

Nose & February 20 Sinus Surgery



Types of Nose Surgery

Nasal Polypectomy

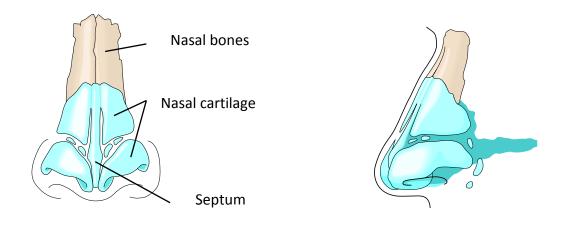
• Removes polyps (pale, grey swellings that may interfere with breathing).

Septoplasty

• Repairs a deviation of the nasal septum to relieve a nasal blockage or improve sinus drainage.

Septorhinoplasty

• Changes the shape of the nose for cosmetic reasons or to repair an injury. You may need a plaster cast for about 7 days.



Immediately After Surgery

- Blood is often swallowed during and after your surgery. It is not uncommon to vomit (throw up) old blood.
- If you feel sick to your stomach, ask the nurse for medication.
- You will have bad breath and a taste in your mouth caused by bleeding, post nasal discharge and mouth breathing. Brushing your teeth and using mouthwash often will help.
- You might have packing in your nose. A small dressing under your nose called a "drip pad" or "moustache dressing" will be changed regularly.
- It is normal to have bleeding and a mild headache for 1-2 weeks.
- It is normal for your nose to be painful or swollen.
- It is normal to have clear nasal discharge.
- Avoid forcefully blowing your nose (for 7 10 days after surgery).
- Ask your nurse for medication, if needed.

- You may apply an ice bag on your eyes to help with swelling and discomfort.
- Sleep with your head elevated (raised up) on pillows. This reduces swelling and helps you breathe easier.
- If any bones needed to be rebroken and set, swelling and bruising under and around eyes is common.
- Numbness of top teeth and lip are common and usually resolves after a few weeks to a few months.
- You may have spacers in the sinuses (stents) or stabilizers (splints either inside or outside). These will be removed in the office 2 3 weeks after surgery.
- Your intravenous (I.V.) will be disconnected when you are drinking enough and not feeling sick to your stomach.
- Ring for the nurse to help you get up the first time. You may still be drowsy.
- If you have packing, it is usually dissolvable and can be washed out with saline, starting 2 3 days after surgery.

At Home

Safety

• You should not go home alone. Go home with a family member or friend.

Discomfort

- Do not take Aspirin[®] (ASA, acetylsalicylic acid), Advil[®], ibuprofen or similar medications.
- You should take Tylenol[®] according to the package directions, in addition to your regular medications. Tylenol[®] will help your medications work and may reduce the dose you need.
- Your doctor may give you a prescription for pain pills.
- Do not drink alcohol while taking pain pills.
- 1 day after surgery, begin saline (salt water) flushes you may make your own or buy it premade at the pharmacy.

For 2 Days After Surgery

• Do not drive a car.

For 2 Weeks After Surgery

- Do not lift more than 5 pounds.
- Talk with your doctor about when you can return to work or school.

For 2 Weeks After Surgery, Avoid:

- Trauma to your nose.
- Straining.
- Violent sneezing sneeze with your mouth open to avoid increasing pressure in your nose.
- Forceful blowing of your nose (for 7 10 days after surgery).
- Excessive dryness.
- Overheating (sunbathing or hot baths).
- Picking your nostrils.

What are your questions? Please ask. We are here to help you. In Nova Scotia you can call 811 to talk with a registered nurse about your health care questions 24/7.

You Should

- Apply Vaseline[®] ointment to both nostrils twice a day.
- Use more ointment if you have severe crusting and obstruction (blockage).
- Only use nasal sprays if prescribed. Start using these gently the day after surgery if recommended.
- Get plenty of rest.
- Drink plenty of fluids.
- Hold any steroid sprays until all stents, splints and packing have been removed or flushed (usually 2 weeks).
- Contact your doctor if you have:
 - An unusual amount of pain or tenderness.
 - High fever.

If you have slight bleeding from your nose, sit comfortably and lean forward. Firmly compress (squeeze) both nostrils and hold for 3 – 5 minutes. A cold compress over the forehead may help and feel good. 95% of episodes are controlled this way.

If severe bleeding does not stop, or is interfering with sleep or regular low strain activity, go to the nearest Emergency Department immediately.

<u>Note:</u> Mild bleeding is normal for 1 week.

Report the problems below immediately to your surgeon or go to the nearest Emergency Department:

- A possible complication of this surgery is leakage of fluid from around the brain through the nose. This is clear drainage or it may be mixed with blood that tends to stay in the center surrounded by clear fluid. The drainage may increase with straining. This can happen 1 – 4 weeks after surgery.
- Headache which becomes worse when you stand up.
- Double vision.
- Bulging of the eye.

