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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

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## Septoplasty (page 1 of 2)

### Why do I need this operation?

Your symptoms are due to a structural problem with the nasal septum.

This is a piece of bone and cartilage, which divides the inside of the nose in half. Your nasal septum is kinked so that it blocks the free passage of air through one or both sides of your nose. There are no medical alternatives to this procedure.

### What happens during the operation?

Whilst you are asleep, under general anaesthetic, a cut is made in the nasal lining just inside your nostril. This will not leave a scar on your face.

Next the lining of the nose on either side of the septum is raised so that we can see the bone and cartilage. The septum is realigned, if necessary, by removing the obstructing tissue. The lining is then replaced and may be stitched together. These stitches are absorbable and do not have to be removed.

Packs may be placed in your nose and will be removed 24 hours later.

Sometimes it is necessary to put plastic splints in the nose to prevent adhesions (scars) forming. These are removed after about 5 days.

### How will I feel afterwards?

You will feel drowsy until the anaesthetic wears off. You will have to breathe through your mouth if you have a dressing in your nose which will give you a dry throat. You may have a headache for a few hours.

Sometimes the upper central teeth feel numb after the operation but this gets better within 4 to 6 weeks.

When the packs are removed there is often some bleeding but it stops within a few minutes. Rarely the nose needs re-packing to stop it.

Your symptoms will not disappear overnight: initially the nasal lining will be swollen so your nose will feel stuffy for up to one month after the operation.

The nasal bones are not affected by the operation and we do not intend to change the outside shape of your nose.

### What are the possible complications?

Bleeding – may occur and is usually mild. If more severe, re-admission to hospital for further treatment may be necessary.

Infection – this is uncommon, but when it occurs you will notice a

**Day Surgery Unit**  
**01722 336262 ext 4550**

persistent smelly nasal discharge, pain and sometimes fever. If you are concerned you should see your GP.

Haematoma – this is a collection of blood beneath the nasal lining and is also uncommon.

You will feel increased nasal blockage and pain in the first 1-2 days after the operation. This may require re-admission to hospital to drain the blood clot.

Adhesions inside the nose – these are bands of scar tissue from the nasal lining which form across the inside of the nose. Most of the adhesions are small and produce no symptoms. If they are large and cause a blockage they can be cut under a local anaesthetic by the surgeon.

Septal perforation – sometimes a hole forms in the septum where we have operated; in most patients it causes no problems. Sometimes crusts (scabs) form around the hole causing nasal blockage or minor nosebleeds. If it is problematic you may be offered an operation

Saddle nose – this term describes the shape of a deformity that can occur months or years after the operation. It happens if there is insufficient support for the bridge of the nose or if you have a postoperative infection or a direct injury to the nose particularly in the few weeks after the operation. This is an uncommon complication and if it causes you a problem it may require reconstructive surgery.

## How long will I be in hospital?

This is usually for one night after your operation. Your operation may be done as a day case, your surgeon will discuss this with you.

## When can I go back to work

We advise taking 2 weeks off work following surgery, during this time you should rest and avoid strenuous activities.

## Further advice

If you need further advice please contact:

Day Surgery Unit 01722 336262 ext 4550 between 7.30am and 7pm.

ENT Outpatients 01722 336262 ext 4325

After 7pm contact Downton Ward 01722 336262 ext 2182, your GP or the NHS 111 service.