

Patient Information Leaflet

Rhinoplasty and Septorhinoplasty

**THE
MEDICAL
SPECIALIST
GROUP
LLP**

Mr David Beaumont

July 2013

Discharge Advice following Rhinoplasty or Septorhinoplasty

The major potential problem in the first days or weeks post-operatively is bleeding. This usually occurs in the first 24 hours but can occur up to 10 to 14 days after the operation. The incidence of bleeding is about 1% only and the following advice is given to minimise the risk of this happening and to help you manage generally after the operation.

1. Return to Work

For medical reasons you will need at least 1 week off after the operation (to avoid bleeding and infection) but because the external swelling and bruising can take 3 weeks to settle down you may prefer not to return to work until later for cosmetic reasons.

2. Exercise

Walking is fine but avoid strenuous activities eg. lifting and straining, as these tend to increase your blood pressure and chance of bleeding.

3. Socialising

Avoid crowded places and contact with people who may potentially be carrying infections for 7 days.

4. Nasal congestion and drainage

The lining of your nose will swell a little following the operation and your nose may become slightly blocked by blood clot/crusts making you feel like you have a “head cold” for up to 2 weeks. You should sit as upright as possible in the first few days to minimise swelling and, if possible, sleep with your head slightly elevated. Avoid vigorous nose blowing early on as this can cause further bleeding and clots.

If you have had a Septoplasty or Turbinate Surgery at the same time your nasal lining will swell even more and your post-operative course will be slightly different. (Please refer to the Discharge Advice Booklet entitled “Discharge Advice following Septoplasty +/- Turbinate Surgery”).

A blood stained discharge from the nose is quite normal, as are occasional small nose bleeds and clots. You may wish to wear a “nasal Increasing pain in the nose at about day 7 to 10, usually with a low grade temperature and discoloured nasal discharge, is a sign of

bolster” for a while and the nurses will give you some of these when you go home.

There is a variable degree of swelling and bruising after a Rhinoplasty. In some patients it can be severe with marked bruising and swelling around the eyes. Mr Beaumont will give you some intravenous steroids and antibiotics during the operation to minimise this but a degree of swelling is inevitable and it can become worse after discharge from hospital. All you can do is keep your head elevated and patiently wait for the swelling to go down.

5. Diet

You should avoid very hot food/drinks in the first few days as local heat near the nose causes blood vessels to dilate and occasionally bleed. The same applies to very hot showers or baths.

If your nose is blocked you must drink plenty of fluids to avoid getting dry, especially at night. You will sleep better overall if you drink well before you go to bed and get up in the night to go to the toilet (and drink some more!) than if you try and make it through the night 'dry'. Avoid alcohol as it not only causes dehydration but also causes the nasal lining to swell more!

6. Pain Relief and Postoperative Medication

Immediately after the operation you will be pain free from the Local Anaesthetic used during the procedure but as this wears off your nose will feel uncomfortable and swollen. Some people also get headaches. This discomfort should respond well to Co-Codamol (or similar combination pain killers) and you should take these regularly during the day for pain.

You may be given some oral antibiotics when you go home to take for one week after the operation to help prevent infection. You may also be advised to use a gentle salt water nasal spray (Sterimar) to irrigate your nose and clear clots after the operation.

7. Oral Hygiene

Continue your usual, regular oral hygiene i.e. brushing teeth.

infection and usually requires oral antibiotics from your General Practitioner (if you are not already on some). Rarely-but importantly-this may result in bleeding.

You should sit forward over a bowl or sink and pinch both your nostrils closed (just under the end of your external plaster) for a full (timed) ten minutes to control any bleeding and then release and check to see if the bleeding has stopped. Repeat if bleeding continues. If steady bleeding persists after 20 minutes, you should immediately go to the Accident and Emergency Department at the Hospital for treatment and possible readmission.

9. External nasal splint

A Plaster Splint will be applied during the operation to support the bony structure of the nose and help prevent swelling. You will need to keep this dry or it will soften and come loose. If the tape securing it to the surrounding skin comes loose you will need to apply some more yourself or come to the hospital so one of the nurses can help you. The Plaster Splint is usually removed at the first postoperative appointment.

10. Discharge Home

Most patients can go home the following day around lunchtime or early afternoon.

11. Follow up

You will be given a one week follow up appointment on discharge from the Hospital.

If you have any other problems or questions in the week after the operation the please phone the Hospital **(725241)** and speak to a nurse from the ward you were on or the **Specialist Group (238565)**

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