



Central West Specialists

Ear, Nose & Throat Specialist

SINUS SURGERY

The sinuses are large air containing structures in the bones of your face. Their function is not known, but their presence is commonly felt as they do tend to become infected particularly after colds and influenza. With antibiotics most sinus infections can be treated and controlled, but sometimes the infection does not go away and eventually an operation may be needed. There are a variety of sinus operations. The aims of the operations have been to remove infection and to improve ventilation of the area as it is believed that this will help return the sinus lining to normal.

There are several different types of sinus procedures and these will be mentioned;

INTRANASAL ANTROSTOMY – This makes an opening into the large cheek sinus called the antrum. The risks of this procedure are low and it is not particularly painful. It does require a general anaesthetic and a day in hospital. There is a slight risk of bleeding from this procedure as with any nasal operation. This is usually not a problem and can be easily controlled. Very rarely some numbness of the teeth can occur, but again this is very uncommon. This operation is quite effective for controlling sinusitis in this area, but sometimes it will not help the most troublesome symptom, i.e. Infected Post Nasal Drip.

CALDWELL-LUC OPERATION – This operation is rarely done these days. It was designed for more persistent infections of the cheek sinus, which did not respond to intra nasal antrostomy. There is a chance of bleeding and numbness of the teeth after this procedure and the numbness can be permanent. There is also some swelling of the cheek afterwards and very rarely sometimes there is persisted discomfort. It is however, an operation that is still sometimes required and in the majority of cases it is very well tolerated.

ETHMOIDECTOMY – The Ethmoid sinuses are a mass of honeycomb bone in the top part of the nose. Infection in these sinuses does seem to affect the other major sinuses i.e. the frontal sinuses in the forehead and the maxillary sinuses in the cheeks. These sinuses lie right next to the eyes and above is the base of skull and brain. Care has to be taken in operations in this area to avoid damage to either structure. Damage to the eyes can cause infection in the area or problems with the eye sight, these are very rare but include visual disturbance, visual loss and double vision. Any of these complications are rare but can be permanent. The instances are probably in the order of 2-5% of operative cases. The risk is larger when previous operations have been carried out in the area.

Certainly sometimes it is safer to do the operation externally, i.e. through a very small incision just on the side of the nose. This is called an external operation and is not required very often. Certainly the scar rapidly becomes invisible and the same risks apply to this procedure as well although the structures can be more easily seen. The other possible problem with Ethmoidectomy involves the base of the skull. The bone here is very brittle and a small crack in this bone can lead to a leak of Cerebro-spinal fluid, which is the fluid, which bathes the brain. This can usually be attended to at the time of the operation. However there is a risk of meningitis which is serious infection of the brain, if this leak continues.

Dr Peter Bryan F.R.A.C.S.

Provider No: 043105GJ
WorkCover Accredited

Level 1/131-135 Summer Street ORANGE NSW 2800

Email: practice@centralwestent.com.au Ph: (02) 6363 1688 Fax: (02) 6363 1865



Central West Specialists

Ear, Nose & Throat Specialist

If it does develop and it is not obvious at the time of the operation a second operation maybe necessary. Operations such as these require 1-2 days in hospital, 2 weeks are required off normal activity and aspirin should be avoided as a relief from discomfort.

Dr Peter Bryan F.R.A.C.S.

Provider No: 043105GJ
WorkCover Accredited

Level 1/131-135 Summer Street ORANGE NSW 2800

Email: practice@centralwestent.com.au Ph: (02) 6363 1688 Fax: (02) 6363 1865