

Humboldt Medical Specialists

ST. JOSEPH HERITAGE HEALTHCARE

Sinus Surgery

About Sinus Surgery

Sinus surgery is an operative procedure done to open the natural drainage pathways of the sinuses. Generally, these openings are blocked by swollen nasal membranes, polyps or other masses. In most cases this surgery is done through the nostrils without external incisions. Packing is routinely used to limit postoperative bleeding, but usually you will only need a dissolvable form of packing, that will be washed out and suctioned out in clinic in a week or two following surgery.

What are the risks of Sinus Surgery?

Most nasal surgery is considered a relatively low risk procedure that is safe to perform as an outpatient. Patients usually tolerate it very well. However surgery is not without certain risks. These risks relate to the structures in and around the nose. There is always a risk of bleeding, infection, and scarring when sinus surgery is performed. If nasal polyps are present, they tend to grow back unless patients also continue their medical therapy. Since the sinuses are located between the eyes and below the brain, there is a potential for injury to either of these structures which may cause visual loss or CSF leak or meningitis. Fortunately these serious complications are very rare.

How do I care for my nose?

Red to clear drainage from the nose is normal for 3-5 days after the operation. This is generally managed by wearing a nasal drip pad. The dressing is made from 2" x 2" gauze pads folded in half and placed below the nostrils. It can be held in place with a strip of paper tape or with a gentle elastic band around the head. This dressing will need to be changed whenever it becomes soiled or damp. If there is no drainage, no dressing needs to be worn. If the dressing soaks through faster than every 15 minutes, call your physician for advice.

What Medications will I need?

Headache and/or some discomfort around the nose is common. Your doctor will prescribe medicine for pain. Antibiotics may also be prescribed depending on whether there is active infection going on. Do not take any aspirin, motrin or ibuprofen containing products for at least one week after surgery as this may cause bleeding problems. Keep in mind that narcotic pain relievers may contribute to constipation; if you are prone to this, plan on pre-treating yourself with an over-the-counter laxative. Frozen peas wrapped in a cloth and applied for 20 minutes at a time over the forehead and nose can help reduce headache. Do not mix alcohol or sleeping pills with pain medication, and do not drive while still taking vicodin or similar narcotic pain medication.

Are there any activity restrictions?

Avoid swimming, strenuous exercise or activities (bearing down or straining) for 2 weeks postoperatively. Avoid blowing the nose as it may trigger bleeding. Wipe or dab nose gently with tissues, if necessary. Elevating the head, and using extra pillows, may reduce swelling, discharge and throbbing in the days following the surgery. Try and obtain plenty of rest.

Are there any dietary restrictions?

Start with clear liquids for the first meal. Then resume normal diet as tolerated. Keep in mind that foods requiring prolonged chewing increase the blood flow and may cause bleeding.

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When do I make my follow up appointment?

Be sure to arrange a postoperative appointment for 3 days after the surgery. Your doctor will check your nose and likely have you begin performing nasal irrigation with saline to rinse out the mucus and crusts. Perform the nasal irrigation three times a day, until you go back to work, then you can decrease to twice a day. Start on the low pressure setting, and slowly increasing the strength over a week.

WHEN TO CALL FOR ADVICE (707-822-2404)

- Expect bright red blood on nasal drip pad. If the dressing saturates more than every 15 minutes, please call.
- Also call if you develop a fever greater than 101 degrees, persisting with muscle aches, extreme weakness, nausea, vomiting, and rapid pulse.