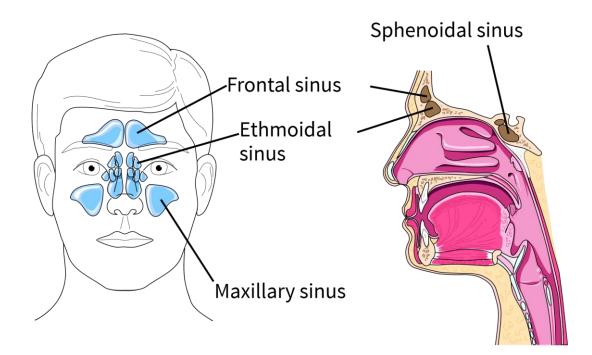
Notes:

Endoscopic Sinus Surgery

The sinuses are cavities (spaces) in the bones of the face and head. They are lined with a mucus-secreting lining. They can get inflamed (red and swollen) for various reasons. This can lead to nasal blockage, loss of smell, and sometimes pain. Surgery may be needed if medical treatment does not correct the problem.

What is Endoscopic Sinus Surgery?

- Endoscopic sinus surgery involves removing polyps (tissue growths) and mucus or pus. It restores the natural openings so the sinuses can drain properly.
- Sometimes endoscopic sinus surgery may be needed to remove masses or tumors in the nose and/or sinuses.



How Do I Get Ready For Surgery?

The Week Before Surgery:

• Stop taking ASAs (e.g. Aspirin[®]) and similar medications. If you're not sure, ask your nurse or doctor.

What Happens After The Surgery?

Immediately After Surgery:

- You will likely have packing in your nose. If you have packing in your nose, you will only be able to breathe through your mouth.
- You will be taken to the recovery room, where a nurse will check the back of your throat.
- You may have swallowed blood during and after your surgery. It is not uncommon to vomit (throw up) old blood.
- If you are feeling sick to your stomach, ask the nurse for medication to help.
- You may have a headache or pain in your nose. The medication ordered by your doctor for pain can be given to you every 4 hours. Ask your nurse for medication, if needed.
- You may have an ice pack to relieve discomfort.
- Your intravenous (I.V.) will be taken out when you are drinking well and not feeling sick to your stomach.
- Ring for a nurse before you get up for the first time. You may still be drowsy.

• The packing is usually taken out before you go home, or on the morning after your surgery. You will be asked to rest for 30 minutes after the packing is taken out. You will then be able to go home if there is no bleeding.

At Home

Safety

You must have a responsible adult take you home. You must not go home alone.

Discomfort

- Do not take ASAs (e.g. Aspirin[®]) or other anti-inflammatory drugs. **Do not drink alcohol** while taking pain pills.
- Your doctor may give you a prescription for pain pills. You can buy TYLENOL® or TYLENOL® Extra Strength at your drugstore without a prescription.

For 7 – 10 Days After Surgery, Avoid:

- Injury to your nose.
- Straining while going to the bathroom. Stool softeners may be helpful.
- Violent sneezing. Sneeze or cough with your mouth open.
- Blowing your nose.
- Overheating (from sunbathing or hot baths).
- Picking your nostrils.
- Strenuous (hard) work.
- Sex.
- Check with your doctor at your follow-up visit about these activities.

Tips

- Use a gentle saline nasal wash twice a day even if your nose feels blocked.
- Use the ointment, drops or nasal spray you were given as instructed.
- Use more ointment or drops if you have severe crusting and blockage.
- You may have bad breath and a strange taste in your mouth. This can be caused by post-nasal discharge and mouth breathing. Brushing your teeth and using mouthwash often will help.
- Get plenty of rest.
- Drink plenty of fluids.

- Sleep with your head elevated (raised up) on pillows to reduce stuffiness and help your breathing.
- Tell your doctor about any unusual pain, swelling, tenderness or high fever.

Bleeding

If slight bleeding happens, lean forward while sitting comfortably. Firmly press both nostrils together. Hold 3 – 5 minutes. If bleeding does not stop, call your doctor.

Call your surgeon immediately, or go to the nearest Emergency Department if you have any of the following:

- A rare complication of this surgery is leakage of fluid from around the brain through the nose. This may be clear or mixed with blood that tends to stay in the center surrounded by clear fluid when dropped on a paper towel. The drainage may increase with straining. This may happen 1 4 weeks after surgery.
 - You may notice a salty taste if this draining happens.
- Headache that gets worse when you stand up.
- Double vision.
- Bulging of an eye.

What are your questions? Please ask. We are here to help you.

Notes:

