

After sinus surgery it is important to keep your sinus cavities clean. Debris that develops in your nose (dried blood and mucus) must be removed to promote healing and prevent formation of scar tissue which can block the sinus openings. This blockage may result in persistent or recurrent sinus infection. The most efficient way to keep this debris to a minimum is by sinus irrigation. Your long-term outcome will be dependent on how well you keep your sinus cavities clean.

Mild bleeding and oozing from your nose is part of the normal healing process for the first few days after sinus surgery. The sinus openings and mucosal membranes are somewhat raw. You should review the accompanying epistaxis (nosebleed) information sheet to optimize healing and prevent excessive bleeding. If bleeding accelerates and does not respond to the conservative measures outlined on the sheet, then notify your physician. During the first week after surgery, keep your nasal passages moist by using Ocean nasal spray several times daily.

Starting one week after surgery, saline irrigation should begin. Any of the following are acceptable: infant (blue bulb) ear syringe with saline solution, sinus irrigating kits, or Water Pic dental irrigation device with sinus irrigating attachment. The most important point is frequent irrigations (2-3 times per day) until all sinus openings have healed.

If you choose to mix your own saline, one teaspoon salt and one teaspoon baking soda should be mixed with one quart of water. Pour 1/4 to 1/2 cup mixture into a clean bowl or jar. Irrigate from this source, but do not put the used syringe back into your saline jar or bowl as this will contaminate your solution. For comfort, water temperature should approximate that of body temperature. You should discard any remaining solution after one week and start with new mixture.

Technique: Stand over a sink with your head bent forward. While irrigating, fluid will return through both nostrils and down the back of your throat. Let the water come back out of your nose and mouth. Try not to swallow the fluid. Alternate between sides while irrigating. When finished, lean forward to allow the fluid to drain out your nose. Do not be alarmed if some of the fluid does not come out until later.

If you were using a topical steroid spray such as Flonase, Veramyst, Nasacort, Rhinocort or Nasonex prior to surgery, then you should generally restart your spray one week after surgery. After completing your morning irrigation, apply two sprays topical steroid to each nasal cavity.

Please schedule an appointment to see your doctor one week after surgery.