Royal United Hospitals Bath
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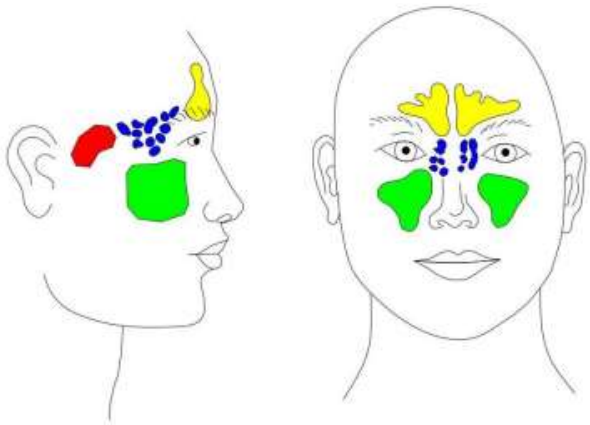
Endoscopic Sinus Surgery

Ear, Nose & Throat Surgery

This information sheet is designed to help you make an informed decision about having surgery on your sinuses. If you have any further questions, please discuss these with our staff before your operation.

What are sinuses?

Sinuses are spaces within the bones of your cheeks, your forehead and deep inside your nose. They are normally filled with air. They have a thin lining which looks a little like the lining on the inside of your cheeks. Each sinus has a small opening into the nose. This opening acts like a drainage hole, and also allows air to get into the sinus.



Picture of the different paranasal sinuses;
Frontal (yellow), maxillary (green) ethmoids (blue), sphenoid (red)

What is sinusitis?

Sinusitis is inflammation of the sinuses caused by infection or blockage of the drainage pathways. Patients often complain of a runny nose, mucus problems, blocked nose or congestion. Other symptoms include headache or facial pain and loss of sense of smell.

Most patients with sinusitis get better without treatment and some may require some treatment with nasal douching, steroid sprays or drops and antibiotics. In a small number of patients, symptoms of sinusitis do not settle with treatment and an operation may be needed. Sinusitis can be difficult to diagnose and your specialist will want to examine your nose with a telescope before discussing any treatment or surgery and may also arrange for a CT scan of your sinuses.

What is endoscopic sinus surgery?

Endoscopic sinus surgery involves using small cameras (endoscopes) through the nostrils to access the sinuses and sinus opening within the nose. This allows the surgeon a much better view of the inside of the nose. As it is performed through the nostril, you will not have any cuts or stitches on the outside. The surgery involves widening the openings of the sinuses to improve the ventilation and drainage of the sinuses. This surgery is usually done under a general anaesthetic. Prior to the surgery your doctor will arrange for you to have a CT scan of your sinuses.

Let your doctor know if you have a history of excessive bleeding or bruising or if you are on any blood thinning medications such as aspirin or warfarin.

Do I have to have the operation?

In some patients an operation can be avoided by using a range of treatments and in the majority of cases your surgeon would have advised a course of treatment over a number of weeks or months before any surgery. Other treatments can include; nasal saline douche (salt water nose rinse), steroid sprays or drops, antibiotics, antihistamines, steroid tablets. Not all of these are suitable for everybody.

How long will I be in hospital?

In the majority of cases the sinus surgery can be done as a day case. In some instances, such as if there are increased risks of bleeding or you live far away from hospital, you may need to stay overnight.

What can I expect after the operation?

Your nose will feel blocked immediately after the surgery and for several days. Your surgeon will tell you when to start using the nasal saline douche and steroid sprays. You will likely need to continue with these long-term.

Nasal dressings are often used at the end of the surgery to reduce the risk of bleeding following surgery. Commonly these are dissolvable packs but you may notice pieces coming out of your nose over the first few days following surgery. Your surgeon will let you know if these have been used.

A few weeks following surgery you will be reviewed in outpatients. You should continue with any nasal douching and sprays that your surgeon has advised until this appointment.

Sinus surgery can be very successful but in some patients symptoms can return and some patients have required further surgery. Most patients will need to continue with nasal douching and/ or steroid sprays to stop their symptoms from coming back.

When can I go back to work?

You will need to have a week off work. Most people are able to return to work and resume normal activities after 10-14 days. If you do lots of heavy lifting or carrying at work you may require two weeks off work.

Possible complications

All operations carry risks you must be aware of before proceeding with surgery.

• **Bleeding**: There is a risk of bleeding following any surgery. A small amount of bleeding or blood stained nasal discharge is normal after surgery. A small number of patients need to return to hospital and require nasal packing or further surgery to stop the bleeding.

• **Infection:** There is a small risk of infection following surgery. To reduce this risk your surgeon will advise you on when to start nasal saline douching.

• **Loss of smell:** Often sinus surgery will improve a loss of smell, but rarely, it can cause a loss of sense of smell.

• **Eye problems:** The sinuses are very close to your eye socket and divided by a thin wall of bone. There is a risk of some minor bleeding into the eye socket that can cause some bruising around the eye. This often settles on its own. More serious bleeding into the eye socket can occur but this is much rarer. If this were to occur you would notice a swelling of the eye and can cause double vision or in rare cases, a loss of vision. If this were to occur you would need to see an eye specialist as an emergency and may require further surgery

• **Cerebral Spinal Fluid (CSF) Leak:** The sinuses are also very close to the bone at the base of brain. During the surgery, although rare, there is a risk of damaging this bone and causing a leak of CSF that surrounds the brain. If this rare complication does happen you will have to stay in hospital longer. You may require another operation to stop the leak. Very rarely, an infection can spread from the sinuses into the fluid causing meningitis, but this is extremely uncommon.

You will have the opportunity to discuss the surgery and the risks with your surgeon prior to surgery. You will also have a CT scan of your sinus to help plan the surgery and reduce the risks of any complications.

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If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656

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