

## **Balloon Sinus Dilation Procedure Information Brochure**

**Please keep this as a reference for after surgery**

### **Indication:**

The sinuses are four paired cavities below the eyes (maxillaries), next to the side of the eyes (ethmoids), in the forehead (frontals), and at the very back of the nose (sphenoids). Sinusitis is inflammation and swelling of the lining membranes of the sinuses. This is commonly caused by bacterial or viral infections or blockage of the sinus openings by thickened mucosa called polyps. Symptoms of sinusitis include facial pain or pressure, nasal obstruction, discolored nasal drainage, loss of sense of smell, and headaches. The majority of patients with sinusitis can successfully be treated with antibiotics or other medications, treatment of allergies or environmental control. There are occasions when sinus infections are unresponsive to medical treatment and surgery is required. A balloon sinus dilation procedure may be indicated as an alternative to traditional sinus surgery. This procedure involves the insertion and inflation of a 6 to 7 mm balloon which will dilate the sinus pathway to enable better drainage.

### **Evaluation Prior to Balloon Sinus Dilation Procedure:**

The decision to perform balloon sinus dilation procedure is usually based on a computed tomography (CT) scan of the sinuses in combination with endoscopic visualization of sinuses. This scan accurately locates the site of infection which is often in the anterior ethmoid sinus, where the maxillary and frontal sinuses connect into the nose.

### **Prior to Procedure:**

In most cases, this procedure can be performed in office with local anesthesia. You will be given medications (i.e., antibiotics, a topical steroid spray and sometimes steroids by mouth) in the days or weeks prior to surgery. Please bring those medications to your procedure.

For at least ten days before this procedure, the patient should refrain from taking aspirin or medications that contain aspirin. Tylenol can be taken if necessary. In addition, if the patient is taking any other medications the doctor should be advised.

### **Balloon Sinus Dilation Procedure:**

The prescribed medications should be started about 90 minutes prior to the procedure, make sure to bring those medications with you.

Application of local anesthesia starts with numbing and decongestant sprays administered to your nose. Then cotton pledgets, which have been soaked in a numbing and decongestant solution, will be placed into the nasal cavity. Additional numbing medication will then be injected into key location of your nose with a small gauge needle. Most patients feel little to no discomfort during this portion of the procedure due to the previous application of numbing medications.

Patients will typically remain awake during the procedure. Most patients experience little to no discomfort during the placement and inflation of the balloon; however, most report a sensation of pressure.

A small endoscope with attached camera will be inserted into the nose. This will enable proper identification and visualization of the sinus pathway prior to and during balloon placement and inflation. Once the sinus pathway has been identified, the small balloon will be inserted and briefly inflated for about 5 seconds. Some patients will hear small “popping” sounds during the inflation of the balloon, this is normal. This will be repeated for all indicated sinuses.

### **Additional Procedures**

In conjunction with the balloon sinus dilation, additional procedures may be performed. These may include turbinate resection, sinus polyp removal and/or septoplasty.

Turbinate resection is the most common and is recommended when the turbinate, a long narrow bone shelf, protrudes into the nasal passage causing nasal obstruction, mild congestion and/or nasal drainage. This procedure involves the insertion of a small electrical probe into the turbinate.

Any additionally indicated procedures will be discussed in more detail prior to scheduling.

### **Risks and Complications:**

Some bleeding is a common after this type of sinus procedure. Rarely bleeding can be severe and require placement of nasal packing and even hospital admission. In all sinus surgeries or procedures, especially with extensive disease or severe polyp disease, there is a possibility that the disease may not be cured or disease could recur at a later date. In this case subsequent medical or surgical treatment may be necessary. Since the sinuses are close to the base of the brain and eyes, injury to these areas can result in a very rare complication such as cerebrospinal fluid leak, double vision or blindness. These complications are minimized by the use of the rigid lighted endoscope, which improves visualization.

### **Checklist Prior to Procedure:**

- Along with the prescribed medications, please pick up Afrin Nasal spray (over the counter) and administer 4 sprays per side 1 hour prior to procedure.
- Have someone bring you to the procedure and drive you home afterwards.
- Bring all your medications with you to the procedure.
- Although you may have a normal breakfast that morning, please only have liquids for lunch the day of the procedure.
- Pick up saline nasal spray (Ocean or Ayr) to use after the procedure 4-5 times a day.

### **In the Days/Weeks After Surgery:**

Some light bleeding in the days to weeks after the procedure is common. Nasal blockage can also be expected for the first week; therefore, it is recommended a saline spray such as Ocean nasal spray or Ayr saline spray be instilled into the nose as often as 4-5 times a day to help clear the nose and blood. The first post-operative visit will be schedule two weeks after the procedure. Further follow-up appointments will be scheduled over the next two to six weeks.

- Antibiotics and other medications prescribed prior to the procedure should be continued as recommended.
- DO NOT BLOW YOUR NOSE** for 2 days after the procedure, instead just “sniff in.” If you accidentally blow your nose or sneeze, you may get some air in your cheeks or face, which will cause some puffiness. This is typically not serious and will resolve in a few days.
- Sleep with your head elevated on 2-3 pillows to help reduce swelling.
- If you use CPAP, do not use it for at least one week after the procedure.
- DO NOT** fly, scuba dive, skydive, parachute or participate in other vigorous physical activity for 2-4 weeks.
- If you have any problems or concerns, please call our office at (806) 791-0188.