

Septoplasty

WHAT IS SEPTOPLASTY?

This is an operation to repair a deviation in the nasal septum -- the "partition" dividing one nostril from the other. An incision is made inside the nostril and appropriate correction is made. The operation, which is performed under general anesthesia as an outpatient procedure.

RISKS AND BENEFITS

Septoplasty is effective in relieving nasal obstruction and improving sinus drainage. There should also be a good cosmetic effect. The risks of the procedure are slight, although rarely the septum may be perforated or "saddling" may develop (a dip in the bridge of the nose).

WHY IS IT PERFORMED?

The cartilaginous septum which separates the two sides of the nose is not invariably straight and regular, and so-called septal deviations are common, especially in white people. These deviations are either congenital ones (present from birth) or are caused by injury. Most go unnoticed or give no problems. It is only when the deviation is a serious one, causing nasal obstruction, that surgery is recommended. Often nasal obstruction, is found on both sides of the nose: on one side due to the deviation itself, and on the other due to overgrowth of the fleshy "shelves" (called turbinates) projecting from the side wall of the nose. Besides being unable to breathe properly through the nose, the sufferer may experience ulceration, swelling, and bleeding in one or both nostrils. Also, since drainage from the nasal sinuses is impaired, there tends to be chronic infection.

POSSIBLE COMPLICATIONS

Complications of nasal septum surgery are rare. Most common is postoperative bleeding.

THE PROCEDURE

X PREPARING FOR SURGERY

There is no special preparation for septoplasty, unless you are having a general anesthetic, in which case you should take nothing by mouth after midnight on the day before surgery. You will be given a thorough physical, and blood and urine samples may be taken for analysis.

X ON THE DAY OF SURGERY

You will be asked to take a shower or bath and to remove any makeup, jewelry, or dentures. Dressed in a hospital gown, you will be given your premedication (an injection or tablet to relax you) an hour or so before the procedure is due to begin, your nose will be packed with gauze soaked in a vasoconstricting agent. This causes the blood vessels to constrict, reducing the amount of bleeding during surgery.

X IN THE OPERATING ROOM

Unless you are having a general anesthetic, you will be positioned lying down with your

head dropping down over the end of the table. The surgeon injects local anesthetic into each nostril, and, once this has taken effect your head will be brought up and you will be positioned more comfortably so that the procedure can begin. What form the operation takes depends on the kind of deviation present, for septoplasty does not cover one single standard procedure. Often, where the septal cartilage is displaced, it is enough to free it from its attachments. Or, where the deviation is more complex, corrective surgery may be needed for cartilage or bone. Sutures and splints are employed in such a way as to maintain the septum in its corrected position while healing takes place. Finally, the nostrils are packed with gauze impregnated in a medicinal paste. At the end of surgery, you will be taken to the recovery area for monitoring if you have had a general anesthetic, or returned to your room. Back in your room If you have had a general anesthetic, you will feel sleepy and possibly nauseous. Or, as the effect of a local anesthetic wears off, your nose and face will feel swollen and sore. Painkillers will be given as necessary and drugs to relieve any nausea. You will be encouraged to rest sitting upright as much as possible and a dressing may be placed in front of the nostrils to absorb any discharge. The nasal packs are usually removed on the first postoperative day. With good progress, you should look forward to going home within a day or two.

GOING HOME

Before leaving the hospital, you will be given an appointment for a postoperative checkup. You will still need to breathe through your mouth at first, because the nasal obstruction will not clear for about 2-3 weeks after surgery. You will be advised to take it easy for a week or so, and perhaps stay away from crowded places where you could come into contact infection. But recovery from septoplasty should be quite rapid, and you should be able to resume all normal activities, including driving a car and going to work, within two weeks.