

SPRINGFIELD ENT & FACIAL PLASTIC SURGERY

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INSTRUCTIONS AND INFORMATION FOR SINUS SURGERY

Dear Patients: we wish your surgical experience to be as *positive* and *free of stress* as possible. Please contact our office if you have any concerns - remember, *there are no silly questions!*

PLEASE, NOT TAKE ASPIRIN, MOTRIN, IBUPROFEN, ADVIL OR SIMILAR NON-TYLENOL PAIN RELIEVERS FOR 2 WEEKS BEFORE AND AFTER SURGERY. THESE INCREASE THE RISK OF BLEEDING!

Common reasons for performing sinus surgery include:

- Chronic sinus infection despite treatment with antibiotics
- Frequent sinus infections
- Nasal polyps.

Alternatives to surgery include the following:

- No treatment - simply watching your symptoms to see if they improve or become worse.
- Medications such as antibiotics, allergy medications, or allergy shots.

What to expect during surgery:

- May be performed with either local anesthesia plus sedation or with general anesthesia.
- Normally performed as outpatient surgery.
- Most sinus surgery is performed with lighted scopes and equipment through the nostrils without external incisions. In occasional cases, incisions in the skin or in the mouth beneath the upper lip are necessary.
- Surgery normally lasts for several hours.
- Straightening of the nasal septum may be necessary. The septum is a wall that divides the nasal cavity into the right and left sides. This procedure is called **septoplasty**, and is performed to:
 - Improve nasal blockage.
 - Enhance sinus drainage in some cases.
 - Allow better access for working on the sinuses.
- The lower or middle turbinates may need to be partly removed or cauterized to reduce their size to help improve nasal obstruction.

What to expect after surgery:

- **Pain** - Generally mild to moderate, and well - controlled with pain medicine.
- **Scabbing and crusting** - Common for several weeks. Nasal irrigation reduces this. See our separate instruction sheet on rinsing the nose with salt water.
- **Nasal obstruction** - The nose may feel plugged for several weeks after surgery.
- **Packing** - May be placed in the nose for several days or a week. Removal may be uncomfortable - taking pain medication beforehand on that day may be helpful.

- **Office appointments** - We will usually see you once per week for several weeks to look in nose with scope and remove crusts and debris. It is helpful to take pain medicine before these visits.
- **Medication** - You will be given a prescription for pain medication and / or antibiotics during your preoperative visit. Patients with sinus problems frequently benefit from allergy type medication after surgery.

Activity after surgery:

- **Activity** - Avoid strenuous activity for about 3 weeks after surgery.
- **Nose blowing** - Gentle nose blowing is OK after 2 - 3 weeks.
- **Irrigation** - Rinsing the nose with a baby bulb syringe 4 times daily / as necessary helps reduce crusting. Used for 3 - 4 weeks after surgery until fully healed in nose:
 - 8 oz warm water + 1/2 tsp salt + 1/4 tsp baking soda.
 - Insert tip of bulb into nose, compress nostril around to form a seal.
 - Lean forward and irrigate firmly several times on each side.
 - Solution usually drains out mouth and the other nostril; it can be messy!
- **Saltwater spray** - (Salinex, Ocean Spray, etc.) can be used 4 times daily after discontinuing the bulb irrigation.

Risks of surgery include: All surgery involves certain risks, including death, infection, and bleeding, and anesthesia complication. Sinus surgery is usually safe, but some of the risks include:

- **Infection** - sinus surgery is usually performed because of infection, and the possibility exists for spread of infection to areas around the nose and sinuses.
- **Vision** - the eyes and nerve to the eyes (optic nerve) are located adjacent to the sinus so that vision impairment or loss of vision is a possible complication.
- **Brain and other nervous structures** - The brain, some nerves, and related structures are adjacent to the sinuses so that injury to these or leakage of cerebrospinal fluid (fluid surrounding the brain) is a possible complication.
- Injury to the nose, sense of smell, or other nearby structures.
- Possible need for further medical / allergy treatment or surgery.

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