

Pediatric Endoscopic Sinus Surgery

Treatment

- You have 8 paired paranasal sinuses. These include the frontal (forehead) sinuses, the maxillary (cheek) sinuses, the ethmoid sinuses (honeycomb sinuses that are located between the eyes), and the sphenoid sinuses (behind the ethmoid sinuses).
- Children have less well-developed paranasal sinuses based on age.
- Using rigid telescopes and narrow instruments through the nose we can dilate and connect the openings to your paranasal sinuses. There are no external incisions required.
- Sinus surgery can remove blockage, enhance drainage and provide access of the nasal lining to topical medications and rinses.
- Often 3-dimensional image guidance is used to protect the important structures that surround the sinuses.
- Common procedures to enhance nasal breathing may be performed at the same time. These include adenoidectomy, septoplasty and turbinate reduction.

What should we expect after endoscopic sinus surgery?

- Drainage from the nose may be seen for three to four days after surgery and could last up to a week. This drainage may initially have some bright red blood and progress to brownish streaked mucus.
- A moustache type dressing may be used to help soak up this drainage. The first day after surgery you may have to change the dressing several times.
- Avoid nose blowing for two weeks after surgery. Try to have your child sneeze and cough with the mouth open.
- Crusting in and below the nostrils may be noted due to drainage from the nose after surgery. Washing the outside of the nose with warm soapy water should help remove the crusting.
- Nasal stuffiness may also be noted until the nose heals. Saline nasal spray helps. Use two sprays on each side at least 4- 5 times per day.
- Your child will be uncomfortable for the first 2 to 3 days. Tylenol (acetaminophen) usually provides sufficient pain relief. You will be provided with the weight based dosage for your child.
- Narcotic medication such as oxycodone can be helpful if the above is insufficient to control pain. Depending on the age and size of your child, you will be provided with a weight based dose of narcotic pain medication to use as back-up for severe pain.
- If narcotic pain medication is needed, your child may experience itching, nausea and/or constipation.
- After three days, Ibuprofen may be used as well.
- Your child may return to school after three days. However he/she should avoid any vigorous physical activity like PE or sports for 2 weeks.

What are some reasons we should contact our doctor after surgery?

- Severe bleeding or continued bleeding beyond one week. Clear drainage from the nose that is present after 10 days.
- Pain not relieved by Tylenol/narcotic pain medicine.
- Because the sinuses are located near the eyes, some puffiness may be seen; however, if the swelling of the face or eyes increases, or if bruising occurs, notify the office immediately.
- Any change in vision should be reported immediately.
- Headache complaints are normal the day of surgery and may be present for 1 to 2 days after. If the headache continues, please call the office.
- Fever greater than 101 F.