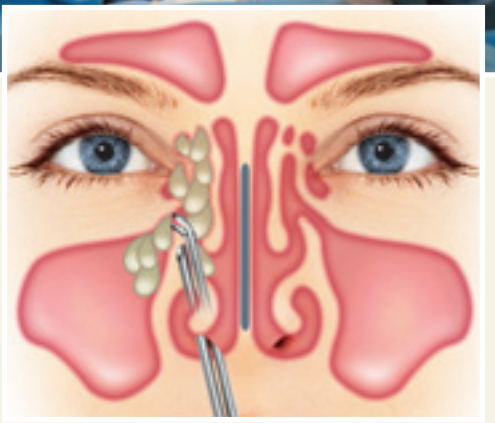
SINUS SURGERY



A Patient Guide to the Sinuses and Nose

Ballard Ear, Nose & Throat and Allergy Clinic

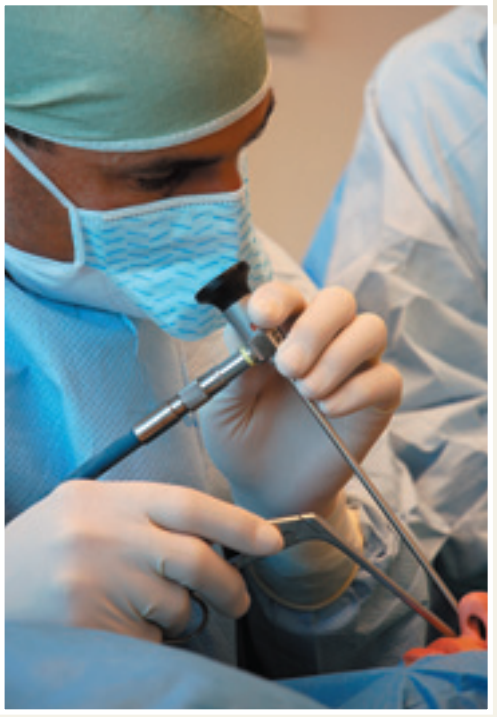
William A. Portuese, M.D.

Signs & Symptoms of Chronic Sinusitis

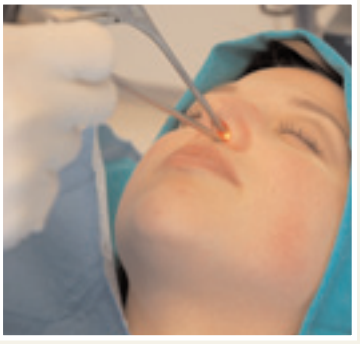
- Facial Headaches
- Facial Pressure / Pain
- Allergies and Hayfever
- Repetitive Sinus infections
- Nasal Congestion / Obstruction
- Yellow / Green discharge from nose - Chronic or Intermittent
- Decrease in Smell
- Decrease in Taste
- Trouble Flying in Airplane / Scuba Diving
- Post Nasal Drip, Drainage
- Chronic Cough / Bronchitis

