



Sinus Surgery

Sinus surgery is most commonly performed for recurrent sinus infections or nasal polyps. It is less commonly performed for cancerous processes. It is performed through the nostrils using fiber-optic endoscopes and cameras. It is generally only considered after it has been determined that medical management has been unsuccessful or, at the very least, a patient is not getting the type of long-term relief they seek with medications.

Sinus surgery historically has been regarded as a very uncomfortable and miserable experience. Many people suffering from chronic sinusitis avoided sinus surgery, which could have drastically improved their quality of life, because the recovery process was so difficult. Fortunately, long gone are the days when patients had several feet of gauze packing placed into the nose, only to have it slowly pulled out in an agonizing process a week later in the office. Technological advances have arisen to minimize the discomfort and make the need for this aggressive packing technique obsolete, making the recovery much easier and more comfortable.

Sinus surgery involves opening up the involved sinuses to help them drain better. This includes the removal of obstructing fragments of bone and scar tissue. It may also include removing polyp tissue that is blocking a sinus or your nasal passage. Most people have a total of eight (paired maxillary, ethmoidal, frontal and sphenoid sinuses). Some people need surgery on only one involved sinus. Others may need all eight addressed. We use small instruments that we place through your nostrils to get this done.

Sinus surgery typically takes about an hour and is done under general anesthesia with you fully asleep. The vast majority of patients go home an hour after surgery with only some dissolvable packing in the nasal passages and small gauze taped under the nostril to catch any trickling blood. We typically also give pain medications and antibiotics.

Most patients take about five days off of work to recover. Patients with a job that requires a lot of strenuous activity should plan to take seven to 10 days off to recover.

Risks of surgery include the general risk of anesthesia, bleeding, scarring and infection. These are all relevant to sinus surgery. Further, sinuses surround important structures in your head. Most notably, this includes the eyes (or muscle that moves the eye), brain and major blood vessels. This could lead to vision problems, brain injury and stroke. Injury to the lining of the brain (dura) could lead to the leaking of brain fluid. This usually resolves on its own with a fairly straightforward intraoperative repair. More significant leaks or injuries may require more invasive measures with the assistance of a neurosurgeon.

Despite these risks, most highly trained and experienced sinus surgeons never have a devastating complication involving any of these structures. Nonetheless, we firmly believe that you need to be aware of them. Additionally, CT scan imaging provides a great 'road map' for Dr. Litvack, and he references it throughout the course of surgery to help keep you safe.



Post-Operative Instructions & Information

1. It is normal in the first few days to experience an intermittent pattern of bleeding, from moderate amounts to light amounts and back to moderate amounts. We will tape a gauze drip pad below your nose to absorb the blood. You will need to change this dressing frequently for the first couple of days.
2. You can use oxymetazoline (Afrin) spray and ice packs to control bleeding. Use three to four sprays of oxymetazoline in each nostril every six hours for bleeding. **You should not use this medicine for more than four days.** Ice packs over the ridge of your nose will also help stop the bleeding. A physician may need to treat excessive bleeding (i.e., saturating the gauze every 10–15 minutes). Call your doctor's office during office hours or go to the emergency room if after hours. Dangerous amounts of bleeding are very rare.
3. Avoid any strenuous activity for seven to 10 days after surgery. Heavy lifting, running or even mild exercise can start bleeding and impede healing. Keeping your head elevated for the first five days with an extra pillow or using a reclining chair can also be beneficial.
4. You will have some facial pain or a mild headache after surgery. We will give you prescription-strength pain medication. If the pain is mild, you can take Tylenol as needed. Try to avoid aspirin, Motrin, Aleve or Advil, as they can result in bleeding. Pain medications can cause nausea and vomiting. Do not take them on an empty stomach. Anti-nausea suppositories can be prescribed if needed.
5. Don't smoke. It causes a lot of scarring and inflammation and increases the chance of needing subsequent sinus surgery.
6. If you must sneeze, try to do so only with your mouth open.
7. You will likely have some form of dissolvable packing in your nose. It is engineered to dissolve during the healing process while you are doing the saline rinses. It can take up to three weeks to disappear fully.
8. Nasal rinses are very important in the post-operative period. They have a tremendous effect on recovery and long-term success. Begin them the day after surgery until told to stop. Use nasal saline rinses three to four times per day during the recovery period. This can be with a neti pot, NeilMed SinuRinse bottle or any other convenient nasal saline system.
9. Severe lethargy, headaches, high fevers, double vision or impaired vision need to be evaluated. Call the office during working hours to discuss this or go to an emergency room if after hours.
10. You need an appointment 10–14 days after surgery to have your nasal passages inspected to ensure good healing.