



Operation Information

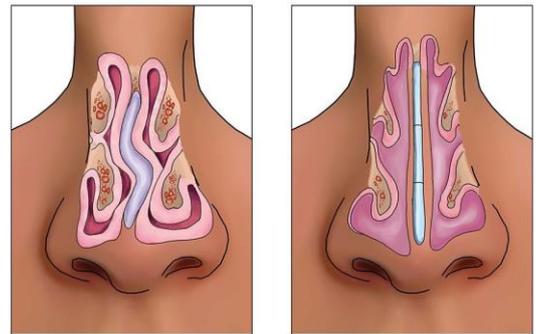
Septoplasty / Submucosal Resection of Septum (SMR)

Introduction

Septoplasty / Submucosal Resection of Septum is an operation performed to straighten the deviated nasal septum.

Indications

1. Nasal obstruction attributed to a deviated nasal septum
2. Obstruction of sinus opening leading to sinusitis
3. Epistaxis
4. Septal spur headache
5. Deviated nose attributed by deviated nasal septum
6. Provide exposure for other nasal surgery



Source:

<https://www.healthtravellersworldwide.com/wp-content/uploads/2018/11/Septoplasty.jpg>

Outcomes

The expected outcome of this operation can reduce nasal obstruction, obstruction of sinus opening leading to sinusitis, epistaxis and septal spur headache. It can also improve nasal deformity attributed to deviated nasal septum.

Procedures

1. The operation can be performed under local or general anaesthesia.
2. Through an incision inside the nose, the deviated nasal septum is corrected by mobilization, repositioning, and resection.

Possible Risks and Complications

1. Common risks and complications ($\geq 1\%$)
 - i) Bleeding
 - ii) Persistent nasal obstruction
 - iii) Infection
 - iv) Nasal adhesion
 - v) Septal haematoma
 - vi) Septal perforation, which may require another operation to repair
 - vii) A chance of incomplete relief of deviation and recurrence
2. Uncommon risks with serious consequences ($< 1\%$)
 - i) Saddle nose deformity / columella retraction
 - ii) Loss of smell sensation
 - iii) Cerebrospinal fluid rhinorrhoea
 - iv) Toxic shock syndrome
 - v) Death due to serious surgical and anaesthetic complications

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications from arising, further operation may be required to deal with the complications.

Pre-operative Preparations

1. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia.
3. Routine tests such as blood tests, ECG and chest X-ray may be performed.
4. No food or drink six hours before the operation. (For general anaesthesia only)
5. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewelry and contact lenses.
6. Please empty your bladder before the operation.

Post-operative Instructions

General

1. After general anaesthesia, you may:
 - experience discomfort in the throat after tracheal intubation.
 - experience side effects of anaesthesia including feeling tired, drowsy, nausea or vomiting.Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse of wound pain. Proper pain relief treatment by injection or oral medication may be prescribed by the doctor.

Wound Care

1. As nasal pack(s) is inserted into the surgical side or both sides of the nose, you have to breathe through the mouth. The nasal packs will be removed after one or two days.
2. There may be mild bleeding after the packs are taken out, which usually stops naturally.
3. Small amount of blood-stained watery discharge is common for the first two weeks. You may also have nasal stuffiness.
4. Saline nasal spray is used to keep the nose moisturized to promote healing.
5. Avoid blowing your nose in the first two weeks after the operation.
6. If you are going to sneeze, sneeze with your mouth open to protect the wounds inside the nose.

Diet

1. A normal diet may be resumed as instructed after recovery from anaesthesia.
2. You may prefer to start with liquid or soft food which is easy to swallow when the nasal packs are in place.

Advice on Discharge

1. Please comply with the medication regime as prescribed by your doctor.
2. Immediately consult your doctor or return to hospital for professional attention in the event of persistent bleeding, increasing nasal pain or congestion, foul-smelling discharge, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms.
3. Any follow-up consultations should be attended as scheduled.

Alternative Treatment

Medical treatment

Consequences of No Treatment

1. Persistent nasal obstruction
2. Sinusitis and its complications
3. Recurrent epistaxis
4. Persistent headache
5. Persistent nasal deformity

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification