



SOUTHERN UTAH
Ear, Nose and Throat

POSTOPERATIVE INSTRUCTIONS FOR UPPP and/or UVULECTOMY

Background:

Snoring is caused by vibration of floppy excessive tissue in the upper part of the airway. The most frequent cause is vibration of the soft palate and uvula. Snoring may also be due to nasal obstruction with vibration of nasal tissues or narrowing behind the tongue with vibration between the tongue and the back of the throat. UPPP and UVULECTOMY are procedures for the treatment of snoring and may help sleep apnea. Most patients have a sore throat lasting for 10 days to two weeks.

Success Rate with UPPP and/or Uvulectomy:

Snoring is significantly improved in 80 - 85 percent of carefully screened patients undergoing these procedures. In patients with mild sleep apnea who undergo surgical trimming of the soft palate, snoring-related symptoms improve 75 - 85 percent, while apnea may improve in approximately 50 percent of patients. Snoring or apnea may persist to some degree if the patient's specific anatomy demonstrates narrowing of the nasal passages or lower part of the throat behind the tongue.

Potential Complications:

1. Bleeding is rare. If bleeding occurs, it may require cauterization in the office or Emergency Department.
2. Infection is rare.
3. A dry, tight lump or excess mucous sensation in the throat may occur. This sensation is usually temporary, and rarely persists.
4. Temporary swallowing difficulty may be experienced after the procedure. Liquids could enter your nose while swallowing or go down your throat too quickly and make you cough. Some patients may notice more difficulty with drinking from a water fountain or drinking carbonated beverages such as soda.
5. Temporary voice alteration may also be seen after the procedure. Sometimes the remaining palate may take several weeks to effectively close off the nose as it should. You could have a more nasal-like quality to your voice for several weeks (or have difficulty playing a wind or brass instrument or blowing up a balloon). This is temporary and will resolve in a few weeks. Rarely do these complications persist permanently.

What to Expect After Your Treatment:

For Discomfort:

Due to the anesthetic, numbness in the throat will last 1-2 hours. A sore throat can be expected for up to 14 days after the procedure. Patients should not take aspirin, aspirin-containing products or Ibuprofen (Motrin, Advil, Aleve) for seven days before or after the procedure due to blood thinning and increased risk of bleeding. A narcotic pain medication is usually required.

Diet:

For the first two days, you should avoid hot temperature drinks and food as they may worsen swelling. You should drink a lot of cold drinks, and suck on ice cubes or Popsicles since they will help reduce swelling. You may also wish to avoid spicy foods if they cause more pain. Most patients are otherwise able to eat whatever they want.

Activity:

You should rest at home for the first several days. You may resume your regular activities and work gradually when your doctor gives permission. Some patients will note increased soreness if they talk excessively the first several weeks.

Mouth Care:

You may brush your teeth and tongue.

Infections:

As with any surgery, an infection is always a risk. In order to prevent this, as well as to speed healing, your physician may prescribe an antibiotic.

Swelling:

Mild swelling is expected at the treatment site and may feel like a “lump” sensation. If your throat feels swollen, you should sleep with your head elevated on several pillows. A steroid pill may be prescribed to reduce swelling.

Scheduling:

A follow-up appointment is usually scheduled for about 10 days following the operation.