

## Risks of the Operation

While all operations have the risk of side effects, the incidence of side effects following endoscopic sinus surgery is low.

### BLEEDING

As described above it is common to have a small degree of bleeding soon after the operation and blood-stained discharge for up to two weeks. It is uncommon to have a significant amount of bleeding that would require intervention or a blood transfusion.

### EYE

The eye is very close to the sinuses and the outer wall of the sinuses forms the inner wall of the eye socket. Occasionally, there may be a crack in this wall that could allow the passage of air (particularly when blowing the nose) into the tissues around the eye socket, which could result in a puffy eye. If so, this normally subsides in a few days and causes no damage to vision. Leakage of blood through similar cracks can lead to mild bruising around the eye. This too settles in a couple of weeks and does not cause any damage to vision. Significant bleeding into the eye socket resulting in damage to the vision has been reported but is very rare.

### CEREBRO-SPINAL FLUID LEAK

This is a rare complication that can occur following damage to the thin bone that forms the roof of the sinuses and is close to the base of the brain. Damage to this area can cause leakage of fluid that bathes the brain. If this occurs your stay in hospital might be prolonged and in some cases it is necessary to perform another operation to seal the leak.

**This information leaflet is only a guide to endoscopic sinus surgery and does not replace a full and detailed discussion with your surgeon regarding your condition, the benefits and risks of the operation and other alternative treatments available.**



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## Our Services

Adventis ENT Services is dedicated to providing excellence in standards of care to children and adults for all conditions of Ear, Nose & Sinus, Throat & Voice, Head & Neck, Hearing & Speech disorders

The team of Adventis ENT Services is led by Dr Ameet Kishore FRCS(UK), an ENT, Cochlear Implant & Neuro-otologic Surgeon with over 25 years of experience. He has brought together International Experience and Advanced Technology to offer the highest level of patient care and excellence in medical treatment

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## What is Endoscopic Sinus Surgery?

Sinus surgery is a range of operations on the sinuses around the nose, that allows drainage and ventilation of the sinuses, intended for people with chronic sinus problems. Traditionally, this surgery was performed by making cuts through the skin and removing extensive amounts of tissue.

Endoscopic sinus surgery is an established modern type of sinus surgery with minimally invasive techniques utilising telescopes and small instruments to operate on sinuses through the nostrils. The aim is to widen the openings of the sinuses so that mucus does get trapped.

Endoscopic sinus surgery is less extensive than traditional techniques because improved visualisation allows the surgeon to operate on targeted areas with minimal damage to surrounding normal structures. It does not usually result in any external skin incisions, stitches, bruising or cosmetic deformity. It appears to be more successful than traditional methods in treating chronic sinus problems such as nasal blockage, facial pain, headaches and nasal discharge.

## Before the Operation

Before the operation you would have had a consultation with an Ear Nose and Throat Surgeon about your symptoms. Examination may include an endoscopic examination of the nose with the aid of a telescope. This is performed at the Outpatient Clinic under a local anaesthetic.

Most patients will receive medical treatment using nose drops or nasal sprays. Anti-histamine or anti-biotic tablets may sometimes be used in addition. If your symptoms persist, further investigations such as computerised X-ray (CT scan) of the sinuses may be arranged. This is done as an outpatient procedure at the X-ray Department.

Endoscopic sinus surgery is only considered if medical treatment is unsuccessful in treating your symptoms and the surgeon will discuss this with you having assessed the results of the above investigations.



## The Operation

You may be asked to use certain medication for a period before and up to the time of the operation. The operation can be done under either a local anaesthetic or a general anaesthetic and this will have been discussed with you at consultation. As the operation is performed using telescopes passed through the nostrils, this does not involve any skin cuts or stitches. You would usually be admitted on the day of your operation and could expect to be discharged within 24 to 36 hours.

## After the Operation

The operation is not very painful. You may experience a bit of discomfort or tenderness in the nose for the first few days and you are advised to take simple painkillers. You are advised to avoid any painkillers that contain aspirin, as this may increase the chance of bleeding.

Often at the end of the operation small dressings or packs are inserted into the nose to help control the bleeding. If so, these are removed either on the evening of the operation or the next morning. Occasionally, specially designed pieces of plastic sheeting are inserted into the nose at the end of the operation. This is to help healing and to prevent scar formation at the site of the operation. These are secured with a stitch within the nose and are usually removed seven to ten days after the operation at the Outpatient Clinic.

It is common to have a small amount of bleeding from the nose for the first few days and some thick brown blood-stained discharge for some weeks. It is also common for crusting within the nose for several weeks. You will be instructed on how to irrigate your nose with salt water to clear the secretions and crusts after the operation. You should start your irrigations the day after surgery unless instructed otherwise. Nasal irrigations are designed to manually dislodge or loosen mucous and blood clots from the nasal and sinus cavities.

You may be advised to use nose drops or an antibiotic ointment in the post-operative period to help with this. An antibiotic and pain killers will be prescribed.

It is important that you do not blow your nose for the first forty-eight hours after the operation. Thereafter, the surgeon may advise gentle nose blowing to help clear the crusts.

Your first post-operative review would usually be a week after the operation. Your next visit would be decided after that. The overall goal of this post-operative care is to promote healing and prevent recurrent or persistent sinus disease. It is necessary for you to follow some basic instructions as outlined below to help maximize your results. Post-operative appointments are an essential part of your sinus care and allow your surgeon the opportunity to review your progress, adjust your medical therapies and to carry out any necessary cleaning of the sinuses.

Most nasal sprays will be stopped for a short period (weeks) immediately after surgery. You will be given instructions during one of your post-operative visits when to restart these medications, if at all.

## Avoid the Following During the 2 Weeks After Your Surgery

- Do not engage in any strenuous activity, heavy lifting, or bending over.
- Do not blow your nose vigorously for 1 week. You may lightly blow your nose during the 2nd postoperative week. Occasionally you may be given instructions not to blow your nose for longer periods of time.
- Do not pick, prod, or poke your nose.
- Do not resist the urge to sneeze or cough. Instead, sneeze or cough with your mouth open.
- Do not take any supplements or herbal remedies that may increase your risk of bleeding (Vitamin E, Garlic, Ginkgo, Ginger, etc.)
- Limit alcoholic beverages. Alcohol is dehydrating, increases your risk of bleeding, and should not be mixed with your pain medication.
- Avoid cigarette smoking. If you smoke, please do your best to quit or at least significantly limit your cigarette usage. Tobacco smoke is known to adversely affect post-operative healing and increase the risk of anaesthesia.