Endoscopic sinus surgery is designed to relieve these above symptoms

ENDOSCOPIC SINUS SURGERY

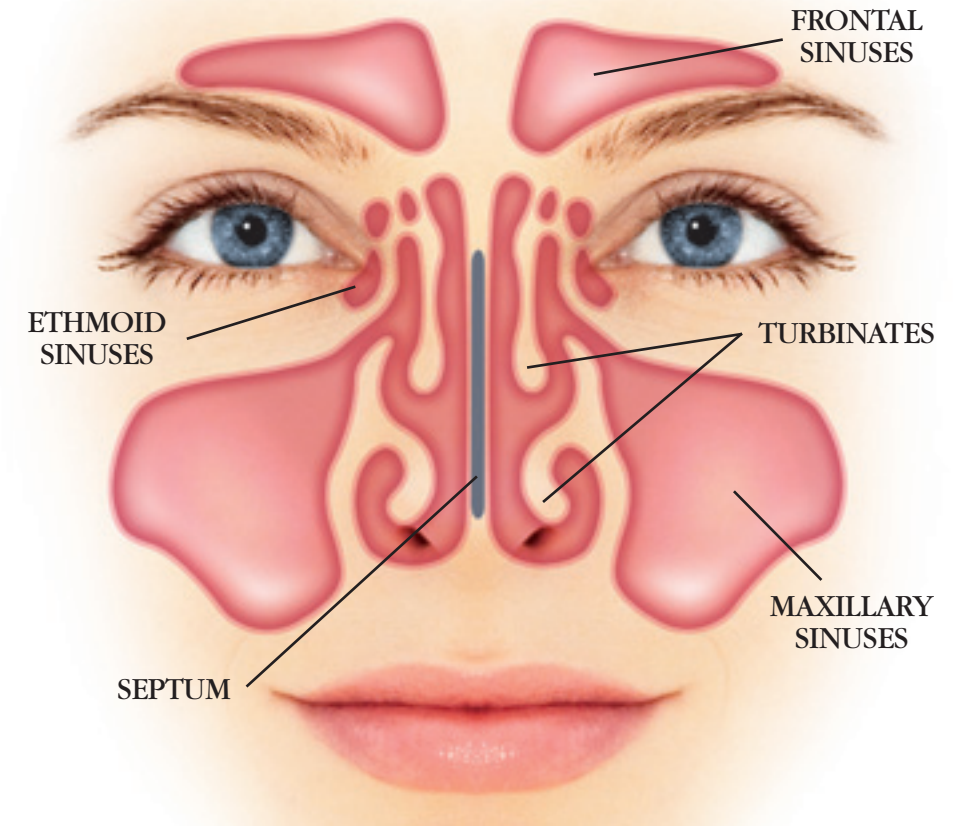


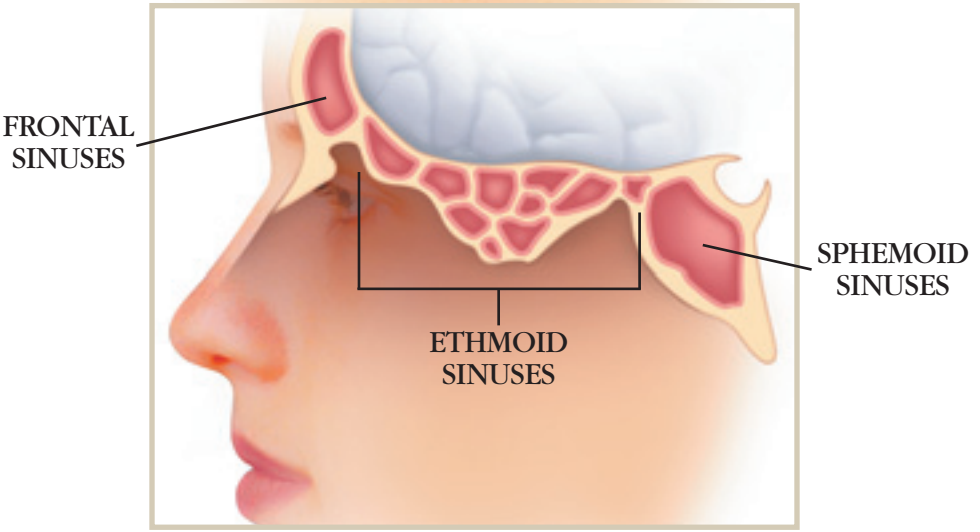
Endoscopic Sinus Surgery is a delicate technique using very fine, lighted, fiberoptic telescopes inserted in the nose / sinuses, while directing instruments to open up sinuses and remove polyps. Visualization of the diseased sinuses is performed through the endoscope and sinuses are cleaned out, opened up and polyps removed. In many instances a deviated septum is also corrected at the same time and enlarged turbinates are made surgically smaller to improve airflow through the nose. All incisions are placed inside the nose.



Nasal Endoscope

NORMAL SINUS ANATOMY





SIDE VIEW OF NORMAL SINUSES

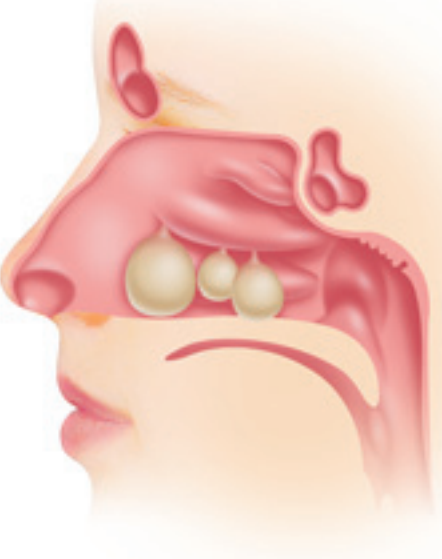
DEVIATED SEPTUM

This creates nasal obstuction and can cause headaches.

ACUTE SINUSITIS

This is caused by bacterial inflamation of sinus.

SINUS POLYPS FRONT VIEW

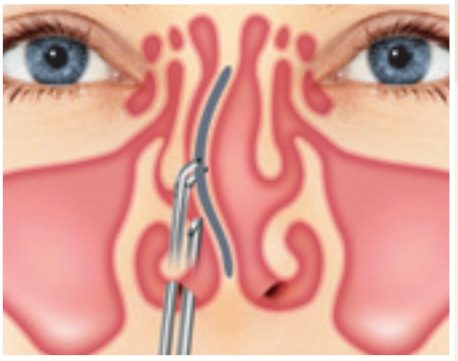


SINUS POLYPS SIDE VIEW

Polyps develop in sinuses from long term infections, allergies and sinusitis.

