

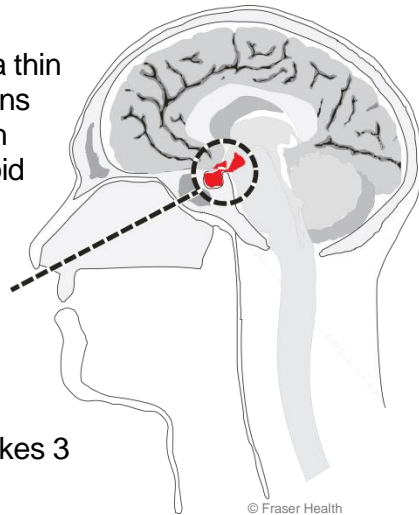
Pituitary Gland Surgery (Transsphenoidal Approach)

Your Surgery and Recovery at Home

Royal Columbian Hospital

You are having surgery to remove a tumour from the pituitary gland. The surgery is done by going in your nose and through the sphenoid sinus to the pituitary gland.

The surgeon threads a thin tube (with a camera lens on the end) up through your nose and sphenoid sinus to the pituitary gland. The surgeon uses special tools to reach and cut away the tumour from the pituitary gland.



The surgery usually takes 3 hours.

You usually go home 1 to 3 days after the surgery. This will depend on your recovery and your health before the surgery.

Appointments after surgery

See your family practitioner.

My appointment is on: _____

See your neurosurgeon.

My appointment is on: _____

Follow-up x-ray (medical imaging)

My appointment is on: _____

Going home checklist

- You have a ride home and someone to stay with you, if needed.
- You know what medicine(s) to take, as well as when and how to take them. You might be on new medications as a result of your surgery.
- You know what blood tests you might need.

Caring for Yourself at Home

Activity and Rest

For the first few days, balance your activity and rest. You will be tired for a few weeks. Try to get 8 hours of sleep each day and rest in the afternoon.

Until you see your surgeon:

- × **Do not** lift, push, or pull anything over 5 kilograms (10 pounds), including carrying children and groceries.
- × **Do not** bend over.
- × **Do not** play any sports or do any exercises such as yoga or strength training with weights.

You cannot drive or return to work until approved by your surgeon (this is usually within 4 to 6 weeks).

Your surgery site

Your nose and sinuses could be packed with bandages. These are usually removed within a few days after surgery. Once the packing is taken out, for the next few weeks:

- **Always** wash your hands before and after touching your nose.
- You should not have any fluid dripping from your nose at any time.
- × **Do not** blow your nose at all.
- × **Do not** put anything into your nose.

You can shower when you go home. **Do not** take baths, soak in a hot tub, or go swimming until your surgeon says you can.

Drinking and Eating

Return to your normal diet. You might lose your sense of smell for a couple of weeks. Food will taste bland.

You might feel sick to your stomach (nausea) or throw up (vomit). This should not last long. It is important to stay hydrated.

If you feel sick or throw up:

- Drink 'flat' ginger ale, clear soups, and clear fluids, and eat mild foods until you feel better. Other good choices include dry toast, crackers, popsicles, and gelatin dessert (such as Jell-O). Stay away from caffeine, carbonated soft drinks, and acidic fruit juices.
- Drink and eat small amounts often.
- Rest in bed until you feel better. Place a cool, damp cloth on your face and neck.
- Try not to smoke or be around smoking. Smoke can make your nausea worse.

If the nausea or vomiting does not go away, see your family practitioner.

You might get constipated because you are less active or eating less fibre. To prevent constipation:

- Drink plenty of liquids each day (unless you have been told differently).
- Eat high fibre foods such as bran, prunes, whole grains, vegetables, and fruit.
- Walk and move around as much as you can.

If you continue to be constipated, talk with a pharmacist or family practitioner.

Managing pain

You can expect to have some discomfort for several days such as a sinus headache and nasal congestion (stuffy nose). This slowly gets better over the next few weeks. Your surgeon will tell you how best to relieve these effects.

Your surgeon gives you instructions to take pain medicine. This is usually for non-prescription (over the counter) pain medication such as acetaminophen (Tylenol[®]) or non-steroidal anti-inflammatory drugs ★ (NSAIDs) such as ibuprofen (Advil[®], Motrin[®]) or naproxen (Naprosyn, Aleve[®]).

- ★ **NSAIDs are not for everyone after surgery.** If you have (or have had) health problems such as stomach ulcers, kidney disease, or a heart condition, speak with your surgeon or family practitioner before using NSAIDs.

If your pain is at an uncomfortable level, take your pain medicine as directed. As your pain improves, take your pain medicine less often and/or a smaller amount until you have little or no pain, then stop.

Always read the label and/or information about how to safely take medication from the pharmacist.

Questions about medications? Speak to your local pharmacist. After-hours, call 8-1-1 and ask to speak to a pharmacist.

When to get help

Call your surgeon or family practitioner

if you have any of the following:

- a nasal drip or a feeling of fluid trickling down the back of your throat, sniffing often, headache that only eases when lying flat (possible signs of a spinal fluid leak.)
- increased swelling of the nose and face
- any new changes to your vision such as double vision, seeing spots, or narrowing field of view
- worsening headache when changing from a lying to sitting position
- urinating (going pee) extreme amounts of urine
- pain that does not ease with pain medicine
- a fever over 38°C (101°F)
- feeling increasingly tired or dizzy

Can't contact your surgeon or family practitioner?

Have any questions about your recovery?

Call 8-1-1 (HealthLinkBC) to speak to a registered nurse any time - day or night.

Call 9-1-1 if you have any of the following:

- trouble breathing or shortness of breath
- chest pain
- any sudden severe pain

Family Practitioner: Refers to family doctor or nurse practitioner
