



Advice following nasal surgery (septorhinoplasty)

This leaflet is for patients who have had nasal surgery. If you have any questions or concerns, please speak to a member of staff.

What is septorhinoplasty?

This is an operation that aims to improve nasal breathing but also changes the appearance often in the context of previous nasal trauma. You are likely to get bruising and swelling around your face following this surgery.

Surgery is sometimes done only from the inside of your nose, although you may also have small external wound or skin incisions if an external approach is used.

Risks and complications

Your surgeon will have already discussed both the benefits and risks of the operation prior to you signing the consent form. You may be asked to consent electronically. The main risks include pain, swelling and bruising, nosebleeds, septal perforation, temporary difficulty breathing through the nose, altered sense of smell, change in the shape of the nose and infection. The tip of the nose may be stiff and numb after surgery – this can last several months.

After surgery

- **Nasal pack:** After surgery your nose may be packed with a dressing. This means you will not be able to breathe through your nose. It will leave you with a dry mouth. The packs used are usually dissolvable and will dissolve after a few days. However we may need to use non-dissolvable pack. This will stay in overnight and will be removed the following morning.

A rigid splint will usually secured externally on your nose to help with skin swelling. On occasion softer splints may also be sutured inside your nose and these will be removed between 1-2 weeks post-surgery.

Expect a small amount of bleeding which usually stops after a couple of minutes. Sometimes, the nose has to be repacked, but this is rare.

- **Swollen nose:** You will find that your nose will feel quite swollen and your symptoms may be worse than when you came in. This is normal. It takes two or three weeks for the swelling to go down and for you to notice an improvement.
- **Blocked nose/nasal discharge:** You will find that your nose will feel blocked for several weeks, and there will be some blood-stained discharge and congestion from your nose for 2-4 weeks. This is quite normal. You will not feel the full benefit of your treatment until about 2 months after the surgery.
- **Bruising and swelling of eye area:** You may have swelling and bruising around your eyes. This will subside after several days. However, if your eyes become very painful and the swelling increases, please contact your GP or the ward for advice.

- **Pain:** Your nose may feel tender and you may suffer a headache. This is normal as your nose will be congested for the next 2-3 weeks until the internal swelling has settled down. If you are not given painkillers to take home, Paracetamol or Co-codamol may be taken for discomfort as prescribed. Please seek advice from your pharmacist.

Things to look out for

- A persistent excessive and smelly discharge from your nose;
- You feel feverish and unwell;
- You find that your nose becomes increasingly painful and your current painkillers don't relieve the pain.

If you experience any of the above, we advise you to contact the ENT Outpatients department (during office hours) or the ward (out of hours) for advice, as you may have an infection and may need antibiotics. If infection is not treated, your nose may start to bleed. The ward may put you in touch with the on-call doctor. Telephone numbers are at the end of this leaflet.

Reducing risk of bleeding

- For the first week following surgery, you are advised not to blow your nose or pick off any crusts as this may interfere with the healing process in your nose and may start your nose bleeding. If you need to wipe your nose, use a tissue rather than a cotton handkerchief as this reduces the risk of infection.
- Please try to avoid very hot baths and we suggest you drink warm instead of hot drinks for the first 48 hours after surgery. Drinking hot fluids will dilate the blood vessels in your nose and increase the risk of bleeding.
- Avoid alcohol for two weeks after the surgery.
- Avoid taking aspirin as it can affect your blood clotting and can increase the risk of bleeding.
- Try to avoid sniffing or sneezing for two weeks after surgery. If you do sneeze, try and sneeze with your mouth open to help lessen the pressure forced through your nose.
- You need to take care not to knock or bang your nose. Contact sports or any strenuous activity should be avoided until your nose has healed completely (for at least 6 weeks).

What to do if you have a nosebleed

- If your nose starts to bleed, do not panic. Try to rest in a sitting position with your chin slightly down.
- Use a cloth or tissue to apply firm pressure to the fleshy part of your nose and use a clock to time yourself. Continue to apply pressure for 10 minutes.
- Suck an ice cube and apply an ice pack or a packet of frozen peas to the bridge of your nose or your forehead/back of neck.
- Spit out the blood and try not to swallow, as it will make you sick.
- If you are unable to stop the bleeding after 30 minutes, go to the Emergency Department (A&E).

Stitches

You will have some stitches inside your nose. These will dissolve within a few days. Sometimes there will be stitches at the base of our nose. Depending on the type of suture used these may

need to be removed around 7 days following surgery – this is usually be done in the ENT Outpatient Department.

Returning to work

You will need approximately two weeks off work. If you need a sick certificate for your employer please ask your doctor or your nurse before you leave hospital.

Follow up

If you have an external dressing or splint on your nose you will be asked to attend the Ear, Nose and Throat (ENT) Outpatient clinic after around one week to have this removed. You may be given an outpatient appointment before you leave hospital or this may be posted to you. If you cannot keep this appointment, please telephone the Clinical Admin Team (CAT1) to arrange another one.

We wish you a speedy recovery and hope this leaflet has been useful.

To help your recovery, please follow this advice:

- Reducing risk of infection
- Avoid any smoky/dusty atmospheres for two weeks as this will irritate the inside of your nose.
- Avoid people with colds or chest infections for two weeks until your nose heals, as you will be at risk of catching an infection from others.
- For the next two weeks try to sleep with your head on two or three pillows when you return home. This will prevent your nose from swelling and improve the drainage.
- Your nose may feel blocked for several weeks. This may be caused by some crusting or clots inside your nose. Clearing this is important to help prevent infection and will aid your recovery. This is done by nasal douching with slightly salted warm water (you will be given written and verbal instruction on nasal douching by nursing staff). Alternatively, you can use Sterimar spray or Neilmed Sinurinse, which you can buy from any chemist. Follow the instructions provided. It is best to use this about three times a day to help remove the clots and debris that builds up in the nose after this surgery. Continue this cleansing until the crusts and debris cease to come away with this process.

Contacting us

Dorrell Ward: 0118 322 7172 or 0118 322 8101

ENT Outpatient Department (Townlands) reception: 01865 903274

Clinical Admin Team (CAT 1) Townlands: 01865 903261

Clinical Admin Team (CAT 1) Royal Berkshire Hospital: 0118 322 7139

or email rbb-tr.cat1@nhs.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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Next review due: August, 2028.