

FUNCTIONAL ENDOSCOPIC SINUS SURGERY (FESS) FAQ SHEET

What are sinuses?

- Sinuses are air pockets in your skull. The sinuses are lined with mucus that your body continually sweeps out of the sinuses.

What is the purpose of sinuses?

- There are several theories on this. A few of the theories include:
 - To lighten the skull
 - To provide crumple zones for your brain and eyes
 - To improve voice resonance

Why do people need surgery on their sinuses?

- The sinuses are large cavities with small openings. These openings can become obstructed and prevent the clearing of the mucus from the sinuses. This mucus becomes stagnant and infected, like a dammed up creek. Surgery enlarges these openings so the mucus and infection can be cleared out.

What is a FESS?

- Functional Endoscopic Sinus Surgery. The old way was just “Endoscopic Sinus Surgery” to just make a hole where it was the easiest to reach. Then further research showed that your body has very specific ways it sweeps the mucus out. “Functional” means you open the natural holes in the sinuses so they can clear themselves.

Why do you always do a septoplasty with a FESS?

- A septoplasty is not always done, but it is very common. This is because the septum is quite commonly deviated, at least enough to obstruct the outflow of the sinuses. So striating the septum not only allows you to access the sinuses, but it also allows more room for the sinuses to drain.

How successful is a FESS?

- It is not 100%. For most sinus infection related problems about 80-90% of people will get relief. For other reasons, such as polyps, the rate of repeat surgery is about 50%. For some people with severe polyp disease surgery is needed every few years for the rest of their life.

What is balloon sinuplasty?

- Instead of cutting to enlarge the sinus opening some patients will benefit from just widening the opening with a balloon.

Do I qualify for balloon sinuplasty?

- That depends on the type of sinus disease you have. Disease of the frontal sinus is very commonly opened with balloons. The maxillary and sphenoid sinuses can also be opened with a balloon. The ethmoid sinuses are made up of too many small soap bubble like sinuses, and therefore can not be opened by balloon.

Is it possible to do balloon sinuplasty in the office?

- Depending on the septal deviation, sinus anatomy, amount of disease, and pain tolerance of the patient it is possible to open a sinus in the office. Finding someone who is able to tolerate this procedure, and has the needed anatomy, is not very common; therefore, it is something I do not do often, if at all.

What to expect after FESS.

- You should anticipate the need for weekly visits to our office until healing is nearly completed. This usually takes approximately 3-6 weeks after the surgery. Post-operative debridement of your nose is an important part of the surgery and should be scheduled prior to your surgery date. Post-op care helps prevent persistent or recurrent sinus disease and helps prevent scarring.
- You can expect some bleeding from your nose for several days after the surgery and then again after each office debridement for the first several weeks. Do not snort the blood in your nose or blow your nose as this will promote more bleeding. If bleeding needs to be controlled simple pinching pressure on the soft part of your nose will help control it. If bleeding persists for an extended period of time, please notify our office.
- Do not blow your nose, especially right after surgery. You can blow out the absorbable packing which is placed during surgery to aid in healing and control bleeding.
- The drip pad taped under your nose after surgery is for your convenience as you can't blow your nose. You may change it as needed, or remove it whenever you wish.
- After 2-3 weeks you will have some thick brown drainage from your nose. This is packing material, mucus, and old blood which begins to drain as the sinuses begin to clear themselves. It is normal, and does not indicate an infection.
- No bending, lifting over 10 pounds or straining for at least one week after surgery as this will promote bleeding from your nose. You should not plan on participating in any rigorous activity until healing is completed 3-4 weeks after surgery.
- Do not resume any use of aspirin-containing products until the majority of your post-operative healing has occurred 2-3 weeks after surgery. This includes medications such as Motrin, Advil, and Aleve.
- Do not suppress the need to cough or sneeze, but do so with your mouth open. This will help prevent any excessive post-op bleeding from your nose. Do not blow your nose until you have been given permission to do so (about 7 days following surgery).
- You should use over the counter nasal saline spray as often as every hour while you are awake. Ayr, Ocean, and Neil are common brands, but any brand, including the generic store brands, will work fine. This will help moisten your nose and prevent large crusts from forming in your sinuses. Dry crusts in your nose can be difficult and uncomfortable

to remove. You should spray your nose at least 4 times a day; the more you spray your nose the better.

- Take your pain medication as instructed. Often times, extra-strength Tylenol alone is sufficient. Don't try and "tough it out" as the increased pain will increase your blood pressure which will increase your chance of bleeding. **DO NOT TAKE ASPIRIN, IBUPROFEN, ADVIL, ALEVE, MOTRIN, OR ASPIRIN CONTAINING PRODUCTS.**
- Please write down any questions you have before calling the office, or coming to your next visit.
- Monitor your temperature. While a low grade fever is normal after surgery, higher fever can indicate a problem. Elevations above 101.0 F are a sign that you may have a problem. Also observe any changes in your vision or swelling of the eyes; and report these findings to us as soon as possible. Notify us of any worsening headache or neck stiffness.

As a Christian I strongly believe in prayer, and pray for all of my patients, especially during surgery. If you would like me to pray with you and your family before any surgical procedure please ask.

DO NOT hesitate to contact our office for any emergency at 580-421-6470. If a problem should arise when the office is closed, you may contact us through Valley View hospital at (580) 332-2323; or go directly to the nearest Emergency Room.

More information can be found at www.LandrumENT.com.