

Patient information

Nasal Surgery

Martin Corke Day Surgery Unit

Nasal Surgery

Nasal obstruction may be caused by an allergy or an injury. Nasal surgery is performed inside your nose to remove any obstruction and improve your nasal breathing. It may involve any of the following:

Endoscopic Sinus Surgery

This is done for chronic infection or to remove polyps. It involves using fine telescopes and instruments to remove small amounts of bone and swollen tissue to unblock your sinuses.

Septoplasty

This involves a small cut just inside your nose and the removal of some of the cartilage and bone to straighten and reshape the central structure. Sometimes it is necessary to do this operation to allow us to perform Endoscopic Sinus Surgery.

Turbinoplasty

Turbinates are folds of tissue inside your nose. This operation is done to reduce or reshape swollen turbinates to improve breathing.

Submucous Diathermy

This is done to reduce generalised swelling of the lining of the nose by gentle cautery/burning.

Septorhinoplasty/Straightening of the nose:

This is done to reduce the risk of future blockages, and to improve appearance after a broken nose. You may need an external nasal splint for 1 week.

Following your surgery

You may experience some mild to moderate pain, which can be relieved by taking the painkillers and on discharge you may be given 3 - 5 days' supply to take home.

Paracetamol or similar medication is appropriate should you experience further pain when your initial supply of tablets is finished.

If on discharge you are given any nasal spray or inhalation to use, please follow the instructions below:

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- Avoid hot food and drink for 24 hours as this can cause bleeding. After this you should eat and drink normally.
- Avoid smoky and dusty atmospheres.
- You are advised not to blow your nose for 1 week and to sneeze (if necessary) with your mouth open.
- You may notice some bruising around the eye, especially after rhinoplasty. This usually gets better without treatment.
- You may experience some oozing of blood or mucus from the nose. This may be gently wiped away. If you have a nosebleed, gently squeeze the soft part of the nose for 5 minutes. An ice pack on the bridge of the nose is also useful.
- If your nose feels crusty, please leave the crusts alone to separate in their own time.
- You will need to rest at home for a week. Most people can return to work after 10 – 14 days. If your job involves heavy or dusty work, you will need to wait two weeks.
- Avoid contact sports until seen at your follow up outpatient appointment.
- Your surgeon may have inserted some sponge dressing (called Naspore) into your nostrils to reduce/stop minimal bleeding after the operation, this is a dissolvable material and it should disappear with time, but on some occasions, it may come out of the nose while sneezing, nose blowing or nose washing, this is nothing to worry about and you do not need to insert it again into your nose, just throw it away.

Outpatient appointment.....
This will be sent to you.

Contact your GP or GP out-of-hours service if:

- Any nasal bleeding cannot be stopped by the methods suggested.
- You have severe pain.

If you require any further advice, please contact the Martin Corke Day Surgery on 01284 713050 between 7.45am and 8.00pm, Monday to Friday.

Outside of these hours contact the ENT ward on 01284 713290 and speak to the nurse in charge, or contact NHS 111. Please have your hospital number on the discharge letter available.

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (formerly DisabledGo) <https://www.accessable.co.uk>



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