



SEPTOPLASTY WITHOUT NASAL PACKING POST OPERATIVELY

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ABSTRACT

Objective: Objective of this study was to observe any complications which occurred in patients which underwent Septoplasty with postoperatively no nasal packing and also to know degree of pain in patients in which nasal packing was done.

Methodology and Method: This present research was carried out in King Abdul Aziz medical city Jeddah which involved 400 participants for the period between January 2015 and December 2017. The patients under research underwent Septoplasty without nasal packaging post operatively and was checked for any occurrences of complications. Prospective and comparatively study method was used in our research, patients were selected randomly.

For pain patients were assessed on 0 to 10 scale. After Septoplasty quilting suture was applied to septum in all patients.

Result: Out of 400 patients only 2 patients need post-operative packing. The patients were very much satisfied with results post operatively in terms of nasal breathing and experienced no pain.

Conclusion: Our research established Septoplasty without nasal packaging post operatively could result no complications and with more patient satisfaction in long term.

KEYWORDS: Septoplasty, Nasal Packing, Quilting Suture of Septum, Complications, Postoperative, vestibulitis.



INTRODUCTION

The process of Septoplasty according to Bajaj, Kanatas, Carr, Sethi and Kelly (2009) can be performed routinely to patients bearing symptoms of deviated nasal septum and related complications. This in most cases involve postoperative procedures of nasal packing which in turn presents discomfort and pain during and after nasal packs have been removed successfully. The main intention of performing nasal packing to patients is either preventing septal hematoma or postoperative hemorrhage but may differ from one operation to another. In addition, this procedure most of times tend to stabilize the remains of cartilaginous septum while minimizing recurrence or persistence of individual's septal deviation although some of the studies which have been done in the past did not present sizeable sample for supporting these kind of results and findings.

Anterior nasal packing is associated with disadvantages after the procedure including nasal breathing, nasal pain, vestibulitis, and dryness of mouth, synechiae, nasal valve narrowing, ear blocking, crusting, headache, and irritation of throat, hypoxemia, watering from eyes, hypoxia and difficulty in swallowing among other secondary infections. Moreover, it increases the period of stay in hospitals. In addition to these, severe pain is experienced by the patient Nevertheless, during patient's pack removal individual patients' experiences severe pains. Although the patient's discomfort may be short lived, the painful experience remains in the patients' mind throughout and may take time to forget about it. Therefore, researchers on these processes have pointed out that in order to prevent complications to patients, nasal packs ought to be avoided by the adaptation to quilting stitches (Awan and Iqbal, 2008).

METHODOLOGY OF THE STUDY

In our current research, a prospective and comparative research study involving 400 patients of deflected Nasal Septum which underwent Septoplasty in King Abdul Aziz Medical city Jeddah, for the period from January 2015 to December 2017 was done. The 400 patients in study were grownups of both the gender bearing symptomatic deflected nasal septum from across the city. we utilized exclusion criteria by identification of patients according to their situation; postoperatively with no nasal packing, with and without complications like septal hematoma, septal perforation and anosmia, patients who required temporary packing and also the application of quilting suture to nasal septum to all patients. In addition, for a successful and up to date research study, individuals with historical background of septal or nasal turbinate surgeries at previous time were considered (Naghizadeh, Peyvandi, Asghar and Naghizadeh, 2011).

The researcher selected patients randomly for either nasal packing and quilting suture of septum and grouped them into two separate groups. However, per operative to be on the safe hand patient's nasal cavities were packed by use of xylocaine ribbon gauze and also the nose preparation was done using topical decongestion spray together with lignocaine bearing proper infiltration. Due to the big number of patients the period had to be long enough so as to allow good attendance to individual or specific cases according to the surgeon's advice and preferences. King Abdul Aziz Medical city Jeddah hospital based surgeons carried out the operations within the stipulated duration between 2015 and 2017 respectively. For the cases of postoperative analysis, patients were given a 2-week interval up to 12 weeks whereby surgeons recommended the application of topical nasal decongesting. All patients were without nasal packing and septal quilting suture was applied at end of operation. Moreover, as per surgeons



advise on antihistamine and oral antibiotic usage for 10 days as well as nasal saline irrigation, and ointment of antibiotics for a period of 2 weeks postoperatively (Mohammad, 2008).

