pain, bleeding, or reduced smell. They may ask about seasonal patterns, workplace exposures, medicines, nasal spray use, and recent injuries.

They may look inside your nose for swelling, mucus, polyps, bleeding, or a structural blockage. Your ears, throat, eyes, and face may also be examined.

Tests are not usually needed for a short-lasting cold. Allergy testing may help when the trigger is unclear or symptoms continue despite treatment. A thin viewing instrument or a scan is sometimes used for persistent one-sided symptoms, suspected polyps, repeated sinus problems, or signs of a complication.

Treatment and self-care

Treatment depends on the likely cause and how much the symptoms affect you.

Saline nasal sprays can moisten the nose and loosen mucus. If you use a nasal-rinsing device, use distilled or sterile water, or tap water that has been boiled and allowed to cool. Clean and

dry the device as directed.

For allergy symptoms, reducing exposure to a known trigger may help. Antihistamines like cetirizine or loratadine can reduce sneezing and itching. Corticosteroid nasal sprays reduce inflammation and may help ongoing allergic congestion, but they often take several days to have their full effect. Follow the product instructions or advice from a pharmacist.

Decongestant sprays may provide short-term relief. Using them longer than the label recommends can cause rebound congestion, meaning the nose becomes blocked again when the medicine wears off. Oral decongestants are not suitable for everyone and may interact with other medicines. Ask a pharmacist before using them if you have a medical condition, take regular medicines, or are pregnant.

Antibiotics do not treat colds, allergies, or other viral infections. A clinician may consider them for certain bacterial sinus infections based on the pattern and severity of symptoms.

Avoid smoking and second-hand smoke. Drinking enough fluid may make thick mucus easier to clear. Rest can help when congestion is part of a viral illness.

What to expect

Cold symptoms often improve within seven to ten days, although drainage or cough can last longer. Symptoms from an irritant may settle after the exposure stops.

Allergy symptoms may continue while you are exposed to the trigger. Regular treatment and reducing exposure can make them easier to control.

Structural blockage and nasal polyps usually do not clear like a cold. If they cause ongoing problems, a clinician can discuss medicines, specialist assessment, or other treatment options.

Common questions

Does green mucus mean I need antibiotics?

No. Mucus often becomes yellow or green as immune cells collect during a cold. Colour alone cannot show whether an infection is viral or bacterial.

Can a stuffy nose be contagious?

The congestion itself is not contagious. A virus causing it may spread through droplets, close contact, or contaminated hands. Allergies and structural causes do not spread between people.

Why is my nose more blocked at night?

Lying down can increase blood flow and swelling inside the nose. Bedroom allergens, dry air, reflux, or the normal nasal cycle may also contribute.

Should I worry if only one nostril is blocked?

Temporary one-sided blockage is common because the nose naturally alternates airflow between nostrils. Arrange an assessment if the same side stays blocked, especially with bleeding, pain, or foul-smelling drainage.

Sources

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