

Operation on the nasal sinuses

FESS

You have agreed with your specialist that you will soon be referred for an operation on your sinuses. This operation is called a FESS. The acronym FESS stands for Functional Endoscopic Sinus Surgery.

Please note:

Should there be any disorders of blood clotting and/or you are being treated with **blood thinning drugs**, report this to the doctor and nurse. After consulting with your doctor, you may be asked to temporarily discontinue blood-thinning medications.

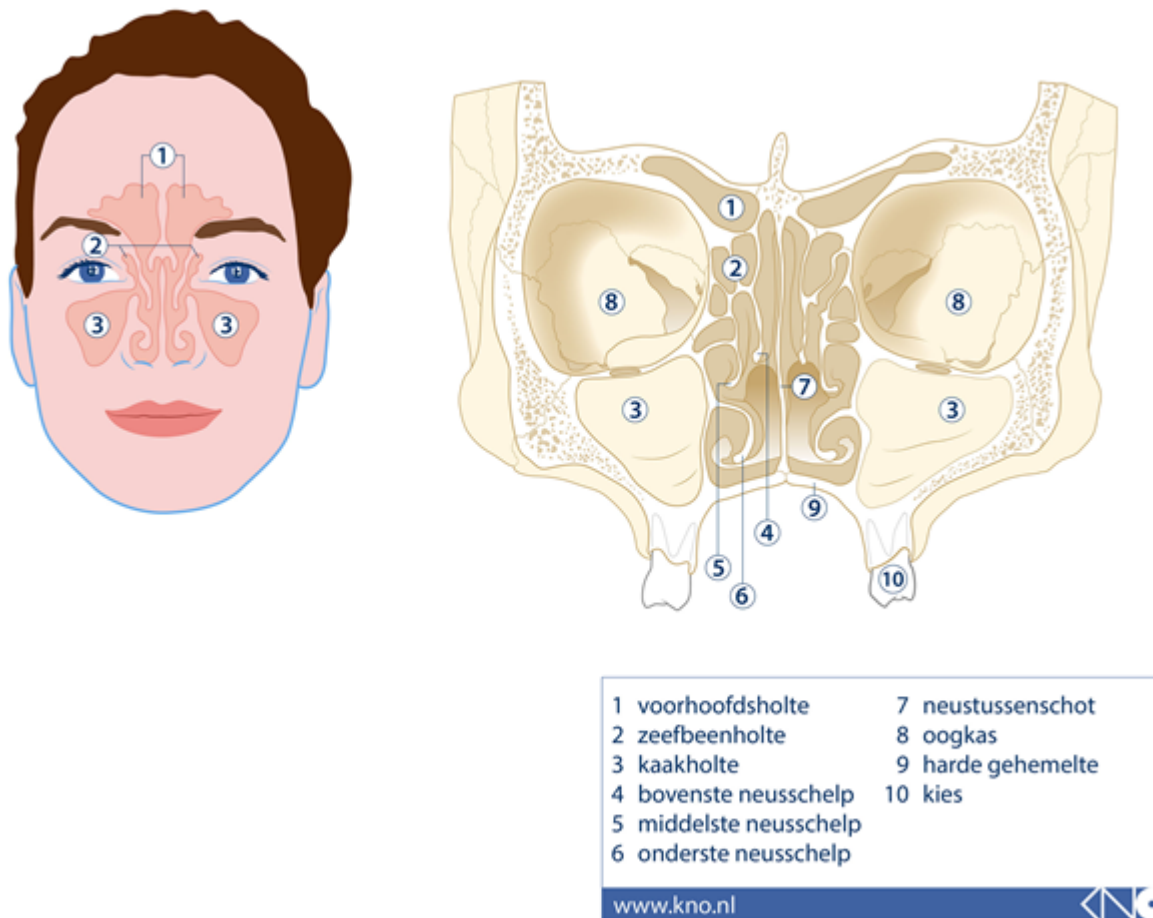
You should also report any clotting problems in yourself or your family members.

