



Corticosteroid-eluting bioabsorbable stent or spacer insertion during endoscopic sinus surgery to treat chronic rhinosinusitis

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What has NICE said?

There is not much good evidence about how well this procedure works, or whether it improves quality of life. But, there are no major safety concerns. It should only be used if extra care is taken to explain the risks and extra steps are put in place to record and review what happens.

What does this mean for me?

Your health professional should fully explain what is involved in having this procedure and discuss the possible benefits and risks with you. In particular, they should explain the

uncertainty about the evidence on how likely it is to improve your symptoms. You should also be told how to find more information about the procedure. You should only be asked if you want this procedure after having this discussion. Your health professional should ask you if details of your procedure can be collected.

The condition

Rhinosinusitis is when the air-filled cavities of the face (the sinuses) become infected and inflamed. It can cause facial pain and tenderness, a blocked or runny nose, fever and headache. Acute rhinosinusitis frequently gets better with little or no treatment, but it can become long lasting (chronic). The symptoms of chronic rhinosinusitis are usually treated with medicines such as painkillers, antibiotics and topical corticosteroids. If these don't work, then surgery may be needed to improve drainage from the sinuses.

NICE has looked at using <u>corticosteroid-eluting bioabsorbable stent or spacer insertion</u> <u>during endoscopic sinus surgery</u> as another treatment option.

NHS Choices may be a good place to find out more.

The procedure

In this procedure, a stent (short tube) is inserted through the nose using an endoscope (a thin tube with a camera on the end) and placed in the drainage system of a sinus. The stent holds the drainage system open, and slowly releases corticosteroid medication into the sinus. The aim is to reduce inflammation. The stent dissolves over time. The procedure is usually done using a general anaesthetic during sinus surgery.

Benefits and risks

When NICE looked at the evidence, it decided that there is not much good evidence about how well this procedure works or about its effect on quality of life. The 7 studies that NICE looked at involved a total of 290 patients.

Generally, they showed the following benefits:

improved symptoms that lasted up to 6 months in 1 study

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less inflammation and other signs of the condition.

The studies showed that the risks of corticosteroid-eluting bioabsorbable stent or spacer insertion during endoscopic sinus surgery included:

- crusting and scarring in the nose in 1 patient, nasal infection in another patient, and infection of the eyelid and skin around the eye in a third patient, all of which got better with treatment
- headache, pressure and irritation in 1 patient, which got better when the stent was removed.

NICE was also told about another possible risk: the stent falling out.

If you want to know more about the studies, see the guidance.

Ask your health professional to explain anything you don't understand.

Questions to ask your health professional

- What does the procedure involve?
- What are the benefits I might get?
- How good are my chances of getting those benefits? Could having the procedure make me feel worse?
- Are there alternative procedures?
- What are the risks of the procedure?
- Are the risks minor or serious? How likely are they to happen?
- What care will I need after the procedure?
- What happens if something goes wrong?
- What may happen if I don't have the procedure?

About this information

NICE <u>interventional procedures guidance</u> advises the NHS on the safety of a procedure and how well it works.

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Accreditation

