



Radiofrequency tissue reduction for turbinate hypertrophy

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What has NICE said?

Radiofrequency tissue reduction for turbinate hypertrophy is safe enough and works well enough for use in the NHS.

Health professionals should tell patients that there is uncertainty about how well it works in the long term. They should also tell them that they may need further treatment if their symptoms come back.

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 alternative treatment options. They should tell you that we're not sure how well the procedure works in the long term and that you might need further treatment if your symptoms come back. You should also be told how to find more information about the procedure. All of this should happen before you decide whether you want to have this procedure or not.

The condition

The turbinates are ridges of bone behind the nose, covered by a tissue membrane. When the membrane is inflamed and swollen, the turbinates become bigger and can block the nasal passages. This is called turbinate hypertrophy.

Some people with turbinate hypertrophy have long-term symptoms that range from mild congestion to a completely blocked nose. They may have a very runny nose. Their sleep can be affected and they may get headaches or have facial pain or discomfort.

Decongestants, nasal sprays or corticosteroid injections can be used to treat the problem. If these don't work surgery may be an option.

NICE has looked at using radiofrequency tissue reduction as a treatment option. Click on to the next page to find out more.

The procedure

The aim of radiofrequency tissue reduction is to reduce the size of the turbinates. It is usually done as an outpatient procedure using a local anaesthetic. A probe is placed through the nostril into the nasal cavity and moved into the tissue membrane of the turbinate. Radiofrequency energy is used to close blood vessels that can cause swelling and to destroy excess tissue.

Benefits and risks

When NICE looked at the evidence, it decided that there is adequate evidence to show that this procedure works well and is safe. The 10 studies that NICE looked at involved a total of 854 patients.

Generally, they showed the following benefits:

- symptom improvement lasting for at least 2 years including relief of blocked nose, sneezing, runny nose and snoring
- improvements in the nasal airway.

The studies showed that the risks included:

- crusting in the nose
- · swelling in the nose.

If you want to know more about the studies see the <u>guidance</u>. 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