RESULTS

For the total number of 400 patients under the current study, no nasal packing was done postoperatively but only quilting suture was applied to nasal septum resulting to no complications with regard to septal haematoma, anosmia and septal perforation. Overall, only 2 cases needed temporary packing which was done in the recovery area later on and the packed removed after half an hour successfully. Patient indicated feeling well and good with minimal pain. More so the patients' breathing was better off compared to the situation before the procedure. All together, the period under study specifically the period of recovery was better according to patients and this reduced the stay period in the hospital than in patient where nasal packing was used post septoplasty. There were no major complications reported by patients to the end of research period. From the study patients who performed septoplasty without packing, expressed minimal with only two patients going for nasal packaging postoperatively.

INTERPRETATION

In accordance to the distribution of scores indicated on the scale, the following cut points were recommended.

- 4 represented no pain
- 4- 6 mild pain
- 6-8 moderate pain
- 8-10 severe pain

From the study, it was observed that patients, who attended Septoplasty without packing, expressed minimal reported minimal pain with a score index of between 4-6mm. The results were also supported with only two patients going for nasal packaging postoperatively. With a P value of less than 0.5, and a risk factor of 0 among the patient who were observed after postoperative, it was concluded that patients without packaging recovers much faster with less pain compared to those with packaging.

ANALYSIS

The only 2 cases reported of temporary packing postoperatively could be as a result of wearing off from the special effects of patient's patient local anesthesia infiltration. Nevertheless, our final results indicated significant improvement on the feeling of pain as well as discomfort among individuals specifically during the time of pack removal (Awan and Iqbal, 2008). Unlike in most of surgeries on the same presenting the main complication on all participants being nasal obstruction and sometimes nasal discharge, the current study was different.

DISCUSSION

In our study most of patients were in range of 18 to 51 years. most of patients major complains was nasal obstruction and minor was headache and post nasal discharge. Our research study shows a relationship with research carried by Bajaj, Kanatas, Carr, Sethi and Kelly (2009) whereby they pointed out that Septoplasty anywhere across the globe can be performed safely



without carrying out postoperative nasal packing to patients. Comparison research studies on nasal packing following Septoplasty to 169 cases pointed out the best recommended alternative for nasal packing is quilting suturing of septum. Our study like the demonstration study done on 266 Septoplasty patients bearing septal suturing without packs showed good results having no complains at all and lack of discomfort to patients (Cukurova, Cetin kaya, Mercan, Demirhan and Gumussoy, 2012).

According to Bajaj, Kanatas, Carr, Sethi and Kelly (2009) studies, the procedure of nasal packing immediately after patients undergo Septoplasty tend to exert pressure towards the septal flaps directly. They argue that the pressure is then directed in the nasal septum to the individual blood vessels thus preventing formation of hematoma as well as postoperative bleeding although not in many cases. Significantly, past researches have indicated that successful septal surgeries performed without nasal packing are recommended as safe to patients. Bajaj, Kanatas, Carr, Sethi and Kelly (2009) in their study comprising of 78 individuals who performed Septoplasty without postoperative packing; almost a quarter of them used quilting sutures. It presented 7.7 % of the patients being identified with postoperative hemorrhage and 3.8 % which was half of them requiring undergoing packing so as to manage bleeding (Naghibzadeh, 2011).

In order to reduce significantly the rate of complications to patients after surgery, a number of suturing techniques from surgeons have been provided in order to fairly accurate mucosal flaps subsequent to septal surgery. Nevertheless, the use of interrupted sutures by majority of surgeons through absorbable suture materials have all together worked wonders to many people. The first initial sessions were done in 1984 presenting a continuous suture quilting, whereby 4.0 plain catgut was used with small cutting needle in order to estimate the mucosal flaps (Mohammad and Moghira, 2008). Suturing the septum after Septoplasty has advantage of relieving discomfort. minimal complication and less hospital stay.

A prospectively study comparing nasal packing with septal suturing after Septoplasty in 169 patient concluded suturing is good alternative to nasal packing (Al-ragged, 2007)

CONCLUSION

From the study's findings and results one can conclude that the usage of nasal packing after a septoplasty surgery is greatly understood to calm down the septum left behind, and also prevent occurrence of complications including septal hematoma, bleeding, anosmia, formation of synechiae and septal perforation previously. All in all, quilting sutures of septum as per surgeons' analysis can be regarded as an effective way of curing or reducing any complications which may arise. It also associated with the reduction of hospital stay for patients. However, not all cases should involve nasal packing but should only be considered whenever there is need. s. It is the duty and the responsibility of patients and their health carers to be keen and observe surgeon's prescriptions and advises to the latter.



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