

FUNCTIONAL ENDOSCOPIC Sinus SURGERY

FESS A Patients Guide

What is A FESS?

A FESS is surgery used to treat Sinus inflammation, known as Sinusitis. FESS stands for Functional Endoscopic Sinus Surgery; this is performed under General Anaesthesia.

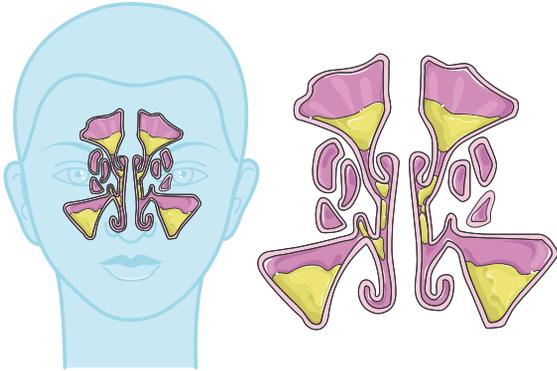
The aim of this surgery is to restore normal ventilation to your Sinuses by unblocking and widening the Sinus cavities

What does my surgery involve?

David will use a telescope and various surgical instruments to open and clear your Sinus cavities by removing any diseased tissue. A FESS surgery is done endoscopically (through the nostril) during this operation, no incisions are made externally or to the facial area. Depending on the severity and complexity of your case, David will operate to clear the areas above the eyes, around the nose and behind the cheeks. These areas are called the *paranasal Sinuses*, and they are joined to the nasal cavity. The Sinuses can get blocked by allergic inflammation or swelling in the nasal lining when you have a cold or trapped mucus. When your Sinuses become blocked the normal drainage of mucus becomes trapped. You may experience congestion, inflammation or headaches.

Leaving the Hospital

You can usually go home the same day if you live close to emergency care and have an adult at home with you for 24 hours after surgery. If not, you will be admitted for one night stay.



Nasal Discharge & Rinsing

Nasal discharge is normal. You may have bloody or brown discharge for up to 3 weeks. Post surgery you will receive a Sinus rinse. Use saline nasal rinses as recommended to keep your nasal passages clear and reduce the risk of infection. You may develop a postnasal drip. This symptom can sometimes leave a slightly bloody or mucousy taste in your mouth.

Foul Smell

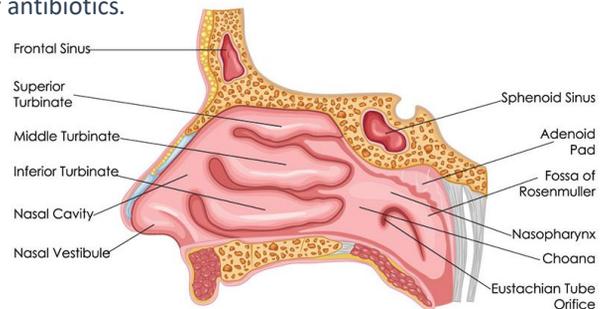
Smelling a bad odor is very common. The smell may be caused by packing in your nostrils or crusting inside the cavity from the wound sites healing. If rinses do not help and it becomes unbearable, contact us to be seen. Avoid blowing your nose for 1 – 2 weeks post surgery. Pressure from blowing may cause bleeding and disrupt the surgical site.



How to know you might need a Maxillectomy

You may need Sinus surgery if you have symptoms of chronic Sinus inflammation, chronic Sinus infections or nasal polyps. A CT Sinus scan is recommended to further investigate the cause of your symptoms and will provide detailed imaging of your Sinuses.

Your CT will show imaging of your Ethmoid Sinuses and Maxillary Sinuses. A normal CT will show black (air) in these areas. If the area is grey, you likely have a Sinus infection. Sinusitis develops when the tissue that lines your Sinuses begins to swell, trapping mucus that typically flows through your Sinuses and out through your nose. The trapped fluid can cause infections which may not subside with medication or antibiotics.



Recovery and Follow Up

A FESS requires 2 weeks recovery. If your work involves manual labor, lifting or straining then you shouldn't work for 2-3 weeks. The Tūhauora Clinic will arrange a 6-week post operative follow up review for you in advance.

