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# Improving day-case rates, haemostatic agents and local anaesthetic techniques in functional endoscopic sinus surgery

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## Editorial

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There is a drive to increase day-case surgery rates, thereby reducing surgical waiting lists and hospital admissions, and improving service efficiency and patient satisfaction.[1] The article by Edafe *et al.* in this month's issue of *The Journal of Laryngology & Otology* is therefore timely.[2] The authors sought to determine the same-day discharge rate for functional endoscopic sinus surgery (FESS) in a tertiary rhinology unit and identify factors that resulted in an overnight in-patient stay. A total of 172 patients were included in this study. The rate of same-day discharge in patients who underwent elective FESS was 80.2 per cent. In their study, bleeding was found to be the commonest reason for an unplanned overnight stay. Other reasons for unplanned admissions included urinary retention, medical co-morbidities, post-operative pain and social factors. The authors conclude that there is scope to further improve FESS day-case rates by utilising techniques to minimise post-operative bleeding, such as additional absorbable packing, haemostatic agents and sphenopalatine artery ligation.

Two studies in this month's issue specifically address the topic of improving haemostasis in FESS. In the first study, Ranford *et al.* systemically review the evidence on the role of hot saline irrigation.[3] The results suggest that hot saline irrigation in FESS for chronic rhinosinusitis may significantly improve the visibility of the surgical field, reducing total blood loss by 20 per cent and decreasing operating time by 9 minutes. However, the authors acknowledge that there are limitations of the study because of the significant heterogeneity of the methods, quality and size of the studies.

The second study, by Yap *et al.*, investigated the use of tranexamic acid in sinonasal surgery, with 13 studies included in a meta-analysis. The authors found that topical or intravenous administration of tranexamic acid in sinus surgery reduces blood loss and duration of surgery, and improves the quality of the surgical field.[4]

Finally, a systematic review by Watts *et al.* explores the growing role of, and provides a supportive guide for, performing FESS under local anaesthetic.[5]

## References

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3 Ranford D, Fu B, Surda P, Rudd J. Hot saline irrigation for haemostasis in functional endoscopic sinus surgery: a systematic review and meta-analysis. *J Laryngol Otol* 2022;**136**:676–82
4 Yap D, Shakir A, Hunt A. Tranexamic acid in sinus and nasal surgery: an up-to-date meta-analysis. *J Laryngol Otol* 2022;**136**:692–702
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