# TURBINATE SURGERY

*Mr Henry Sharp FRCS (ORL-HNS)*

*Consultant Ear, Nose and Throat Surgeon / Rhinologist and Nasal Plastic Surgeon*

What are the Nasal Turbinates ?

They are swellings on the internal sidewall of the nose on each side. There are three sets (the superior, middle and inferior turbinates) on each side, and there are responsible for warming and humidifying the air you breathe in through your nose.

The Turbinate is made up of bone and nasal lining and as part of your Rhinitis, the lining part of the turbinates (and in particular, the lowermost inferior turbinates) may swell markedly and cause blockage of your nose.

The swelling of the turbinates may well reduce with medical treatment such as nasal sprays as directed by me, but occasionally surgical reduction of the turbinates may be necessary to unblock your nose.

What is the point of reducing the size of my turbinates ?

To improve the nasal airway and therefore increase the amount of air you are able to breathe in through your nose.

As a knock-on effect of this, unblocking the nose may well aid snoring and therefore improve sleep quality for you and your sleep partner.

Sense of smell may improve as you are once again able to breathe in pleasant (and unpleasant!) aromas through the nose.

How are the turbinates reduced in size ?

There are many described techniques for reducing the turbinate size, but many current methods of reduction such as lasering or diathermising (electrical cautery) the turbinates have only short term benefit, as the turbinate tissue regrows rapidly.

Techniques such as cutting out or trimming the turbinates are more successful but can lead to dryness and crusting in the nose. The risks of bleeding after surgery using these techniques is also greater.

I generally perform 2 techniques depending on your individual findings at the time of surgery.

These have proven long term effects on the nasal airway, but without the side-effects of the other methods : -

**Powered Endoscopic Turbinoplasty** – this is a new technique gaining popularity in the USA where the turbinate is partially removed using a powered shaving tool in the nose.

It has the advantage of permanently reshaping and removing part of the Inferior Turbinate, but only in precisely the correct place using endoscopic guidance and thus long term preservation of the normal turbinate function is achieved.

**Sub Mucous Out Fracture of the Inferior Turbinate (SMOFIT)** – sometimes the turbinate itself is particularly bony and the lining part of it not particularly inflamed. If this is the case, the turbinate itself can be gently repositioned inside the nasal cavity so that it has less of an effect in blocking the nasal airway.

How is the operation done ?

It is performed under General Anaesthetic, and often is combined with another operation such as a Septoplasty, Functional Endoscopic Sinus Surgery (FESS) with or without Balloon Sinuplasty as required.

You may have small dressings (called packs) in the nose for a few hours, but possibly overnight following surgery to prevent bleeding and it therefore may be possible to go home on the same day as surgery or during the morning the following day.

Your nose will feel somewhat stuffy for 2 weeks following your operation (but often better than what you are used to straight away!), and it may take 6 weeks for your breathing to become clear.

As your nose will feel blocked and you will be breathing through your mouth, you may have a dry throat. Drink plenty of clear fluids if this is the case.

If you have to sneeze, do so freely through your mouth without ‘bottling it up’ in your nose. You should avoid smoky or dusty surroundings.

A small amount of blood stained mucus from the nose is quite normal during the first week or two, and you may be given some nasal drops or sniffs to help this.

It is important not to blow the nose or to cough and strain during the first week to prevent bleeding.

You should avoid strenuous activity, sports or exercise for about 2-3 weeks as this may cause discomfort and bleeding.

You will need to be off work for 2 weeks following your operation, but possibly longer if your work is strenuous or involves a lot of lifting.

Does Turbinate Surgery have any risks or complications ?

Turbinate Surgery is a commonly performed operation and is very safe, but as with any operation involving a general anaesthetic carries a small risk. This risk is greater if you are in poor general health and have serious long term medical conditions such as heart disease or diabetes.

*Possible risks with turbinate surgery are:-*

* Bleeding from the nose, which may need you to return to hospital and your nose to be packed.
* Infection in the nose, usually requiring antibiotic treatment.
* Scar tissue may form between the septum and the side wall of the nose as the nose heals. This may need to be treated by further minor operations usually in the outpatient department with local anaesthetic (the nose being numbed by drugs placed into the nose with you awake), or occasionally with a further general anaesthetic.
* Persistent crusting may occur, but is very uncommon
* The symptoms may return as the nasal lining regenerates, but this is much less common than it once was utilising the newer techniques described above.