Sinus and Nasal Surgery

This information is provided to help you understand sinus and nasal surgery and to answer some of your questions. It is not meant to replace a discussion with your doctor and our clinical team.

SINUSES:
The sinuses are four cavities or rooms opening from each side of the nose. The four sinuses are named maxillary, ethmoid, frontal, and sphenoid. The purpose of sinuses is not completely understood. Sinuses normally produce about a quart of mucus every day. Sinus infections are one of the most common problems that cause a patient to go to a doctor. Blockage of the sinuses due to a virus or allergies is one of several ways that sinus infections can occur.

Reasons for Sinus Surgery:
1. Decrease the severity and number of sinus infections
2. Make it easier to manage or cure sinus infections
3. Improve breathing if polyps are present
4. Prevent complications associated with blocked sinuses

Balloon Sinus Surgery:
Some patients may be a candidate for balloon sinus surgery. In these cases, a balloon is used to dilate the sinus opening rather than the traditional method of removing some bone and soft tissue from the sinus opening. We will use the most appropriate technique for your situation.

Expectations After Sinus Surgery:
Sinus surgery alone does not always completely cure the sinus problems. Most people are much better after sinus surgery, but most patients will still need other medical treatment to keep the sinuses in the best possible shape. Sinus surgery does not cure allergies. Do not be discouraged if you do not feel better right away after the surgery. The sinus surgery just opens up the sinuses, but the lining that has been damaged by infections may take weeks or months to heal so that the sinuses work better again. Be aware that if you have lost your sense of smell from sinus problems, it does not always return after sinus surgery. Drainage down the back of your throat usually improves but rarely goes away completely.

Alternatives to Sinus Surgery:
You should have received treatment with all reasonable medical options before considering sinus surgery. If your condition is not dangerous or significantly affecting your quality of life, there is the option to just live with the problem.

Risks from Sinus Surgery:
Any surgery has some amount of risk associated with it. Your health care provider will discuss these risks in detail with you. This list does not include every single side effect that could possibly occur.

1. Uncommon:
   a. Nosebleeds in the first few days after surgery
   b. Recurrence of polyps or sinus infections
2. Rare:
   a. Injury to the eye causing double vision or blindness
b. Spinal fluid leak

c. Loss of sense of smell

d. Brain injury or death

**NASAL SEPTUM:**
The septum of the nose is a wall made of cartilage and bone that divides the two sides of the nose. The septum can be deviated or bent due to a broken nose or sometimes it just develops that way. A deviated septum generally creates breathing problems on one side of the nose and does not change from time to time.

**Reasons for Septal Surgery:**
1. Improve breathing through the nose.
2. Reduce snoring.
3. Allow better access for sinus surgery.

**Expectations After Septal Surgery:**
Most people can breathe better through their nose after septal surgery. It is impossible to get human tissue completely straight, but we can generally straighten your septum enough to help you breathe. You may not breathe perfectly through your nose, but in most circumstances it will be a lot better. You may still need other medical treatment for other conditions such as allergy. Septal surgery does not cure allergies.

**Alternatives to Septal Surgery:**
You should have received treatment with all reasonable medical options before considering septal surgery. There are not many good medical options other than surgery for a deviated septum. If your septal deviation does not bother you much, there is the option to just live with the problem.

**Risks from Septal Surgery:**
Any surgery has some amount of risk associated with it. Your health care provider will discuss these risks in detail with you. This list does not include every single side effect that could possibly occur.

1. Uncommon
   a. Nosebleeds in the first few days after surgery
   b. Failure to relieve the blockage or recurrence of the blockage
2. Rare
   a. Change in the outside appearance of the nose
   b. A hole in the septum that may cause crusting, bleeding, and a whistling noise

**TURBINATES:**
The turbinates of the nose are found on each side of the nasal cavity. There are four turbinates on each side of the nose, but the lowest or inferior turbinates are the ones most likely to cause problems with the nose. The turbinates are bones covered by lining that can shrink and swell due to allergies, temperature or humidity changes, and a variety of irritants. They filter, warm, and humidify the air. Sometimes the turbinates get too large and block breathing. They usually block breathing on both sides of the nose, but the blockage may be worse on one side of the other depending on the time of the day.
**Reasons for Turbinate Surgery:**
1. Improve breathing through the nose.
2. Reduce snoring.