Nasal sinuses

The nasal sinuses are hollow spaces (sinuses) in the head, located above and beside the nose. They are in direct connection with the nasal cavity. The best-known cavities are the two frontal sinuses above the eyes and the two maxillary sinuses behind the cheeks. On both sides between the nasal cavity and the orbit is a system of many small cavities, the ethmoid sinuses (see drawing).

The maxillary and frontal sinuses are connected to the nose by this ethmoid bone. The last cavity is known as the sphenoid sinuses, located deep in the head. All these nasal sinuses are lined with the same mucous membrane as the nose. There are small openings between sinuses and nose. This equalises the pressure in the sinuses to the pressure of the outside air.

The information in this leaflet is of a general nature and is meant to give you an idea of the care and information that you can expect. Other advice or procedures may apply depending on your situation. This leaflet supplements the specific information provided by your specialist or practitioner.



Source: Medical Visuals, Maartje Kunen

When is surgery required?

The openings between the sinuses and the nose can be blocked by colds, polyps, allergies or a misaligned nasal septum. Problems such as negative pressure, fluid accumulation, swelling of the mucous membrane and pus formation then occur. Complaints that result are headache, runny nose, cough, hearing loss and aggravation of existing bronchitis.

Inflammation of the sinuses that cannot be cured by medication or other treatments is called chronic inflammation. The main reason for sinus surgery is such chronic inflammation, which is often accompanied by polyp formation.

Preparation

You will receive an appointment for the POS (preoperative consultation). At the inpatient unit, you will receive information about anaesthesia and the ward in which you will be admitted.

FESS

FESS stands for Functional Endoscopic Sinus Surgery. The procedure involves inserting a small tube with lenses (endoscope) through the nostril. With the endoscope, the ENT doctor can view the inside of the nose. Special instruments are used to open the inflamed nasal sinuses. This allows air back into the sinuses. In addition, the maxillary sinus can be rinsed clean through this opening. A new inflammation will thus have less chance to appear. Any polyps will be removed.

To keep the mucous membranes from sticking together, the ENT doctor may insert two tampons into the nose. Tampons can also be inserted to prevent bleeding. This surgery does not result in external scars.

During the operation you will be given an eye ointment to prevent the eyes from drying out. You may have some blurred vision afterwards because of this. This is normal and only temporary.

Postoperative care

After the operation, your nose will be slightly painful.

In most cases, you will have tampons in the nose. At the end of the day, the ENT doctor will see you at the outpatient clinic. After that, you are free to go home. You will be given a follow-up appointment. You may not drive independently.

Follow-up appointment

One to four days after the operation you will have an appointment in the outpatient clinic for tampon removal. Please reserve about an hour for this. After about 6-8 weeks you will receive a follow-up appointment. Prior to this appointment you will receive a questionnaire in your 'MijnMMC'-portal that you must complete for this appointment.

Advice for at home

In the first few days after the operation, bloody mucus may come out of the nose. We therefore recommend the following:

- You should not blow your nose as there is a risk of secondary bleeding. It is better not to pick up the nose. Spit out the mucus at the back of the throat.
- Do not consume highly spicy foods or hot drinks for the first 3 days after the procedure and/or after removing the tampons. This prevents nose bleeding afterward.
- Do not pick the nose.
- Sneezing should be done with the mouth open.
- After removing the tampons, the doctor recommends that you rinse with a saline solution (1 teaspoon of salt to 2 dl of lukewarm water). You can also purchase a flush bottle for this purpose at the ENT outpatient clinic.
- We recommend being careful for the first week. Avoid activities that make your head move a lot.
- After 1 week you can start blowing your nose again, do this nostril by nostril.
- You may be given a prescription for antibiotics.

Risks and complications

Any surgery, including surgery on the nasal sinuses, involves some risks. Infection or bleeding may occur. In addition, there is a very small risk of injury to the orbit or other surrounding areas.

Important telephone numbers

- You can reach the ENT outpatient clinic during office hours by calling: (040) 888 56 70
- Outside of office hours, call the Emergency Department by calling: (040) 888 88 11