

Removal of Nasal Polyps

WHAT IS REMOVAL OF NASAL POLYPS?

Polyps are pale grey globular swellings. In the nose they are formed when areas of the nasal mucous membrane (the lining of the nose cavity) become distended with fluid (edematous). If the polyp is found on one side only, and is ulcerated, pink and fleshy in appearance, then it might be malignant. There are two main types of benign polyp: ethmoidal, which often hang in clusters from the top of the nasal cavity, and antrochoanal, which are usually found singly at the back of the nose. Antrochoanal polyps are most common in teenagers, boys more than girls. If there are only one or two ethmoidal polyps then they can usually be removed (polypectomy) in the doctor's room under a local anesthetic, otherwise general anesthesia is required for more extensive polypectomy. The operation is usually carried out as an outpatient procedure, but occasionally a hospital stay of a few days might be needed in case of complication or if there is an infection.

WHY IS IT PERFORMED?

Polyps can interfere with breathing. The first indication is usually a blockage in the nose. This is often accompanied by persistent sneezing and a runny nose. Very mild cases may be treated with the appropriate medication, but otherwise a polypectomy is needed.

RISKS AND BENEFITS

There are few risks involved with this technique, except for those associated with general anesthesia when used. Bleeding from the nose is a possibility, but is easily controlled by packing. Infections sometimes occur.

THE PROCEDURE

PREPARING FOR SURGERY

No special preparation is necessary.

ON THE DAY OF SURGERY

If the polyps are to be removed then a local anesthetic is sprayed into the nose, after which an anesthetic paste is applied to the nasal membranes. A wire snare is inserted into your nose and around the polyp. The snare is closed and the polyp snipped from its base. If there is much bleeding then the nose is packed. Normally a little bit of cotton wool is all that is required. The nasal membranes can then be cauterized, if necessary, using a hot wire.

More extensive polypectomy, especially for an antrochoanal polyp, will have to be carried out under general anesthesia. Again it should be possible to go as an outpatient, as a hospital stay is not normally required. The procedure to remove the polyp(s) is similar to that described above. Any suspect polyp will be sent to the pathology laboratory for analysis.

AFTER THE PROCEDURE

You should rest for about a half an hour following the operation. If all goes well you

should then be able to go home. The nasal packing can usually come out after about 12 hours.

GOING HOME

You should be back to normal after a week or two.

POSSIBLE COMPLICATIONS

Bleeding and infection are possible, but rare complications. Polyps do have a tendency to recur, no matter how well they have been removed.