Are there any alternatives to surgery?

There may be non-surgical option for treatment depending on your diagnosis. You should discuss this with your consultant.

Useful Telephone Numbers

- ENT Department, Lister Hospital
 Control 01438 285113 or 01438 4118
- Day Surgery Unit, Lister Hospital
 Control 1438 285775 or 01438 285776
- ENT Nurse Specialist (Monday to Friday, 9am 5pm)
 ☎ 01438 314333, bleep 1028
 Mobile: 0778 534 3359 or 0787 639 0290

Version: 01.1

ENT Admission Office (waiting list)
 ①1438 286836 or 01438 286835

In an emergency, dial 999 and request an ambulance or attend your nearest Emergency Department.

NHS 111 can help if you have an urgent medical problem and you're not sure what to do. It is available 24 hours a day, 7 days a week. **1**11

Useful ENT website: www.entuk.org

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www.enherts-tr.nhs.uk

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East and North Hertfordshire

Patient Information

Septorhinoplasty

Ears, Nose and Throat Department



Indications

The nasal airway can be affected by a deviation of the septum, a thin piece of cartilage that separates each side of the nose internally, or a deviation of the nose itself which is externally evident (nose is crooked). Normally both the nose and septum are straight, however they can be bent naturally during growth or become damaged by an injury to the nose.

If the airway is narrowed because the septum is twisted or out of place, and the nose is crooked, this may result in a blockage in either one or both sides of the nose and breathing through the nose may become difficult. Surgery to correct this is called **septorhinoplasty**. The nose may be made straighter, but may also be made bigger, or smaller, and sometimes bumps can be removed.

Anaesthetic - This operation is performed under a general anaesthetic (whilst asleep).

Technique

A septorhinoplasty is performed to reposition the nasal structures and improve the nasal airway. Cuts are made inside the nose. Occasionally a small cut on the skin between the nostrils may be necessary. The nasal bones may be fractured to re-align them, and pieces of bone or cartilage may be removed or added to the nose to smooth out any bumps or dips. Following the operation, packs or splints are sometimes placed in the nose to prevent any bleeding or prevent scarring, and you will have a plaster cast or splint taped over the nose to protect it. The internal stitches are usually dissolvable and do not need to be removed. If there has been a cut between the nostrils, you will have a few sutures (stitches) to be removed.

Length of operation - The operation normally takes between 90 minutes to 3 hours.

Time in hospital

The packs placed into the nose are normally removed a few hours after the operation and patients are usually discharged the same day. Sometimes patients stay overnight and packs are removed the next day. We expect some bleeding after a septorhinoplasty but this should cease within a few days.

Photography

Photographs will be taken to record how your nose looked before surgery and to help your surgeon plan your operation.

Post-operative discomfort and time off work

• The most uncomfortable period is when the packs or splints are in place, and removal of these can cause some discomfort. Simple pain relief will be adequate. Most people require 14 days off work following this type of operation.

Risks and complications

Complications are rare.

- Occasionally, the bleeding persists and packing of the nose is required.
- An infection may develop in the nose following the operation. This will be characterised by increasing pain, nasal discharge and a high temperature (fever). Antibiotics may be required. You may be sent home with antibiotics.
- Rarely, the operation may leave you with a hole in the septum inside the nose going from one side of your nose to the other. This can cause a whistling sound/noise when you breathe, nasal crusting with blockage, or nosebleeds. Most of the time it causes no problems at all and needs no treatment. Further surgery can be carried out, if necessary, to repair a hole in the septum.
- Very rarely, patients may have some numbness of the teeth. This usually settles with time.
- In approximately 10% of cases, revision surgery (or a second operation) is required.

Follow-up appointment

A follow-up will be arranged for usually a week or so after the operation. The cast on the bridge of the nose and any splints or stitches will be removed.

Post-operative care and advice

- Avoid all moderate and heavy lifting for about 10 days after the operation.
- Avoid blowing your nose for the first week to prevent bleeding. You may be given nasal drops, spray or douches to help clear your nose. Sneeze with your mouth open to protect your nose.
- You may get some blood coloured watery fluid from your nose for the first two weeks or so, this is normal.
- Your nose will be blocked both sides like a heavy cold for 10-14 days after the operation and you may get a dry mouth; take sips of water regularly to help with this.
- Remain indoors during the first week; avoid contact with people with infections; avoid exposure to dust and smoky places.
- You may have bruising and swelling around your eyes and nose.
- No driving for 24 hours

If there is profuse bleeding, go immediately to your nearest Emergency Department.