

Nasal Septoplasty

Ear, Nose and Throat Department

(with/ without cautery to turbinates)

Introduction:

Your nose consists of a cavity which is separated into two separate passages. The partition wall between the two is called the nasal septum and is mainly made of cartilage. The side walls of the nasal cavities contain fleshy-folds called turbinates. The nose warms and moistens the air we breathe. Thus the nose is an air-conditioner and filter for the lungs providing moist, warm and clean air.

Reason for the operation:

A common problem with the nose is to have a bent nasal septum, causing narrowing of one or both of the passages of the nose. This can make it hard to breathe through the nose. An operation can be performed to straighten the bent nasal septum. This operation is called Septoplasty. This can also include cautery to the turbinates to shrink them.

About the operation:

You will normally be admitted to hospital on the morning of the operation. You will be examined by the anaesthetist for your fitness for general anaesthesia. The operation itself takes up to one hour. It is carried out through the nostrils. We make a cut inside your nose and straighten out the septum by taking away some cartilage and bone, and moving the rest of the septum back to the middle. We close it back up with some stitches that dissolve on their own. If the fleshy turbinates are too big we will shrink them at the same time with electric cautery. There are no cuts on the outside. There is no swelling or bruising of the nose. There is little pain after the operation.

After the operation, your nose might have a small sponge inserted into it to stop bleeding. This could be left in the nose for a few hours or even overnight. If you stay in overnight you will usually be allowed home the next day. You will usually need two weeks off work.

What to expect after the operation:

Your nose is likely to be more stuffy than before the operation. This stuffiness can be reduced by using salt water nasal washes (douching), and the nurses will explain how to do this. There will be some dark bloodstained mucous discharge from the nose. This is quite normal. After the first week, the stuffiness will start to become less and two weeks after the operation the nose should start to be better than before the operation. It can take four to six weeks before the nose is completely settled. You may or may not need to come back to the clinic after the operation.

The risks of the operation:

Septoplasty is safe but every operation carries some small risks:

- There is a risk of bleeding after the operation, which may require insertion of sponges in the nose. There can be bleeding from the nose any time up to a week after surgery, but this is uncommon.
- Infection in the nose is rare after Septoplasty but if the nose becomes increasingly blocked or sore you should see a doctor.
- The operation can rarely leave you with a hole in your septum inside the nose going from one side of the nose to the other. This can cause whistling when you breathe, crusting or nosebleeds. Usually this would cause no trouble at all and could be left, but if it was needed the hole could be repaired by further surgery.
- Very rarely you may find that the shape of your nose has changed slightly, with a dip at the front of the nose. Most people don't notice any change, but if you weren't happy this could be fixed by another operation.
- Very rarely you may notice some numbness of your teeth, and this settles down with time.

Are there any alternatives to surgery?

A bent nasal septum will not do any harm, so you can leave it alone if you want to. The only way to straighten a bent nasal septum is with an operation, and only you can decide if the problem is bad enough that you would like to have surgery.

Decongestants and nasal sprays can shrink the lining of the nose and may help to relieve the blocked feeling. Using decongestant nasal drops for more than 10 days is dangerous and the nose can swell up even more than before.

Summary:

You may be having an operation called a Septoplasty. This means operating on the inside of the nose to straighten the partition dividing it into two halves. The operation might also include

reducing the size of the fleshy folds inside called turbinates. Sometimes sponges are put in the nose to stop bleeding. The operation is safe, and the risks are very low. Risks can include pain, bleeding, infection, change in the nose shape, teeth numbness and a hole across the septum.

Sources for more information:

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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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