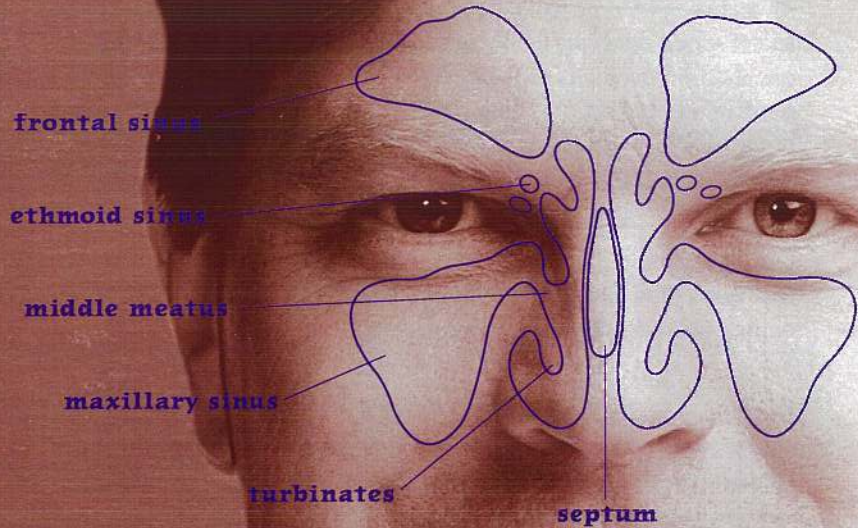


FUNCTIONAL ENDOSCOPIC SINUS SURGERY

Functional endoscopic sinus surgery is the most common type of sinus surgery. Utilizing small telescopes and microdebriders, the surgery is less traumatic to normal tissues and thus allows more rapid recovery.

The goal of this surgery is to correct the underlying cause of chronic sinusitis such as blockages of sinus outflow pathway, obstructing polyps, or swollen membranes.



ALTERNATIVES TO SURGERY

In most cases, medical therapy is the first form of treatment for sinus disease, and in most cases it is possible to continue to treat the disease medically. Alternative forms of surgery are also available, and you should discuss these further with your surgeon if you wish.



normal



diseased

IMAGE GUIDED FUNCTIONAL ENDOSCOPIC SINUS SURGERY

Image guided functional endoscopic sinus surgery is a new technique used in many cases when patients have more extensive disease or have had previous surgeries. This technology allows the surgeon's precise visualization of the anatomy of the paranasal sinuses.



Tuscaloosa Ear, Nose and Throat Center, P.C.

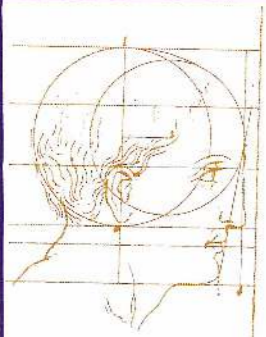
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Designed as a physician handout to patients with discussion and explanation of terminology and conditions.

ENDOSCOPIC SINUS SURGERY



In general, endoscopic sinus surgery is intended for people with chronic sinus problems who do not respond to medical therapy. Symptoms of sinus disease may include facial pain or feeling of fullness, difficulty breathing through the nose, a persistent bad smell in the nose, post nasal discharge, and occasionally headaches.

Occasionally, sinus problems may cause hoarseness or cough, or a variety of other symptoms but all of these problems can also occur in the absence of sinus disease. The diagnosis of a sinus problem must, therefore, be based on an assessment by your doctor.

In the majority of people with sinus problems surgery is not indicated or required. Most people with sinus complaints can be

successfully treated medically. This treatment may consist of antibiotics or other medications, treatment for allergies, or environmental control (such as stopping smoking). The type of medical treatment chosen is based on your doctor's assessment of the cause.

Unless your doctor finds a problem which clearly requires surgical intervention, one or more forms of medical treatment are used as the primary therapy for most sinus problems.

In some people, however, surgery is recommended. This may be because of an infection or inflamed area which does not clear with antibiotics, or which keeps returning when the antibiotics are stopped, or for other reasons which you should discuss with your physician.

Evaluation & Follow-up

At the initial consultation, it is helpful if you bring a letter describing your past history and treatment up to this time. Previous x-rays are also often helpful if these are available. CT scans of the sinuses are frequently required in order to accurately assess the areas involved, and suitability for endoscopic sinus surgery. In some cases these may be pre-arranged at the time of the initial visit based upon information supplied by you, or your physician, in advance. They may also be performed in our office.

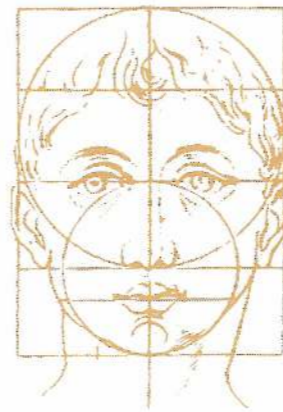
If, after consultation, it is felt that you would benefit from endoscopic surgery, a date will be arranged for the procedure. In many cases, the surgery can be performed on an outpatient basis, however, it is important to be prepared to be admitted to the hospital should this prove necessary at the time of surgery.

Following the surgery, if no nasal packing is required, a follow-up visit at approximately one week following surgery is necessary to clean crusts from the surgical site. A further follow up visit(s) is then scheduled in two to six weeks.

POST-OPERATIVE DISCHARGE

Some bloody post-nasal discharge may occur for approximately two months after this procedure. This is normal and slowly improves. You should not blow your nose for approximately five days following the procedure.

Occasionally, further minor endoscopic procedures or rarely a more radical surgical procedure could be required, if a resolution of symptoms does not occur.



Risks of Surgery

BLEEDING

Bleeding is a potential risk in most forms of surgery, especially nasal and sinus surgery. Although the risk of bleeding appears to be reduced with this technique, on occasion significant bleeding may require termination of the procedure and the placement of nasal packing. Bleeding following surgery may require the placement of packing and hospital admission.

CEREBRAL SPINAL FLUID LEAK

All operations on the paranasal sinuses carry a rare chance of creating a leak of spinal fluid (the fluid that surrounds the brain). Should this rare complication occur, it creates a potential pathway for infection which could result in meningitis. If a spinal fluid leak should occur, it would extend your hospitalization and might require further surgery for its closure, should it not close spontaneously.

EYE INJURY

Occasionally some swelling or bruising of the area around the eye may occur. Rare cases of visual loss have been reported after sinus surgery. Temporary or prolonged double vision may also occur.

OTHER RISKS

Numbness or discomfort in the upper front teeth may occur for a period of time after some procedures. Occasionally some swelling, bruising or temporary numbness of the lip may also occur. Blowing your nose in the early postoperative period might result in a temporary collection of air under the skin and facial swelling for a period of time.

Although the purpose of the surgery is to reduce or eliminate the symptoms of chronic sinus disease, should it not be successful, the symptoms could remain unchanged or become worse. These symptoms include further sinus pain or discomfort, increased nasal obstruction or a prolonged increase in post nasal discharge. A decreased sense of smell is also a possibility.