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### Functional Endoscopic Sinus Surgery (FESS)

#### What are sinuses?

Sinuses are air-filled spaces in the bones of the face and head. They are connected to the inside of the nose through small openings. The sinuses are important in the way we breathe through the nose and in the flow of mucus in the nose and throat. When the sinuses are working properly, we are not aware of them but they often are involved in infections and inflammations, which cause symptoms. These infections and inflammations are called sinusitis.

#### What is sinusitis?

Blocked, inflamed or infected sinuses cause sinusitis. Patients will often complain of a blocked nose, pressure or congestion in the face, runny nose or mucus problems. Other symptoms include headache and loss of sense of smell. Sinusitis can be difficult to diagnose, and I will want to examine your nose with a telescope in order to help find out what is wrong. Most patients with sinusitis get better without treatment or respond to treatment with antibiotics or nose drops, sprays or tablets. In a very small number of patients with severe sinusitis an operation may be needed. In rare cases if sinusitis is left untreated it can lead to complications with infection spreading into the nearby eye socket or into the fluid around the brain. These very rare complications are just some of the reasons that a sinus operation may become necessary.

#### What is endoscopic sinus surgery or FESS?

Endoscopic Sinus Surgery is the name given to operations used for severe or difficult to treat sinus problems. In the past sinus operations were done through incisions (cuts) in the face and mouth but endoscopic sinus surgery allows the operation to be performed without the need for these cuts. Before any operation patients will be treated using drops, tablets or sprays for a period of weeks if not months. Only if these treatments are unsuccessful will an operation become necessary. After an examination of your nose with a telescope I will discuss whether you will need to have a CT scan to help decide about the need for an operation.

#### Do I have to have the operation?

Endoscopic sinus surgery is only one approach to the treatment of sinusitis. Endoscopic sinus surgery is as safe, and possibly safer, than other methods of operating on the sinuses. The other methods of operating on the sinuses involve cuts in the face or mouth and if you feel that this maybe more appropriate in your case you should discuss this with me. In some patients an operation can be avoided by use of antibiotics and steroid medicines. You may change your mind about the operation at any time and signing a

consent form does not mean that you have to have the operation. If you would like to have a second opinion about the treatment, you can ask your GP. He or she will not mind arranging this for you.

#### How is the operation done?

Usually the operation is done with you asleep (General Anaesthetic). The operation is all done inside your nose. I will use special telescopes and instruments to unblock your sinuses. Small amounts of bone and swollen lining blocking your sinuses are removed. Once the sinuses are unblocked, the inflammation usually settles, and your symptoms should start to get better. Rarely there may be some bruising around the eye, but this is very uncommon. There should be no need for incisions (cuts) unless the operation is a complicated one in which case this will have been discussed with you before the operation.

#### After the operation

Immediately after the operation you may feel your nose blocked. This may be because of some dressing inside your nose or some special plastic sheets called splints. These are not used in every case, but I will explain if they have been necessary in your case. Dressings, if used, will usually be removed from your nose within 24 hours but plastic splints may have to stay longer. It is common to have a stuffy blocked up nose even after removing the dressing or splints and this does not mean that the operation has not worked.

#### Does it hurt?

It is common for the nose to be quite blocked and to have some mild pain for a few weeks after the operation. This usually responds to simple painkillers.

#### Can I blow my nose?

It is important that you do not blow your nose for the first 48 hours following your operation. I will advise you on when you can start to gently blow your nose. I recommend the use of drops, ointments and salt water sprays after the operation. You will be given specific instructions by the ward staff before your discharge from hospital. Some mucous and blood stained fluid may drain from your nose for the first week or two following the operation and this is normal. It is important to stay away from dusty and smoky environments while you are recovering.

#### How long will I be off work?

You can expect to go home on the day of your surgery or the day after your operation depending on the size of your operation. You will need to rest at home for at least a week. If you do heavy lifting and carrying at work you should be off work for at least two weeks. You will be given instructions on when to return to me for your follow-up visit.

#### Possible complications

All operations carry some element of risk in the form of possible side effects. There are some risks that you must know about before giving consent to this treatment. These potential complications are very uncommon.

#### Bleeding

Bleeding is a risk of any operation. It is very common for small amounts of bleeding to come from the nose in the days following the operation. Major bleeding is extremely uncommon and it is very rare for a transfusion to be required.

### Eye problems

The sinuses are very close to the wall of the eye socket. Sometimes minor bleeding can occur into the eye socket and this is usually noticed as some bruising around the eye. This is usually minor and gets better without any special treatment, although it is important that you do not blow your nose. More serious bleeding into the eye socket sometimes can occur, however this is very rare. This can cause severe swelling of the eye and can even cause double vision or in very rare cases loss of sight. If such a serious eye complication did occur you would be seen by an eye specialist and may require further operations.

### Spinal fluid leak

The sinuses are very close to the bone at the base of the brain. All sinus operations carry a small risk of damage to this thin bone with leakage of fluid from around the brain into the nose, or other related injuries. If this rare complication does happen, you will have to stay in hospital longer and may require another operation to stop the leak. On very rare occasions infection has spread from the sinuses into the spinal fluid causing meningitis but this is extremely uncommon.

### How often do complications happen?

In general, major complications are very rare. In a survey of all ENT surgeons who do this type of operation in England, eye complications happened in one in every 500 operations but there was no associated loss of vision. Spinal fluid leaks happened in one case in every 1000 operations, but were detected and repaired at the same operation so the risks are small. Minor complications, including bleeding from the nose occurred more often. One in four patients reported mild persistent bleeding after the operation, which resulted in readmission to hospital in some cases.