



FUNCTIONAL ENDOSCOPIC SINUS SURGERY **INFORMATION SHEET**

Indications

Endoscopic literally means to "look within". With fiber optics (a plastic tube of light which the doctor can look through) diseases of the nose and sinuses can be treated by directly seeing and operating on the areas involved with disease, with a precision not previously available.

Fiberoptically guided endoscopic sinus surgery involves the use of small tubes (scopes) in the nose to find and remove unhealthy tissue from the sinus drainage areas. While there are many benefits of this technique, there are still certain risks, which any type of sinus surgery would have. In most cases, non-surgical therapy is the best and first form of treatment for chronic/recurrent sinus disease, and in most cases this works. However, for those that nonsurgical management has not proven effective then sinus surgery becomes an option.

What Are the Advantages of Endoscopic Sinus Surgery?

This technique allows the doctor to directly see the areas of the nose and sinuses while performing surgery. Also, less healthy tissue is removed in the treatment process making recovery quicker and less painful.

This technique allows more precise removal of smaller amounts of tissue, generally with better results than conventional sinus surgery. This means less bleeding during and after the operation as well as less discomfort for you following surgery.

With reduced bleeding during and after the operation the doctor can use smaller packing within the nose. In our experience patients appreciate less nasal packing postoperatively.

What Are the Disadvantages or Risks of Endoscopic Sinus Surgery?

Similar to other types of surgery where tissue removal is performed, a risk of bleeding is still present with this technique. Although decreased bleeding is mentioned as an advantage, approximately 1-2% of patients will still have bleeding which is enough to require conventional nasal packing.

Since you may be alert during this procedure, you may feel moments of discomfort and pain. If this happens, more anesthesia is applied locally and/or through your IV. You may also hear a "crunching" noise. This occurs during the removal of diseased sinus walls. Being prepared for this sound helps you understand what is happening.

Like all surgery, endoscopic sinus surgery can have major complications. Risks may include bleeding, scarring, infection, reaction to anesthesia, airway obstruction, orbital injury, blindness, cerebrospinal fluid leak, recurrence of sinus disease/mucocele, meningitis, septal perforation, septal hematoma, decreased sense of smell, toxic shock syndrome, brain damage, death, and need for further surgery. However, severe complications such as blindness, spinal fluid leak, and major blood vessel injury are very uncommon and seem to occur in patients with more extensive disease, associated major illnesses, or complicating anatomical deformities. Before this operation you will be asked to have a CAT scan. This special x-ray helps your doctor identify any potential complicating deformities and the precise location of diseased tissues.



A successful outcome in endoscopic sinus surgery depends upon meticulous post-operative care by you. You will be given a spray or drops to use to decrease crusting, blood clots, and infection. In spite of this, crusting will occur and will need to be removed on a regular basis until healing occurs. This usually involves 4 to 6 visits within the first 2 months after surgery.

Post-operative cleaning of the nose is carried out in the office with topical anesthetic spray.

With the technique of endoscopic sinus surgery we hope to offer you the chance of cure of your chronic nasal/sinus disease. While a cure cannot be assured, the technique has been remarkably successful in alleviating symptoms. As with any illness we realize that a great deal of concern and time is invested by all of our patients in an effort to obtain successful long-term relief of symptoms. We invite you to write down any questions and discuss these with your doctor at the time of your pre-operative appointment.

Pre-Operative Visit

The ENT Scheduling clerk will arrange a pre-op appointment for you before the surgery date. You will be seen in ENT, then process in at the Admissions Center. Allow approximately 2-3 hours for the pre-op visit. Children who are being operated on must be at the pre-op appointment accompanied by a parent. All patients must bring the health record to all ENT appointments. The physician will answer questions you may have regarding your concerns on the pre-op day.

Your Hospital Stay

Generally, you will be discharged the same day. However, occasionally an overnight stay is necessary.

Your Diet

Upon discharge from the hospital you may resume your regular diet. Fluids are very important to maintain you hydration level and to help ensure a rapid recovery without complications.

Anesthesia

Prior to surgery the anesthesiologist will talk to you about your anesthesia and what to expect.

What to Expect Following Surgery

As following any surgery, you may expect some bleeding. Excessive bleeding may require that packing be placed in your nose. This would also extend your hospital stay or require readmission. Some bloody discharge from the nose will occur for approximately two weeks. For excessive bleeding after discharge from the hospital spray Afrin in both nostrils as often as required for the first five days after surgery.



All operations in the area of the sinuses carry a slight chance of creating a spinal fluid leak (the fluid that surrounds the brain). This is a rare complication, but should it occur could lead to meningitis. Other possible complications include prolonged tearing of the eyes, inflammation of the sinuses, numbness of the front teeth, a decreased sense of smell, swelling, bruising, and temporary numbness of the lip or eye. Blowing your nose during the early postoperative period

could result in the temporary collection of air under the skin and facial swelling for a period of time. There is also the potential that the problems you were experiencing will not be relieved. They may remain the same or even become worse after surgery.

Monitor your temperature every 4 hours for 48 hours after surgery. If taking narcotic pain medicines containing Tylenol, take your temperature before each dose. Should you experience a fever over 101 degrees F., pain not controlled by prescribed medications, alteration in vision, increase in pain or swelling, nausea or vomiting, clear fluid leaking from the nose, or other complications, notify your doctor as soon as possible.

Your Post-Operative Visits

Your first post-op appointment will be approximately one week after surgery. Please stop by the scheduling desk or call (210) 468-5426 to schedule with appointment.