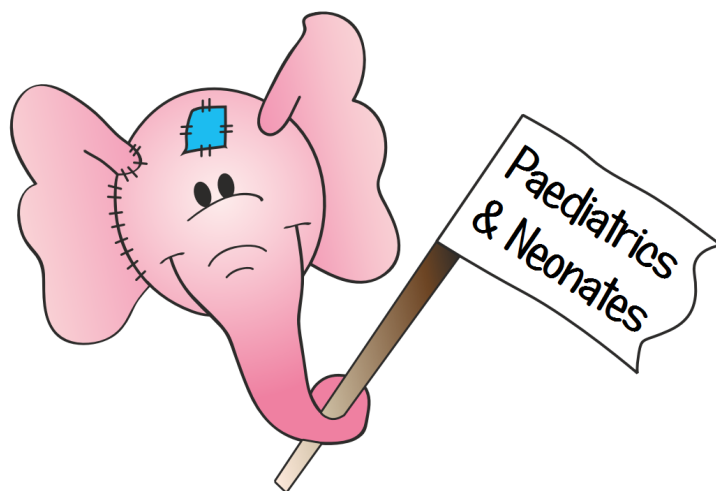


Operation to straighten the septum

Children's Ward

Parent/Carer Information Leaflet



Introduction

Your child's consultant has suggested that your child has an operation to straighten the septum in their nose. This leaflet explains more about the operation, the benefits and risks, and what to expect when your child comes to hospital. The medical name of the operation is a septoplasty.

If you have any questions or concerns, please contact a member of the Children's Ward.

Why does my child need the operation?

The septum in the nose is the structure that separates the right and left nostrils in the nose. It is made up of cartilage (which is a firm but bendy material like rubber) at the front and bone further back. It is covered in mucosa, like the inner lining of your cheek.

The septum is important in maintaining the shape of your nose. It can be bent or buckled inside the nose even though the nose itself may look straight to an observer. It may have always been bent or may have been damaged by the nose being knocked at some stage. This can cause blockage of one or both nostrils and inflammation within the nose. This can cause mucus and a dripping nose.

The operation aims to straighten the septum in your child's nose.

What are the benefits of the operation?

The benefits are:

- Your child will have a straight nose.
- After your child has recovered from the operation, they should no longer have symptoms caused by a bent septum, such as a blocked nose.

What are the risks?

As with any operation, there are some risks:

- Bleeding may occur in the nose after the operation.
- Your child may get an infection in their nose after the operation. This is rare but can be serious. If their nose is very painful and becomes more and more blocked, you should contact your child's GP for advice. Your child may need to have antibiotics.
- There are some rare risks of general anaesthetics which you can discuss with your child's anaesthetist in more detail before the operation. After the anaesthetic, some people feel sick or are sick. Your child may have a headache, sore throat or feel dizzy or lightheaded but these effects should only be temporary.

What is the alternative to this surgery?

A bent septum can only be fixed by surgery. If your child is not experiencing any problems from this, they do not need to have the operation. Swelling in the nose, which might be making your child's nose feel blocked, can be treated by nose spray or drops. These will usually have been tried before surgery is suggested.

What does the operation involve?

The operation is carried out through your child's nose and there will not be any external cuts. A general anaesthetic is used for the procedure which means that your child will be asleep.

What happens before the operation?

We will give you instructions about when your child needs to stop eating and drinking before the operation, with your appointment letter.

What happens when we come for the operation?

You will have an appointment for the morning or the afternoon.

When you arrive at the Children's Ward, a nurse will ask you some questions and assess your child's:

- blood pressure
- heart rate
- breathing rate

If you have any questions or worries, please ask the nurse who is looking after your child. They are always happy to answer your questions.

The nurse will put a wrist band on each of your child's wrists and put a numbing cream on the back of their hands. This is used so that when the anaesthetist puts a cannula into their hand to give the anaesthetic, they will not feel this being put in. A cannula is a thin, plastic tube.

The surgeon will come and see you to explain the operation. If you want your child to have the operation, the nurse will ask you to sign a consent form, if you have not already signed one at a previous appointment.

The anaesthetist will come and see your child to check that they are well enough to have the operation.

The nurse will be able to give you a rough idea of the time your child will have the operation. We try to minimise delays as much as possible but sometimes these occur.

When it is time for your child's operation, one parent can go with them to the anaesthetic room and stay until they are asleep. The operation will last about an hour, depending on the type of surgery.

On waking, a nurse will bring your child back to you on the ward, when the recovery team are happy with them.

During the recovery period on the ward, the nursing team will assess your child and offer them something to eat and drink, when it is safe to do so.

Your child may still have a cannula in when they come back to the ward. We recommend that this is kept in until your child goes home. This can be used to give your child medicine, if they need it. For example, some people feel sick or are sick after having a general anaesthetic. If your child feels sick, please tell the nurse and we can give them some anti-sickness medicine.

After the operation, your child may have a nasal pack in their nose or a splint(s) supporting their nose. The nasal pack will be taken out before they go home. However, the splint(s) may need to stay in place for five to seven days.

Will my child be in pain?

It is usual for your child to be uncomfortable for a few days after this operation. We will give them pain relief while they are having their operation and they can have regular pain relief when they are back on the ward.

We recommend that you give them a simple painkiller such as paracetamol, if your child is able to tolerate it (always read the label; do not exceed the recommended dose). Brand names of this include Calpol, Disprol and Medinol. Please ask for advice from your pharmacist, if you need it.

When can my child go home?

Your child may need to stay in hospital for a day or two, depending on the consultant's advice. One parent is welcome to stay overnight with their child. Before they can go home, your child will need to have:

- Eaten an adequate amount of food and drink
- Passed urine
- Stopped being sick
- A normal temperature
- The doctor's approval to go home

and be having no problems with breathing.

We recommend that your child does not travel home on public transport due to the risk of infection.

How do I care for my child after their operation?

Your child may:

- Have blood-stained mucus from their nose for up to three weeks. This is part of the healing process but if it becomes heavy or starts to smell strange, contact the Children's Ward on 01384 244271 for advice.
- Have a nasal splint or splints to support their nose. These may need to stay in place for five to seven days. Your nurse will give you specific instructions about this.
- Have a blocked nose after the operation. This should be nothing to worry about and will clear in about two to three weeks. However, if it gets much worse and your child is in pain, please contact the Children's Ward for advice.

Your child should:

- Not blow their nose for a week after the operation and wipe their nose gently.
- Not lift heavy objects for at least one week.
- Avoid people with coughs and colds due to the risk of getting one – sneezing and blowing their nose will not help the healing process.
- Avoid smoky atmospheres as smoke can irritate the lining of your child's nose and may cause bleeding.
- Keep their head upright when bending down.

When can my child go back to school?

Your child will need to have a week off school.

What about other activities?

Your child will need to avoid contact sports and boisterous activities for four to six weeks after the operation.

What do I do if my child becomes unwell?

If your child:

- has a high temperature
- is being sick
- is generally unwell

please contact either your GP or the Children's Ward for advice. This could mean that your child has an infection.

Follow up

If your child needs to see their consultant again, we will give you an outpatient appointment. If they have nasal splints, we will give you an appointment to have them removed.

If you have any questions or if there is anything you do not understand about this leaflet, please contact:

Children's Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dudleygroup.nhs.uk/services-and-wards/c2-childrens-ward/>

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta brosură poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

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