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Rhinoplasty with or without Septoplasty and Turbinate Reduction.

Before the operation: (please see video animation on website www.niagararhinoplasty.com under face procedures)

2 weeks before the operation you should not take any non-steroidal anti-inflammatory medications. These include Motrin, Ibuprofen (Advil), Aspirin, Naproxen or any medications containing these drugs. All herbal medications should also be avoided as they can interfere with normal blood clotting and anesthetic agents. If you take pills for high blood pressure, you should still take them the morning of surgery with sips of water. One of the risks of the surgery is post operative bleeding which will be less likely if these instructions are adhered to.

Patients will attend a pre-operative tour at the hospital where blood work and pre-operative testing will be done if any has been ordered. Photos are generally taken when the surgery is booked, then at 1 week, and 3 months post operatively.

After the Operation:

You will be discharged the same day of the operation. You should have someone with you the first evening. It is normal to have some blood come from the nose for up to 2 weeks after the operation. You should not have brisk nasal bleeding. Blowing your nose should be avoided for at least 3 days, and then only gently afterwards for 2 weeks. Your upper teeth may be a bit sore which is temporary and will resolve in a few weeks to months depending on how much surgery was necessary in the area called the maxillary crest of the nose. This is a small bone located just above the upper central teeth. If you develop thick green or yellow nasal discharge following surgery, you should contact the office before your follow up. On weekends or evenings, you may need to go to a walk in clinic or Prompt care centre for treatment.

There may be small nasal stents called Doyle Splints in the nose to help support the repaired septum after the operation. These are removed 2-7 days after the operation. Follow up is generally 2-3 weeks post operatively if you don't have any intra nasal stents or packing. It is important that you don't wait until that time to book your follow up as it will be very difficult to accommodate a timely appointment. If osteotomies are done (small breaks in the external nasal

bones) then you will have a cast placed on the nasal bridge for 7-8 days (please see video animation on website under face procedures). It is helpful to elevate the head at night for the first few nights after surgery to help reduce the swelling. Ice packs to the forehead and eyes can also be helpful.

You may have an incision in the nasal tip near the upper lip. The sutures are absorbable and do not need to be removed, but you should be careful not to rub them out too early as they should stay in for about 7-10 days. You will have an ointment prescribed to place on this incision for about 10 days post operatively. It is very common to have nasal crusting and weeping which you can clear with moist q tips but should avoid rubbing at the middle of the nose or you may damage the tissues where you have had your surgery.

You should not use your steroid nasal spray for 3 weeks after the surgery while things heal. It is recommended that you use a Saline Nasal Spray or Hydrasense medium nasal spray for the first five days post op. You will then use Neilmed Sinus rinse spray two or three times daily for up to 3 months after surgery.

There can occasionally be adhesions that develop in the nose that are easily divided in the office on follow up if needed. You should expect some temporary relief after surgery followed by some ongoing nasal congestion for a few weeks with progressive improvement as the intra nasal swelling, from the surgery, resolves. This operation does not treat sinus infections, but is primarily aimed at improving nasal breathing. This can have the added benefit of treating snoring, loss of smell and taste, and in some cases sleep apnea. If you are not feeling any improvement after 1-2 months you should call to arrange an additional follow up. Septoplasty surgery is generally quite effective, but can in rare occasions require revision. In some cases you may have an additional problem with an area called the “nasal valve” that may need treatment. This can be determined on close follow up if required.

It is quite normal to have swelling in the nasal tip and dorsum for up to 1 year after surgery. Most of this will resolve by three months time. Your nasal dressing and cast will be removed by 8 days after surgery. Your nasal shape will be evident at this time, but the nose will still be quite swollen. Most of the bruising will be resolved by 2 weeks and the nasal bones healed by 6 weeks after surgery. There is no restriction with activity at 2 weeks after surgery but you may feel some soreness with impact exercise until 6 weeks after your surgery.

It is normal to plan for 2 weeks off after this procedure, but you may be able to return sooner depending on what type of work you do and your preference.