

## FUNCTIONAL ENDOSCOPIC SINUS SURGERY (FESS)

**Purpose:** Chronic sinusitis is a condition where the sinuses are not able to drain adequately. Often the problem is caused by narrowing in the natural sinus drainage areas. Chronic sinusitis can be treated medically using antibiotics, mucous thinners, decongestants, and steroid sprays or oral steroids. In patients that also have allergies antihistamines are helpful. In patients that fail medical management, endoscopic sinus surgery can often give relief from chronic sinus obstruction and recurrent infections. The surgery not only opens the sinus cavities (allowing them to drain easier), but it also allows future treatments to be more effective.

**Procedure:** Endoscopic sinus surgery is done in the hospital. It is usually done under general anesthesia. The surgery is done using telescopes and long narrow instruments through the nose. No skin incisions are necessary. Thin pieces of bone are removed to enlarge the natural sinus openings. Often, we will perform this surgery using stereotactic image guidance. This will improve our ability to do a complete surgery, and also lessen the possibility of complication. Sometimes this surgery is done in conjunction with a septoplasty or a turbinoplasty. After the procedure the patient goes to the recovery room and then back to outpatient surgery for an observation period. Patients are usually discharged a few hours after the operation as long as they are able to drink adequately and not having problems with bleeding.

**Recovery:** It may be necessary to place packing in your nose to prevent bleeding. This is done rarely, and can often be substituted by cauterization or use of an absorbable compound. If packing is used it will be removed in the office or emergency room one to two days following your procedure. You will be seen one week after the surgery to clean the inside of your nose and sinuses (debridement). You will be seen about once a week in the office for 3 to 4 weeks following the surgery. The purpose of these visits is to clean the inside of the nose and to remove any scar tissue that forms inside the nose. Between visits, you will need to irrigate your nose as instructed. It is necessary to limit activity for the first two weeks to prevent bleeding. Postoperative instructions will be given to you. Patients should plan on missing about a week of work or school. Your nose will have raw surfaces on the inside and it usually takes about 8 weeks to heal. During this period you will have problems with clearing mucus

### Risks and Complications

19. The ethmoid sinuses sit beside the eye socket. If the wall that separates the sinus from the eye is penetrated, complications can occur. If the eye muscles are injured this could cause problems with double vision. This type of injury is very rare. In very rare instances permanent loss of vision has been reported from injury to the optic nerve.
20. The ethmoid sinuses sit directly below the brain. If the wall that separates the brain from the sinuses is penetrated, fluid from around the brain can leak into the nasal cavity. If this occurs it is usually recognized during the surgery. Tissue can be rotated to close the leak and then reinforced with packing. If the leak presents after the surgery it can be treated conservatively with bedrest and head elevation. If this is not successful surgical treatment is available to solve the problem. This is a very uncommon complication, particularly if image guidance is utilized.
21. Bleeding can occur after any nasal surgery. Packing may be used in the immediate post-op period to control bleeding. Significant bleeding problems are uncommon, but if they occur, additional packing can be placed to control it.
22. Loss of smell can occur as a result of nasal surgery. This is an uncommon complication.
23. The goal of the surgery is to reduce the number of infections. Most patients experience significant reduction in the number of infections. About 10 -15% of patients may continue to have frequent infections despite the surgery.
24. Patients with nasal polyps may experience recurrence of the polyps despite an aggressive procedure to remove them.
25. Patients with allergies will not be cured of their allergies by the procedure. It will be necessary to continue to treat the allergies after the procedure.
26. The tear duct runs through the bone next to the sinuses. It is possible to injure this duct and have problems with tearing from the eye. This is usually a temporary problem, but in rare instances it could be permanent. There are procedures available to correct the problem if it occurs.

27. The raw surfaces created by the surgery normally heal nicely. Sometimes the normal mucus produced in the nose gets stuck on these operated surfaces and dries out to form crusts. It may be necessary to continue saline irrigations to clear these crusts.

**Follow-up:** Three follow-up debridements will be scheduled for you today. More may be necessary, but this is rare. If families have questions or problems there is always someone available from our practice to address issues that arise.

We ask that you sign below to indicate that you have read, understand, and accept the risks and complications of this operation. Alternative treatments have been discussed with me and I want to go ahead with the surgery.