**Expectations After Turbinate Surgery:**
Most people can breathe better through their nose after turbinate surgery. We can only remove a limited portion of the turbinates, but we can generally remove enough to help you breathe. You may not breathe perfectly through your nose, but in most circumstances it will be a lot better. You may still need other medical treatment for other conditions such as allergy. Turbinate surgery does not cure allergies.

**Alternatives to Turbinate Surgery:**
You should have received treatment with all reasonable medical options before considering turbinate surgery. If your nasal blockage does not bother you much, there is the option to just live with the problem.

**Risks from Turbinate Surgery:**
Any surgery has some amount of risk associated with it. Your health care provider will discuss these risks in detail with you. This list does not include every single side effect that could possibly occur.

1. Uncommon
   a. Nosebleeds in the first few days after surgery
   b. Failure to relieve the blockage or recurrence of the blockage
2. Rare
   a. Dryness and crusting of the nose

**Can all of these surgeries be done at once?**
Yes, if needed. The sinuses, septum, and turbinates may be operated on at the same time or separately depending on the patient’s problem. The doctor, physician’s assistant, or nurse practitioner will explain to you which structures will be operated on in your case.

**What will happen before surgery?**

**X-rays:**
You will usually have a CT scan of your sinuses prior to sinus surgery; however, you may not if you are just having turbinate or septal surgery. If you have had sinus surgery before, have bad polyps, or have a complicated case, you will usually have a special CT scan done that allows us to do the surgery with special x-ray guidance in the operating room. This is called image-guided surgery. It is a lot like having a GPS map in a car or on a boat to help guide you. It helps us tell how to get around in your sinuses better. It may make your surgery safer and allow us to do a more complete surgery in difficult cases.

**Surgery Date:**
Our surgery scheduler will work with you to find a convenient date for your surgery. When you call our clinic the day before surgery, you will be told where and when to arrive for surgery and given any instructions such as to when to stop eating or drinking.
Pre-operative Evaluation:
You will be sent to the anesthesiology preop clinic or contacted by phone to be evaluated by the anesthesiology team prior to your surgery date.

Medications:
When at all possible, we will give you prescriptions for all medications you will need following surgery so you can get them filled before your surgery date if you wish.

Anesthetic:
The surgery is done in most cases with the patient completely asleep (general anesthesia).

Surgery Location and Setting:
1. The surgery is usually done as an outpatient such that the patient does not have to spend the night in the hospital. The patient can usually go home a few hours after surgery unless the patient has other medical problems that require staying in the hospital overnight.
2. We do surgery at the University Hospital Day Surgery Unit.

After Surgery:
1. You will be given a postoperative instruction sheet. It is important that you follow these instructions closely.
2. You will be given an appointment for your first postoperative visit either at the time we schedule your surgery or before you leave the hospital. It will usually be three weeks after surgery. It is important that you keep this appointment.
3. Packing is not used in the nose unless there is more bleeding than usual. Instead a gel or absorbable sponge is used in the nose that does not have to be removed. This material is slowly washed out when you do your nasal irrigations. If packing is placed, it is removed in 1 or 2 days in most cases.
4. Generally, the surgery is not very painful. However, the patient may be uncomfortable due to nasal stuffiness like they might have with a bad cold. However, pain medicine will be provided just in case.
5. The patient may feel nauseated or groggy the first day after surgery. The patient should be able to get around the house alone the first day after surgery.
6. It is advisable to have someone stay with the patient the night of surgery.
7. If you must travel a long way to go home, you may want to consider staying in the area for one night so the patient does not have such a long trip.
8. Most patients can go back to work with light activity in 5 days or less. Patients with more strenuous jobs that might require heavy lifting or straining should wait about 10 days to go back.

Things to Call Us About After Surgery:
1. High fever
2. Excessive or persistent pain
3. Constant drip of clear fluid from your nose
4. Persistent nosebleeds
5. Any trouble with your vision or eye movement

For Questions or Emergency Care:
Call the office at 601-984-5160. You may need to speak with the doctor on-call.