Cautery/submucosal diathermy to the inferior turbinates

What is a cauter/submucosal diathermy to the inferior turbinates?
The turbinates are soft pieces of tissue within the nose whose function is to increase the surface area of the nasal cavity, and to warm and moisten air passing through the nose. Enlargement of the turbinates leads to obstruction of the nose. Cautery or submucosal diathermy to the inferior turbinates aims to shrink these soft tissue linings of the nose.

What are the benefits of having a cauter/submucosal diathermy to the inferior turbinates?
The benefit of this operation is that your breathing through the nose should feel easier.

What are the risks, consequences and alternatives of having a cauter/submucosal diathermy to the inferior turbinates?
Most of these procedures are straightforward.

- There is a small risk of bleeding which may require further treatment.
- Sometimes internal adhesions between the walls of the internal nose may develop, which may require further surgery.

If you are concerned about any of these risks, or have any further queries, please speak to your consultant.

Your consultant has recommended this procedure as being the best option.

However, the alternative to this procedure is the use of steroid nasal sprays. If you would like more information about this, please speak to your consultant or one of the nurses caring for you.

There is also the option of not receiving any treatment at all. The consequence of not receiving any treatment is that your symptoms will persist.

If you would like more information please speak to your consultant or one of the nurses caring for you.
Getting ready for the operation
You will be called to a pre-admission clinic to see the specialist nurse who will carry out investigations such as blood tests etc, and explain the operation to you. She will also ask you about your general health, the medicines you take at the moment and any allergies you may have. Please feel free to ask questions and raise any concerns you may have regarding your operation.

If you have been prescribed a nasal spray please continue using it whilst waiting for your operation, unless advised otherwise by the doctor.

For a time before certain types of anaesthetic you will need to stop eating, drinking and chewing gum. This will be explained to you and you may also be given a booklet about this.

You will be asked to shower or bathe before your operation.

Smoking cessation
Smoking greatly increases the risk of complications during and after surgery. The sooner you stop the better. Even a few days before your operation can help to improve healing and recovery afterwards. For help and advice contact your GP.

On admission
When you arrive on the ward you will be introduced to the staff and shown to your bed. Your details (name, date of birth etc) will be checked on a number of occasions before the operation. This is normal practice and is for your safety. You will be given an operation gown and a wristband to wear.

You will have the opportunity to discuss the surgery with the staff.

It is important that you understand your operation details as you will be asked to sign a consent form to this effect.

A small needle or cannula will be inserted into the back of your hand. The operation will be performed through your nose, which means there is no external incision (cut).

What sort of anaesthetic will I have?
Your operation will be performed under a general anaesthetic, which means you will be asleep throughout. The anaesthetist will visit you before your operation and discuss the anaesthetic with you.

What should I expect after the procedure?
There is a possibility of swallowing some blood during the operation, which may result in you being sick during the recovery period.

There is a small possibility of you having some packing inside the nose, which may result in you having to breathe through the mouth.

When you return to the ward you may still be sleepy. Your blood pressure and pulse will be monitored at regular intervals until you are fully recovered. A drink of water will be offered to you 1 - 2 hours after you have returned to the ward.
Pain relief
If you experience pain it is important to tell the nurses who can give you painkillers to help.

Going home
Usually you will be able to go home on the same day of your operation. This depends on your general health and your surgeon’s instructions. Staff will be able to answer any questions you may have before your discharge.

DISCHARGE INFORMATION AND AT HOME ADVICE
Your nose will feel blocked and congested after the operation, which may last for 2 weeks. Advice on steam inhalations to help ease this will be given by the ward staff.

Occasionally, there may be a blood stained discharge from your nose but this will ease in 2 weeks.

Avoid blowing your nose for the first 2 - 3 days following surgery, then only very gently, one side at a time.

If you experience any pain, take the painkiller you would normally have for a headache. Do not exceed the stated dose.

If you smoke, we strongly advise you to stop as this irritates the lining of the nose and the nasal sinuses. Also, avoid alcohol for 3 - 4 days after the operation as this can also contribute to bleeding.

Driving information
Do not drive until you can wear a seat belt comfortably and feel able to perform an emergency stop. Your insurance company may refuse to meet a claim if they feel you have driven too soon. It is also advisable to contact your insurance company with regards to cover following a general anaesthetic.

Resuming normal activities
We advise you to take a minimum of 1 week off work depending upon your employment.

During this time you should avoid smoky areas e.g. public houses and/or crowded places where you are likely to come into contact with coughs, colds and infections.

An appointment will be made for you approximately 6 weeks. If you are not given a date before you leave hospital one will be posted to you.

If you have any problems contact your GP.

Important information for day case patients
You must not drive or go home by public transport. Therefore, you must make arrangements for someone to collect you. It is not appropriate to go home unaccompanied in a taxi. Please note hospital transport and ambulances are not normally available for day patients.

The anaesthetic drugs remain in your body for 24 hours and during this time are gradually excreted from the body. You are under the influence of drugs during this time and therefore there are certain things that you should and should not do.
For 24 hours you should:

- Ensure that a responsible adult stays at home with you for 24 hours.
- Rest quietly at home for the rest of the day - go to bed or lie on the settee.
- Drink plenty of fluids, but not too much tea or coffee.
- Eat a light diet eg. soup or sandwiches. Avoid greasy or heavy food as this may cause you to feel sick.
- Lie flat if you feel faint or dizzy.
- Contact your GP if you have not passed urine 12 hours after your operation.
- Have a lie in the next day. It could take 2 - 3 days before the weariness wears off and you could suffer lapses in concentration for up to a week.

For at least 24 hours after your operation you must not:

- Drive. Your insurance company may refuse to meet a claim if they feel you have driven too soon. It is also advisable to contact your insurance company with regards to cover following a general anaesthetic.
- Lock yourself in the bathroom or toilet or make yourself inaccessible to the person looking after you.
- Operate any domestic appliances or machinery.
- Drink alcohol.
- Make any important decisions or sign any important documents.
- Be responsible for looking after small children.
- Watch too much television, read too much or use a computer as this can cause blurred vision.

Useful website
www.entuk.org

We hope your recovery is speedy and uneventful.

If you have any queries please telephone
Head and Neck Outpatients on 01332 787472,
Monday to Friday, 9.00am - 5.00pm.

After 5.00pm and at weekends contact Ward 307 on 01332 787307.