

Post Comprehensive FESS Patient Care

Good postoperative care of the nose with medication and sinus washes helps the nasal lining heal more quickly and is the best way of ensuring a good long-term result.

Nose blowing should be avoided for the first few days after sinus surgery, but then the nose can be blown gently. It is common for there to be some minor bleeding from the nose after sinus surgery but medical attention should be sought if there is brisk or persistent bleeding. There is occasionally some packing in your nose when you wake up after surgery. This is usually removed within 24 hours of surgery. Sometimes a thin, soft sheet of plastic is left within the nose to prevent scar formation. These sheets of plastic are usually removed one week after surgery.

There is often suture (stitch) left after the surgery in the nasal septum (dividing wall). The suture knot is sometimes irritating and this can be cut off with a clean pair of small, sharp scissors a few days after surgery. The suture material resorbs by itself so it need not be cut off if it is not causing any harm. Sometimes some suture material comes loose into the nasal passage. This can be cut short with scissors.

Washing the nose

To help your nose and sinuses recovery after your sinus surgery you need to wash your nose with salt solution or xylitol. As soon as possible postoperatively begin lavaging the nose gently with the *Sinus Rinse* device. This should be done at least four times a day in the postoperative period, using optimally four bottles per lavage (*ie* 16 bottles a day). Patients with severe sinusitis or who have had recurrences after previous surgery should continue nasal lavage once or twice a day indefinitely.

Lavage is performed with the *Sinus Rinse* device filled with salt solution or xylitol. *NeilMed* sachets or *FLO CRS* sachets can be purchased from most pharmacies. The salt solution is made by adding one sachet to the bottle that is then filled with 240 mL of lukewarm tap water.

You will be provided with a 500g canister of xylitol to use after your initial packet of sachets has been used. Xylitol is a sugar that neither your cells nor bacterial cells can metabolise. It tastes sweet. A small teaspoon is provided with the xylitol. Three level teaspoons are usually sufficient. It is slightly harder to dissolve than salt so give the bottle a good shake. Not everyone likes xylitol because of its feel or its taste (whereas many prefer it). It has some gentle antibacterial and moistening effects, so does confer some advantages over salt. It can be purchased from most health food shops.

If you try xylitol and do not like it then it is possible to mix your own salt solution. Simply add 50:50 mixture of sea salt and baking soda in a sealable jar, and place half a teaspoon of this mixture into each bottle. Fill the bottle with warm water from the tap.

The Sinus Rinse bottle should be rinsed with hot water and allowed to dry (store bottle inverted so it can drain) after each use. Every three days sterilize the bottle by soaking it in *Milton's Solution* (tablets can be bought from your pharmacy). The bottle should be discarded and a new one purchased every two months.

Postop Medications

The medications prescribed can vary a little for each individual patient. Please follow the directions on your medications.

Most patients receive the following:

Doxycycline 100 mg 1 once daily with food for between 2 to 3 weeks (depending on the severity of the sinusitis). Roxithromycin 300 mg 1 daily at least half an hour before food is prescribed if doxycycline is not well tolerated.

Adequate pain relief, which consists of paracetamol two tablets as required up to four times daily and *Celebrex* caps 200 mg 1 or sometimes 2 daily as required (*Celebrex* is an NSAID like *Voltaren* and *Brufen* but it is generally better tolerated).

Flixonase nasal spray 50 ug 2 puffs each nostril twice daily (after saline lavage with *Sinus Rinse*)

Prednisone tabs 20 mg daily for one week then 10 mg daily for one week (this dose may be varied according to the severity of the polyps).

Postop Care

You will usually be seen within a week of your surgery.

At the first visit your nose will be numbed with topical anaesthetic and any remaining blood clots suctioned out and packing removed. Your nose usually feels much clearer after the first clinic visit.

After this visit you then over the next few days reduce the frequency of Sinus Rinses from 4 times daily down to twice daily (4 bottles each time).

You are then usually reviewed in another 4 to 6 weeks.

The sinonasal cavity takes a few weeks to heal after surgery. Care of the healing mucosa with regular lavaging and *Flixonase* spray usually achieves a very good result.

Generally, it is suggested to stay on twice daily lavages and sprays for the first six postoperative months, then to reduce that to once daily, and stay on this simple regimen indefinitely. The idea behind long-term treatment is to reduce the possibility of recurrence of sinusitis as much as possible.

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