Patient information

Insertion of a Septal Button (Obturator)

Ear, Nose and Throat Directorate

PIF 864 V5
Your Consultant / Doctor has advised that you have insertion of a septal button.

**What is insertion of septal button?**

This is a procedure to put small button shaped plastic disc implant into your septum (the middle partition in your nose separating your nostrils) to close the hole. Biopsies may be taken if deemed necessary for diagnosis to be made as to the cause of the hole in your septum. This procedure can be performed as a day case.

**If you are having a general anaesthetic your letter will advise you when to stop eating and drinking.**

Day case admission requires you to have an escort home, access to a telephone and a responsible adult with you overnight.

**What are the benefits of having insertion of a septal button?**

The procedure is done to reduce noisy breathing; whistling and can also reduce bleeding and improve nasal airflow.

**What are the risks of having insertion of a septal button?**

The risks are occasional bleeding and those associated with anaesthetic.

**Are there any alternative treatments available?**

There is no alternative treatment available with high success rates. There are other operations involving implants i.e. bone, gristle from your ear and more major surgery but with low success rates.

**What will happen if I don’t have any treatment?**

There is a possibility the hole in your septum will become larger.
If you are worried about any of these risks, please speak to your Consultant or a member of their team.

What sort of anaesthetic will be given to me?

Local anaesthetic is an option for this procedure and involves small injections of local anaesthetic or packing with a local anaesthetic solution to numb the area and comfortable insertion of the button.

You may alternatively be given a general anaesthetic: General anaesthesia is drug-induced unconsciousness: an anaesthetist, a doctor with specialist training always provides it.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain. Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

You will be given an opportunity to discuss anaesthetic options and risks with your anaesthetist before your surgery.

If you are worried about any of these risks, please speak to your Consultant or a member of their team.
Getting ready for your operation

- If you require a general anaesthetic you will be seen in the pre-assessment clinic before you are admitted to hospital. Here you may have blood tests, or heart trace if necessary. You will be assessed to see if you are fit for an anaesthetic.

- The nurse practitioner will ask routine questions about your health, the medicine you take at the moment and any allergies you may have.

- You will be able to discuss the operation with a nurse practitioner. You will be asked to sign a consent form to say that you understand the procedure, and what the operation involves.

The day of your operation

- You will come into hospital the day of your operation unless your general health status dictates otherwise in which case you will come in the day before.

- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safekeeping. General Office is open between 8.30 and 4.30 Monday to Friday. Therefore, if you are discharged outside these times we will not be able to return your property until General Office is open. The Trust does not accept responsibility for items not handed in for safekeeping.

- You will be asked to remove jewellery: plain bands will be taped. Please leave body piercing at home. False nails and nail polish will need to be removed if worn.

- If you are on regular medication you will be advised as to whether you should take it.
• You will be asked to take a shower and put on a gown and disposable underwear.

• A bracelet with your personal details will be attached to your wrist

• You may be prescribed some medication to take before your operation by the anaesthetist; a member of the nursing staff will give this to you.

• A porter will take you to the operating theatre.

• Your dentures, glasses and hearing aid can stay with you on your journey to the operating theatre.

• When you arrive in the theatre waiting area, a nurse will check your details with you: you will then be asked to put on a disposable hat.

• You will then be taken to the anaesthetic room.

What should I expect after my operation?

• After your operation you will be transferred back to your bed.

• If you have had a general anaesthetic the anaesthetist will advise the nursing staff of the appropriate recovery time. If you have had a local anaesthetic the nursing staff will inform you of a discharge time.

• A nurse will check your pulse, blood pressure and breathing regularly.

• Please inform the nursing staff if you experience any pain they will then give you some painkillers to help.

• The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people feel sick. It is advised not to drink until this feeling has passed.
The nursing staff may offer an injection to take the sick feeling away.

- Your nose may feel blocked for a few days due to swelling, this should resolve.

- You may experience 'crusting' of secretions around the button, if this happens we recommend: One teaspoon of sodium bicarbonate (baking soda)/sea salt dissolved in one pint of warm previously boiled water. Draw this into a syringe and gently irrigate your nose whilst leaning over the sink.

This procedure should be explained to you before you leave hospital.

Going Home

Your doctor will discharge you on the day of your operation.

- Do not smoke for at least two weeks after your operation, as this will affect the healing process.

Discharge Information

Pain relief and medication

The nursing staff will advise you about painkillers before you leave the hospital. Please inform the nurse of any painkillers you have at home.

Getting back to normal

It is normal to feel more tired than usual for a few days following a general anaesthetic. It is important that you eat and drink normally.

Returning to work

You can self certify for the first seven days of sickness.
Further Appointments

A follow up appointment will be arranged before you go home

Patient Notes:

Further information
If you have any further questions, or require further information, please contact:

ENT Nurse Practitioners
Helene Bryant / Sue Bragan
Tel: 0151 706 2290
Textphone Number: 18001 0151 706 2290
Fax: 0151 706 282 6177
All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.