A FESS is commonly combined with other nasal operations. (Turbinate Reduction, Septoplasty, Rhinoplasty) Most combined operations require 2 – 3 weeks recovery.

First 2 weeks

- It is normal to have mild to moderate pain or facial pressure for the first 24 hours after surgery.
- Expect nasal congestion, reduced airflow, and nasal discharge. Try to breathe out of your mouth.
- You may experience some swelling around the face. Puffiness is expected but if your face is hot and swollen **contact us immediately**.
- Temporary numbness of your upper lip, cheeks, or teeth is possible.
- If you have packing in the nose, it can be removed between 3- & 6-weeks by David. Dissolving packing may be used during surgery. Saline wash will loosen this, and it may come out the front or back of the nose.
- If you need to sneeze, try to do so with your mouth open.
- Rest! Avoid bending over. This causes blood to rush to the head. Avoid lifting heavy objects / children.
- Some discomfort is normal and may feel worse in the first few days. It usually takes a couple of weeks to improve. During the first 6 weeks of recovery, your pain may come and go. Keep using Sinus rinses, as these can help ease post-operative congestion.

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What to Avoid

- Avoid any substance which may irritate your nose. e.g.; dust, smoke, fumes.
- Avoid rubbing your nose.
- You may gently blow your nose 24 hours after surgery.
- Avoid inserting your fingers, cotton buds, or tissues into your nostrils.
- Do not use decongestant sprays unless advised.

Activities After Surgery

- **When can you begin exercising again at the gym?**
3- 4 weeks post op
- **When can you play sports?**
5-6 weeks post op
- **When can you begin swimming?**
2-3 weeks post op
- **When can you Fly?**
2 – 6 weeks post op (contact our team for clearance)

Operation Risks and Complications

- There is potential that a FESS may not cure sinus inflammation. This may be due to the severity of your sinusitis recurrent fungal infection, recurrent nasal polyps or mucosal linings of your sinuses.
- A Revision FESS may be recommended in some cases, and this repeat surgery comes with new risk of complication.
- There is a very low chance your smell may be distorted, decreased or lost.
- There is a chance of Infection, and you may require antibiotics to treat it.
- All complications of a FESS operation depend on which Paranasal Sinus area David is operating on.

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Contact:

Tūhauora Clinic	Ph: 09 55 33 781
Whangārei Hospital	Ph: 09 430 4100
Kaitia Emergency	Ph 408 9180
Ambulance	Ph: 111

Nasal & Sinus Rinsing

Nasal rinse 4 times per day. If you wish to rinse more than 4 times, that is fine.

You may have some debris come out of your nostril from the rinsing; this is normal.

The irrigation should not be painful although it may feel unnatural or uncomfortable.

Pre-made Sinus rinses can be **purchased at your local chemist, we suggest using Neil MED of FESS Sinus Rinse.**

- When rinsing, keep your mouth open and do not hold your breath.
- Place the cap against ONE nasal passage and gently squeeze the bottle.
- The solution should be draining from the opposite nasal passage. Keep squeezing the bottle until at least ¼ to ½ of the bottle is used.
Do not swallow the solution.
- If tolerable you can sniff gently, any remaining solution in the nasal passage may clean out the posterior nasopharyngeal area, some of the solution may reach your throat. Please spit it out.

The Nasal rinse solution may drip from the nose when leaning forward – this can occur anytime after rinsing and sometimes up to 2 hours after.

Seek Emergency Care

If you develop a **Temperature** higher than 38 degrees, severe **Headaches**, stiff **Neck**, **Swelling** of the eyes, constant Nausea, Vomiting or heavy **Bleeding** please seek emergency care.

Emergency Signs

- Severe Bleeding
- Signs of Infection
- Fever, increased pain, redness, or discharge from the surgical site should be reported promptly.
- Vision Changes: Any changes in vision or severe eye pain should be addressed immediately.
- CSF Leak Symptoms: Clear, watery discharge from the nose, especially when bending forward, should be reported immediately.