

SEPTOPLASTY

1. Definition:

Reposition of the nasal partition/septum

2. Indications:

- To relieve nasal obstruction secondary to septal deviation
- To help the control of epistaxis
- As a component of a rhinoplasty to correct external deformity
- To relieve the symptom of snoring which is aggravated by septal deviation
- To gain access to the sinus openings as part of sinus surgery
- To gain access to the pituitary fossa to remove a tumour
- To correct the septal deviation to improve nasal ventilation

3. Pre-operative Assessment

4. Method/Operative technique:

The procedure may be done under general or local anaesthetic. The procedure may be occasionally done as a day case, but is usually an overnight admission. The Surgeon may on occasions insert a pack and also on selected occasions prescribe a course of antibiotics following the operation. It is performed through the nose, i.e. there are no external scars.

The patient should take at least one week off work and longer in certain cases if they are exposed to dust and fumes as part of their occupation. The patient will feel congestion and blockage in the nose for up to two weeks following the operation, manifested by tenacious discharge which will occasionally be bloodstained and crusting. The Surgeon will usually prescribe saline douche, decongestant drops and topical steroids for a variable period after the operation to relieve these symptoms

5. Information Consent:

Immediate Complications:

- Post operative bleeding which usually settles spontaneously.
- Excessive tearing which usually resolves
- Increases sensitivity of the incisor teeth, which usually resolves
- Infection which is rare and responds to antibiotics
- Blood clot under the lining of the septum, which may have to be drained.

Delayed Complications

- Perforation or hole in the septum which can lead to whistling and crust formation
- Scar formation which can result in recurrence of nasal obstruction
- Depression of the tip of the nose

Exceptional risks

- Meningitis due to leakage of the fluid from the brain
- Loss of smell and taste
- Fistula or opening between the nasal cavity and the oral cavity.

Mortality rate

The mortality rate from septoplasty is extremely rare, however, as with any operative interventions no matter how minor, mortality can occur as a result of reaction to drugs or very rarely, massive bleedings. To put this in context, the risk the patient takes in coming to the hospital for the consultation is much greater than the risk of mortality from septoplasty.

Recurrence

It is not always possible to achieve patient's satisfaction on the first attempt, revision surgery may be required.

Alternative to septoplasty

If the nasal partition is obstructing the nasal passage, there is no alternative procedure.

6. Outcome Measures: