



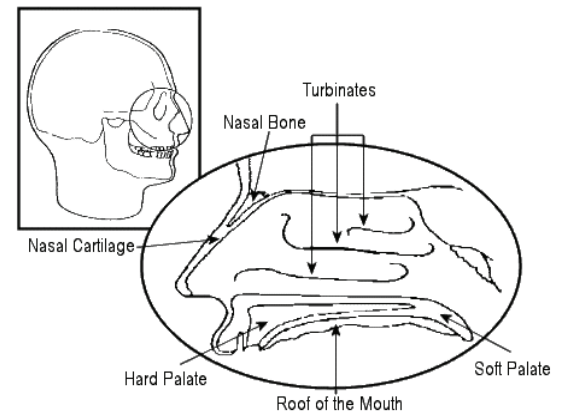
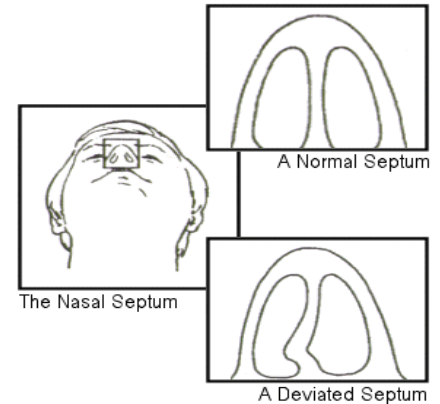
Septoplasty (Nasal Septal Surgery)

Septoplasty 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 usually performed under general anesthesia, requires a few hours stay in the hospital out-patient department.

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. These deviations are either congenital (present from birth) or are caused by injury. Sometimes a trivial injury early in life can grow into a significant deviation with the passage of time.

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 shelf-like structures (called turbinates) projecting from the side wall of the nose. Nasal surgery often includes modifying enlarged turbinates. Besides being unable to breathe properly through the nose, the sufferer may experience ulceration, swelling, and bleeding from one or both nostrils. Also, since drainage from the nasal sinuses is impaired, there may be a tendency to sinus infections.



RISKS AND BENEFITS

Septoplasty is effective in relieving nasal obstruction and improving sinus drainage. There should be little change in the appearance of the nose. 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).

THE PROCEDURE

Preparing for surgery: On the day before your operation you will be given a thorough physical exam, and blood may be taken for analysis. You should take nothing by mouth after midnight on the day before surgery. On the day of surgery you will check into the hospital or surgery center an hour or so before the scheduled starting time. You will be asked 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. A needle will be inserted into a vein as a route for medications given in the operating room.

In the operating room you will be positioned lying on your back. After attachment of various sensors to monitor blood pressure, heart rate and oxygen levels, you will be put to sleep. 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 may be 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. Your nose and face may feel swollen and sore. Painkillers will be given as necessary as well as 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. With good progress, you should look forward to going home within an hour or two.

GOING HOME

When you leave the hospital, your nose will likely be packed, with a bandage along your upper lip. You will be given an appointment for a postoperative checkup, usually the day after surgery, when any packs will be removed. You may still need to breathe through your mouth at first, because the nasal obstruction will not clear for about 2-3 weeks after surgery. There is usually some dryness of the nasal passages for a few weeks following surgery, easily relieved with a saline based nasal spray and antibiotic ointment. You will be advised to take it easy for a week or so, avoiding strenuous exercise. 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 one to two weeks.

POSSIBLE COMPLICATIONS

Complications of nasal septum surgery are rare. Most common is postoperative bleeding. Infection or bleeding can cause destruction of part of the cartilage, leading to the formation of a hole, or perforation in the septum, or some loss of support of the external nose. Because cartilage is a flexible structure which tends to maintain its shape, there can be some return to the original shape with time, and there is a slight possibility of recurrence of the obstruction.

NASAL APPEARANCE

Simple septal surgery has little or no effect on the external shape of the nose. If a previous fracture has displaced the nose to one side, this can be repaired and is often covered by insurance.

Some patients elect to change the shape of the nose for cosmetic reasons. These procedures can be combined with septal surgery but are not covered by insurance. Arrangements can be made for payment of the cosmetic portion while the insurance covers the medical (septal) portion of the operation as well as the hospital costs.