

Radiofrequency Turbinate Reductions and Turbinate Reductions

Turbinates are swellings that are normal structures just inside each side of our nose along the lateral or outside walls. They are made of small shelves of bone and soft tissue coverings. They act as heat and moisture exchangers for the air we breathe. But, they can enlarge due to several factors including allergies and chronic inflammation. Treatment for this problem starts with applications of topical nasal steroids and searching for the underlying cause. If a non-surgical treatment is not met with great success, then reducing the size of the turbinates is recommended.

The specific technique to employ depends on several factors, including coincidental conditions requiring more extensive surgery, such as a septoplasty and sinus surgery. If the turbinates are the only problem, then an outpatient procedure in the office should be considered first via a submucosal ablation of the soft tissue components (Radiofrequency Submucosal Turbinate Ablation).

The procedure involves anesthetizing the nose with topical and injected agents. Then a double-pronged probe is gently inserted into the soft tissue substance of the turbinates. High frequency electrical current is passed between the probes, shrinking the tissue and resulting in improved nasal airway flow. The effects are not realized until 7-10 days later.

The reasons you should be considering this procedure will be discussed with Dr. Speyer prior to scheduling. All of the possible indications are too many to list here and should be reviewed with Dr. Speyer with regards to your specific needs.

Dr. Speyer will discuss the risks, benefits, and alternatives to this procedure with you in detail. Listed below are some of the disclosed risks of undergoing radiofrequency submucosal turbinate reductions. By reading and signing below, you are stating that you indeed understand the nature of the procedure, the risks as listed, and alternatives to undergoing the procedure.

Risks of radiofrequency turbinate reductions include, but are not limited to, bleeding, infection, nasal synechia (scar bands), failure to improve nasal stuffiness, nasal crusting, and atrophic rhinitis.

You should not undergo radiofrequency surgery if you have a pacemaker since it can malfunction during the procedure.

If you fail radiofrequency surgery of the turbinates, consider repeating the procedure, or undergoing more aggressive reduction techniques such as submucosal resections under general anesthesia.

Turbinate Reductions

Turbinate reduction is an outpatient procedure performed under local or general anesthesia. It involves making a small incision just inside the nose to gain access to the bone and soft tissue of the side wall structures of the nose called turbinates. A normal nose has three pairs of turbinates: inferior, middle, and superior. The inferior and middle turbinates are the most commonly ones needing surgery due to enlargement.

This procedure is commonly performed in conjunction with other intranasal or sinus surgery. By correcting the turbinate deformities, one improves the nasal airway relieving stuffiness and in some people recurring sinus infections in the case of middle turbinate surgery.

The procedure lasts about 15 minutes. Recovery time is generally 3 days at home after which Dr. Speyer will see you to remove any crusting inside the nose. It is after this visit that one notices the greatest improvement with breathing.

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Lastly, since you are undergoing a general anesthetic, this alone carries its own risks regardless of the surgery considered. The risks of general anesthesia include, but are not limited to, the risk of heart attack, stroke, drug reactions, and even death. You should discuss your specific risks assessment with the anesthesiologist during your preoperative anesthetic appointment.