

SEPTOPLASTY / TURBINECTOMIES

This surgery will improve the nasal airways by correcting mechanical obstruction to the passage of air up the nostril.

The nostrils will be packed to control the bleeding. The packs are removed by flushing with SinusFlo; this can be commenced the following day.

POST-OPERATIVE PROCEDURES

- **1st WEEK**
Mucoid discharge (blood stained at times). The nose is quite blocked for this period. Blowing of the nose is **NOT** advised. Saltwater nasal douches can help clear the nose.
- **2nd WEEK**
Discharge dries up. Some crusting can form and the airways slowly clear.
- **3rd WEEK**
Airways continue to clear steadily and progressively. The tip of the nose can be tender, but this is more discomfort than pain.

COMPLICATIONS

- **BLEEDING** - Often there is minor bleeding or blood stained mucus during the first week. Very occasionally the nose may need to be re-packed.
- **SEPTAL HAEMATOMA** - Occasionally blood can accumulate beneath the flaps on the cartilage and may need draining.
- **INFECTION** - Post-operative infections are uncommon. Occasionally an undrained septal haematoma can get infected.
- **PERFORATION** - 0.5%-1% of septoplasties develop a perforation post-operatively. The vast majority of these are completely asymptomatic.
- **RECURRENCE OF OBSTRUCTION** - Very occasionally – In 1/1000 approximately the scar tissue that develops post-operatively can cause a later (3-6 months) recurrence of symptoms.