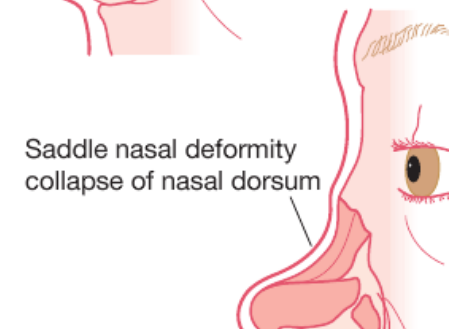
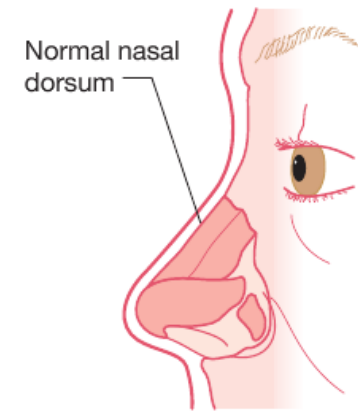
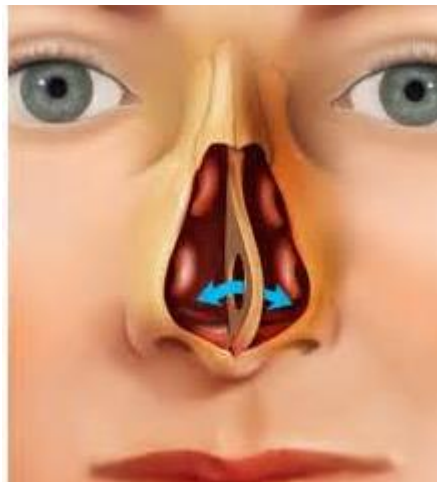
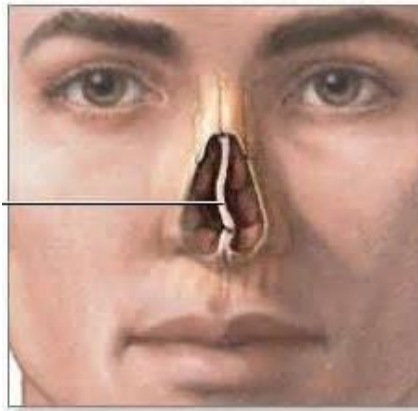
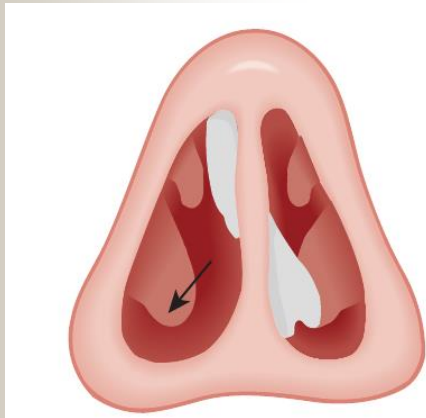




The nasal septum

- The nasal septum is made up of bone and cartilage.
- It can be deviated, perforated, or collapsed.

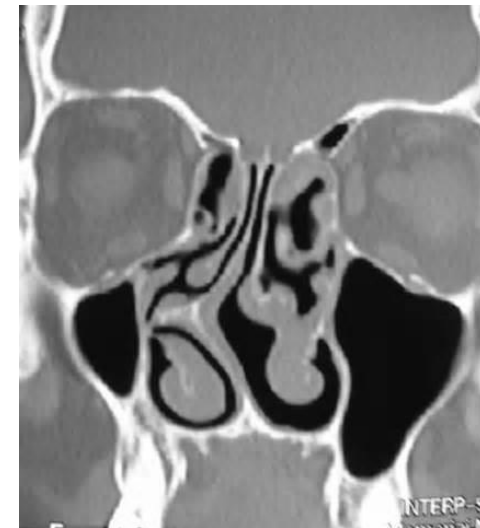
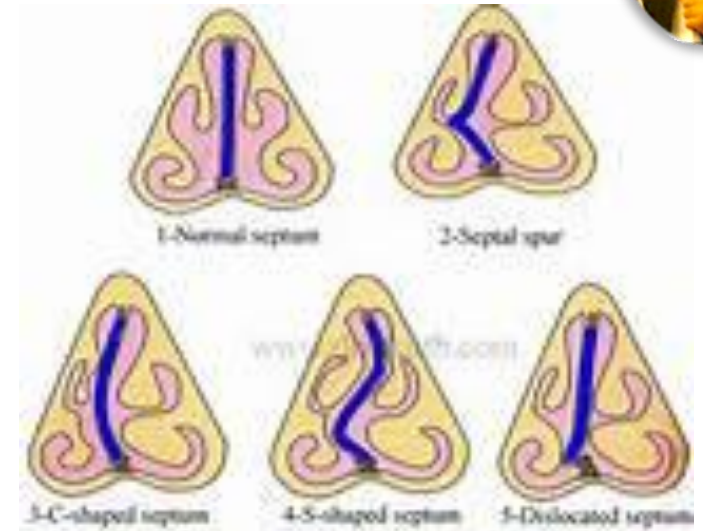




The Nasal Septum

Septal Deviation

- The nasal septum is rarely exactly in the midline
- Minor deviations are normal and cause no symptoms. Marked deviation will cause nasal airway obstruction and may contribute to sinonasal pathology by obstructing the normal sinus drainage pathways.
- Septal deviation can be corrected by surgery, with excellent results.





Septal Deviation

Etiology

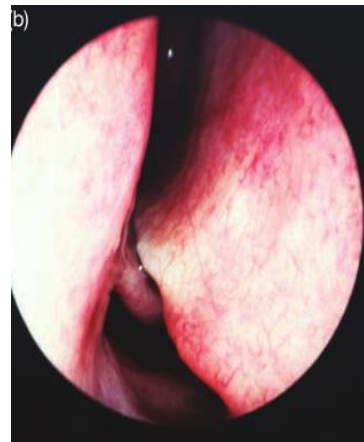
- Most cases of deviated nasal septum (DNS) result from trauma, either recent or long forgotten, perhaps during birth.
- ‘Buckling’ in children may become more pronounced as the septum grows.
- Nasal surgery, including cosmetic surgery, can cause septal deviation.

Septal Deviation

Effects



- Nasal obstruction – may be unilateral or bilateral.
- Recurrent sinus infection due to impairment of sinus ventilation by the displaced septum.
- The middle turbinate on the concave side of the septum may hypertrophy and interfere with sinus ventilation.
- Severe deviation is apparent on looking at the nose and septal surgery is an important component of aesthetic nasal surgery (septorhinoplasty).
- Can cause facial pain but this is rare.
- Otitis media. DNS may impair the ability to equalize middle-ear pressure.
- Nosebleeds – a sharp spur can be a focus for epistaxis





Septal Deviation Treatment

- If symptoms are minimal and there is only a minor degree of deviation, no treatment is needed.
- Septal deviations are often found in patients with allergic rhinitis. Treat the rhinitis rather than the septal deviation
- Where symptoms are more severe correction of the septal deformity is justified (though never essential).



Septal Deviation Treatment

- Surgery involves elevating mucosal flaps from the septal cartilage and resecting part of the deviated cartilage before replacing it in the midline (septoplasty).
- Septal surgery should be undertaken with caution if at all in children as it may interfere with the growth of the mid-face.