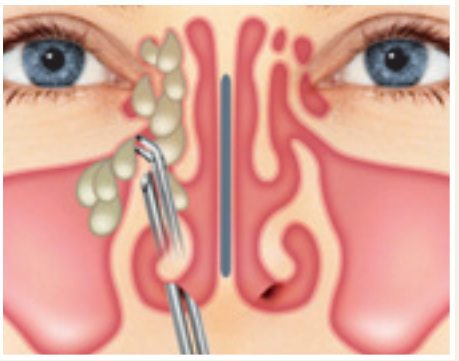
SINUS SURGERY

DEVIATED SEPTUM

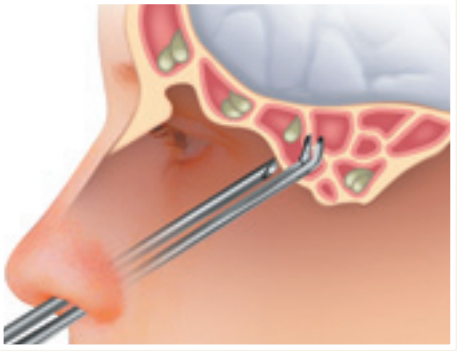


Non-structural cartilage or bone may be removed to reshape and straighten the septum.

POLYP REMOVAL

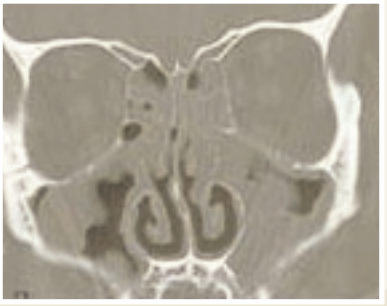


The tiny forcepts are inserted next to the endoscope to remove the polyps and open windows into the sinuses for drainage.



Bony partitions of ethmoid sinuses are removed to create a passage for mucus to drain. Polyps are also removed.

CT of Normal Sinuses



CT of Diseased Sinuses—Polyps

THE SURGERY

Endoscopic sinus surgery is usually performed as an outpatient procedure in our in-office, Medicare Certified Surgery Center. Board Certified Physician Anesthesiologists from Swedish Medical Center perform the anesthesia. Surgery normally takes an hour to perform and patients then go to the recovery area for about an hour. Once medically stable, they are discharged to a responsible caregiver.

The following instructions are based on experience with many similar procedures and are designed to answer questions that may arise regarding post-operative care. Please follow the instructions—those who do generally have the smoothest post-operative recovery. Do not hesitate to call us should you have additional questions.

THE DAY OF SURGERY

1. Wash your hair and face well, brush your teeth and remove all cosmetics.
2. Do not apply lotion to your face.
3. Do not wear contact lenses the day of surgery.
4. Do not eat or drink anything after midnight the night prior to your surgery.
5. Wear a shirt that is button or zip front, comfortable pants and flat, slip-on shoes.
6. Please leave valuables and jewelry at home and arrive on time.
7. Follow the preparation instructions given to you at your pre-op visit and be sure to bring your prescribed medications with you to your surgery.
8. Please bring the phone numbers of where you will be staying after the surgery, as well as the name and phone number of your caregiver.

WHAT TO EXPECT AFTER SURGERY

Headache, pain and nasal congestion are common after nasal / sinus surgery. Typically patients cannot breathe out of their nose for the first week. There is NO packing placed inside the nose or sinuses. All incisions are placed inside the nose. There is usually no swelling or bruising on the outside of the nose unless a Rhinoplasty is performed at the same time.

Patients are seen back in the office approximately 7 days after surgery. Sinus debridements / clean-outs are performed at the first and second week after the surgery. This is done to remove blood, mucus and crusts that build up in the sinuses to allow maximum healing.

POST-OPERATIVE CARE

- Do not participate in any activity that will raise your blood pressure or pulse for two weeks following surgery.
- Stay upright as much as possible. Avoid bending over or lifting heavy objects for one week. Sleep with your head elevated at a 30 degree angle for 3-5 days.
- Take pain medication as prescribed. It is OK to substitute Tylenol if the pain medication is too strong or causes nausea. It is important to stay well hydrated after surgery.

- Constipation is a common side effect of pain medications. Take a mild laxative. Avoid straining with bowel movements.
- Swelling usually peaks the second or third day after surgery.
- Avoid hitting, bumping or excessive touching of the surgical area.
- Do not apply ice to the surgical area.
- You will be given gauze bandages to place under your nose to absorb drainage. You may be changing this dressing every hour the first day; this is normal. The bleeding and drainage should diminish by the following morning.
- Do not blow your nose for two weeks following surgery.
- If you need to sneeze, do so with an open mouth.
- You may have an external nasal splint. This will remain until your first post-operative appointment. Please keep it dry.
- You may shower the day after surgery.
- Avoid contact sports or activities such as skiing for two weeks.
- No aspirin, Ibuprofen, Vitamin E or herbal supplements 2 weeks ***before*** and 2 weeks ***after*** your surgery.

CALL THE OFFICE

If you have any questions or problems such as nausea, rapid swelling or redness of the operative area, rash / itching or fever above 102 degrees, call the office immediately. Also call if you are unable to urinate, are experiencing severe headache, stiff neck or excessive drainage from the surgical area (saturating five gauze pads per hour for a period of at least two hours).

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