Endoscopic Sinus Surgery

This information sheet is designed to help you make an informed decision about having sinus surgery. 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.

What is Endoscopic Sinus Surgery?
It is called Endoscopic Sinus Surgery because it is an operation on the sinuses using small telescopes (endoscopes). These telescopes allow the surgeon to get a much better view of the inside of the nose. The purpose of the operation is to enlarge the sinus openings, which then improves drainage and ventilation of the sinuses.

Endoscopic sinus surgery (ESS) is also sometimes called Functional Endoscopic Sinus Surgery (FESS). It is in fact a group of several different smaller operations. Your surgeon may choose to do one or more of these smaller operations, depending on which of your sinuses has been causing you problems. Endoscopic sinus surgery is performed through the nose, so you won’t have any incisions on the outside.

Why do people have sinus surgery?
Most people who have endoscopic sinus surgery, have had repeated infections in the sinuses despite other treatments (such as antibiotic tablets & nose sprays). Sometimes these infections occur if the sinus openings are narrow or blocked.
Are there alternatives?
Yes, although usually these will have been tried before suggesting surgery. These include:

- nasal saline douche (salt water nose rinse),
- steroid sprays or drops,
- decongestant sprays,
- antibiotics,
- antihistamines,
- steroid tablets.

Not all of these are suitable for everybody.

What improvements can I expect from Endoscopic Sinus Surgery?
This varies a lot from person to person and depends a lot on what symptoms you have to start with, and which of your sinuses are involved. Some people will have permanent cure of their sinusitis, whereas others will have a reduction of their symptoms. Not everyone will benefit from sinus surgery, so your doctor will carefully assess whether you are suitable.

Some of the symptoms of sinusitis which may improve with endoscopic sinus surgery include blocked nose, nasal discharge, post-nasal drip, fullness in the cheeks, frontal headache and reduced sense of smell.

What are the risks?
Overall, endoscopic sinus surgery is safe in most people. Your risk depends on which sinuses your surgeon will be operating on, and also on any other medical problems you may have. Some of these risks are very rare, but serious. Some are more common but less troublesome. Firstly, you will have a general anaesthetic (you will be asleep for the operation). You will have a chance to discuss this with the anaesthetist before your surgery.

This is a brief outline of the risks that would be most likely to influence your decision about having surgery.

Common:
- **Nasal Obstruction:** You will probably have lots of dry blood and crusting causing a blocked nose for the first few weeks.
• **Bleeding:** A small amount of bleeding immediately after sinus surgery is quite common. You may notice blood when you blow your nose for about a month after the operation, but occasionally people may need to come back to hospital. If you take aspirin or warfarin, or if you have a history of bleeding problems, then you must tell your surgeon before your operation.

**Occasional:**

• **Infection:** sometimes swelling in the sinuses immediately after the operation can cause infection.

• **Return of symptoms:** sinus surgery may not cure your symptoms permanently. There are some other medical conditions which make this more likely. If you have been told that you also have nasal polyps, then you have a higher chance of requiring further treatment.

• **Failure of treatment:** occasionally, sinus symptoms don’t get better after sinus surgery. Similar symptoms can be caused by other conditions and for this reason sinus surgery is not offered unless your surgeon thinks that it is likely to help.

**Rare risks:**

Because some of your sinuses are separated from your eyes by only a very thin layer of bone, there is a very small risk of causing injury to your eye. In the worst case, this could cause blindness or double vision.

Similarly, some of your sinuses are very close to your brain. There is a small risk of causing infections in or around your brain, or of a brain fluid leak through your nose.

• **Loss of sense of smell:** Often sinus surgery will improve a loss of smell, but rarely it can cause a loss of sense of smell.
Preparation for surgery:
A few weeks before the operation, you will be contacted by the hospital with a date and time for the operation. You will be sent information about when to stop eating and what to bring to hospital.

You may be asked to attend a pre-admission clinic before your operation so that your doctor can decide if you need any other preparation for the operation.

You will have a chance to further discuss the risks, and then will be asked to sign a consent form. If you smoke, you should aim to stop at least 24 hours before your operation.

If you decide you don’t want the operation, you should contact us and your GP.

The day of the operation:
Prepare for a long day. Your operation may not occur as soon as you arrive, as there is lots of preparation that we need to do. You will have some forms to read and fill out, you will be checked by the nurse, and you will see the anaesthetist before your operation.

Unfortunately, due to other emergencies or unforeseen circumstances, operations are sometimes delayed or occasionally cancelled and rescheduled at late notice. Obviously this only occurs if absolutely unavoidable.

After the Operation:
Sometimes we are happy for you to go home the same day as your operation, but be prepared to stay one night in hospital. You should not drive after your operation, so you will need to arrange someone to collect you from hospital. You will require at least 2 days off work, although most people take 1 week off work to recover.

For the first month after the operation, you should use a nasal saline douche (salt water) to rinse your nose. We will tell you if you need antibiotics or other nose sprays.

Usually we will make an appointment to see you again in the outpatient clinic, to check how you are going and to look in the nose.

More information: phone 01225 824556