

**Department of Otolaryngology Head & Neck Surgery
South Manchester University Hospitals NHS Trust
Inpatient Advice Sheet on Endoscopic Nasal Polypectomy
by P H Jones, ENT Consultant, September 2003.**

What are nasal polyps?

They are not growths. They are not male and female. They are swellings of the lining of the nose. They are caused by an inflammation. Polyp means a swelling with a neck. It describes a shape. This sheet deals with the most common type. One large benign nasal polyp does not come back as often as when there are lots. Not all polyps are the same. We will tell you if yours may be different. Polyps in the ear or voice box or elsewhere are not the same. Their shape is similar.

What causes the inflammation?

We do not know. You are not born with it. It is not due to infection. It is not due to allergy. You may be allergic as well. The inflammation may block your sinuses. This may cause infection. The inflammation causes swelling of the nasal lining. This causes polyps to form. Even without the polyps you may be catarrhal. That is you may have:

- a blocked nose;
- a runny nose;
- an easily irritated nose;
- sneezing;
- a post-nasal drip;
- a poor sense of smell.

before you have polyps. It may be years before the polyps grow.

What about my asthma? Why am I sensitive to aspirin?

The inflammation may affect your lungs and cause asthma. Either the nose or the lungs may be affected first. Sometimes patients with polyps are sensitive to aspirin. They may be sensitive to similar drugs or their diet. Please ask if you are interested in this.

Can you cure the inflammation?

No. All our treatment can do is help some of your symptoms for some time.

Are my headaches &/or facial pain due to the polyps?

No.

How does the operation work?

We use a telescope to look inside your nose. We grasp the soft polyps near their necks. Then we strip them off. Sometimes we use a special sucker with a rotating blade inside. This sucks the soft polyp inside bit by tiny bit. It then cuts it off the tiny bits. It is called a microdebrider.

Why do I need the operation?

To clear your blocked nose

Do I have to have this operation?

No. It is up to you. We call it elective. Without the operation your nose will stay much as it is.

What are the alternatives?

None if steroid tablets, drops and/or sprays have not helped.

What symptoms will be better after the operation?

Your nose should not be as blocked.

What symptoms may not be better?

All other nasal symptoms. They may do.

Endoscopic Nasal Polypectomy

What is the long term outlook after the operation?

Polyps tend to come back with time. This is more likely if you have asthma. It is even more likely if you are sensitive to aspirin. The operation helps. It is not a cure.

Does allergy to make a difference?

The polyps are not due to allergy. You may have both. Allergic symptoms tend to lessen with age. The tendency to polyps persists longer. Some of your symptoms may be partly due to the allergy.

Will I need any long term treatment after the operation?

Intranasal steroid drops for six months or long term.

Will there be a scar?

No. The operation is inside your nose.

What can go wrong? What can you do if it does?

As the operation is inside your nose very little except for bleeding. There are operations to remove polyps in the sinuses next to the nose. Very rarely these can cause damage to the skull or orbital contents. This means the brain and the eye and its muscles.

Can anything serious happen?

Occasionally bleeding may be severe or repeated. You may need to come back in. You may need more operations, X-rays or blood transfusions. More serious complications are very uncommon. All operations and anaesthetics have risks. Some are serious. The risks are similar to those of everyday life. Examples are: flying on holiday; driving in a car or walking down the street.

What will my nose feel like afterwards? Will it hurt?

It will be blocked and runny for a bit. It won't hurt much if at all.

What will my nose look like afterwards?

Just as it does now.

Will I have black eyes?

No.

What do I need to do to help before my operation?

If you smoke – stop. Your nose will be more blocked & runny for some months. Then it will be better.

How long will I be in hospital and off work?

You will usually be in just for the day or overnight. You may need up to two weeks off work. It depends on how many polyps there are and their size.

How should I travel home?

You may have a bleed. It is best to go home in a car or a taxi. Avoid public transport.

Will I be asleep?

You may be. This is called general anaesthesia. The doctor who makes you go to sleep is called an anaesthetist. He or she will tell you about your anaesthetic. We can do it under local anaesthesia also. We use sprays and injections to "freeze" the nose inside. Tell us what you would like. With lots of polyps general anaesthesia may be better.

Will there be a bandage? How long is it on for?

Endoscopic Nasal Polypectomy

We sometimes put a gauze swab under your nostrils. This is to catch any drips.

Will there be anything in my nose afterwards?

You may need a pack to stop bleeding. We seldom use heavy nasal packs now. We use them only if they are really needed. We take packs out after 2 to 4 hours or next morning.

Are there any stitches?

No.

What will I feel like afterwards?

Your nose will be a bit blocked and runny for some weeks. It won't hurt much. You may have some discomfort such as:

- A blocked nose. This may vary during the day. It will clear in up to six weeks.
- A runny nose. Blood stained or pink mucus. It will go darker and dry up in a few weeks.
- Crusting in the nose with scabs over the healing raw areas.
- Headaches or heaviness in the forehead for a few days until the sinuses are working again.
- A poor sense of smell or taste. If it does not clear, tell us in the clinic.
- An infection in the nose. This is not common. You may have worse pain and bleeding.

What do I need to avoid afterwards?

- Don't blow your nose hard. It won't help. It may cause bleeding.
- To avoid colds keep away from crowds for 10 days. A cold could stop healing or cause bleeding.
- Avoid excessive activity for 10 to 15 days. This can have the same effects as infection.
- Avoid any activity which could make you hot or flushed.
- Any normal light activity such as a gentle stroll is OK.

What do I do if any serious bleeding occurs?

- Blow each nostril clear: one at a time.
- Hold your head forward.
- Squeeze the lower fleshy part of the nostrils firmly closed.
- Use your thumb and first finger.
- Use a watch and time at least ten minutes.
- Put ice in a plastic bag. Add a little water.
- Put the ice pack on the bridge of your nose and your forehead.
- If you are still bleeding after half an hour, call us.

Do I have to take any treatment after the operation?

- A decongestant nasal spray. This helps clear the nose a bit. Do not use for more than ten days.
- Salt water douches. These are to clear the crusting and blockage. Douche the nostrils alternately with a teaspoonful, repeated 3 times, 3 times a day until you feel you do not need them anymore.
- Steam inhalations. Not the first day. Then steam your nose three times a day before douching. Use a pint of hot (**but not boiling**) water. Do this while it seems to help.
- An intranasal steroid spray for 6 months or longer if it helps your catarrh.

When will you need to look at my nose again?

We see you once afterwards to check all is well. You may not need another appointment.

May I ask a question?

At any time. You can also refuse to have the operation at any time. If you ask a question please ask someone suitable. A junior doctor or nurse may not know what you want to know. Please do not ask several doctors the same question and compare answers.