Endoscopic Sinus Surgery
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The sinuses are cavities (spaces) in the bones of the face and head. They are lined with a mucus-secreting lining. They can get inflamed (red and swollen) for various reasons. This can lead to nasal blockage, loss of smell, and sometimes pain. Surgery may be needed if medical treatment does not correct the problem.

What is endoscopic sinus surgery?

• Endoscopic sinus surgery involves removing polyps (tissue growths) and mucus or pus. It restores the natural openings so the sinuses can drain properly.

• Sometimes endoscopic sinus surgery may be needed to remove masses or tumours in the nose and/or sinuses.
How do I get ready for surgery?

The week before surgery:

• Stop taking ASAs (e.g. Aspirin®) and similar medications. If you’re not sure, ask your nurse or doctor.
What happens after the surgery?
Immediately after surgery:

- You will likely have packing in your nose. If you have packing in your nose, you will only be able to breathe through your mouth.
- You will be taken to the recovery room, where a nurse will check the back of your throat.
- You may have swallowed blood during and after your surgery. It is not uncommon to vomit (throw up) old blood.
- If you are feeling sick to your stomach, ask the nurse for medication to help.
- You may have a headache or pain in your nose. The medication ordered by your doctor for pain can be given to you every 4 hours. Ask your nurse for medication, if needed.
- You may have an ice pack to relieve discomfort.
- Your intravenous (IV) will be taken out when you are drinking well and not feeling sick to your stomach.
- Ring for a nurse before you get up for the first time. You may still be drowsy.
- The packing is usually taken out before you go home, or on the morning after your surgery. You will be asked to rest for 30 minutes after the packing is taken out. You will then be able to go home if there is no bleeding.
At home
Safety
You must have a responsible adult take you home. You must not go home alone.

Discomfort
• Do not take ASAs (e.g. Aspirin®) or other anti-inflammatory drugs. **Do not drink alcohol while taking pain pills.**
• Your doctor may give you a prescription for pain pills. You can buy TYLENOL® or TYLENOL® Extra Strength at your drugstore without a prescription.

For 7-10 days after surgery, avoid:
• Injury to your nose.
• Straining while going to the bathroom. Stool softeners may be helpful.
• Violent sneezing. Sneeze or cough with your mouth open.
• Blowing your nose.
• Overheating (from sunbathing or hot baths).
• Picking your nostrils.
• Strenuous (hard) work.
• Sex.

Check with your doctor at your followup visit about these activities.
Tips
• Use a gentle saline nasal wash twice a day.
• Use the ointment, drops or nasal spray you were given as instructed.
• Use more ointment or drops if you have severe crusting and blockage.
• You may have bad breath and a strange taste in your mouth. This can be caused by post-nasal discharge and mouth breathing. Brushing your teeth and using mouthwash often will help.
• Get plenty of rest.
• Drink plenty of fluids.
• Sleep with your head elevated (raised up) on pillows to reduce stuffiness and help your breathing.
• Tell your doctor about any unusual pain, swelling, tenderness or high fever.

Bleeding
If slight bleeding happens, lean forward while sitting comfortably. Firmly press both nostrils together. Hold for 3-5 minutes. If bleeding does not stop, call your doctor.
Call your surgeon immediately, or go to the nearest Emergency Department if you have any of the following:

- A rare complication of this surgery is leakage of fluid from around the brain through the nose. This may be clear or mixed with blood that tends to stay in the centre surrounded by clear fluid when dropped on a paper towel. The drainage may increase with straining. This may happen 1-4 weeks after surgery.
  - You may notice a salty taste if this drainage happens.
- Headache that gets worse when you stand up.
- Double vision.
- Bulging of an eye.

What are your questions?
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The information in this pamphlet is to be updated every 3 years or as needed.