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Clinical implications of the nasal septal deformities

Marin Šubarić

University North in Varaždin, Croatia

The first attempts to systematize septal distortions have been given by Cottle who defined four groups of septal deformities: subluxation, large spurs caudal deflection and tension septum. Fortunately, the variations of the nasal septal deformities show a certain order, thus enabling more precise classification. Mladina was the first to make user-friendly classification of nasal septal deformities in six basic types. He also described the seventh type, named "Passali deformity", which presents individually, but always well-defined combination between some of the previous six types. Mladina types of nasal septal deformities (NSD) are divided in two main groups: so called "vertical" deformities (types 1, 2, 3 and 4), and "horizontal" ones (types 5 and 6). This classification was immediately well accepted by rhinologist's world wide and started to be cited from the very beginning. Since then it has been continuously cited increasingly more often, thus making Mladina classification a gold standard whenever clinical researches on nasal septum are concerned. More than fourteen clinical studies based on this classification have been published so far. It is extremely important to be familiar with the particular types of NSD since every single of them plays a specific role in the nasal and general pathophysiology in man. To know the classification have the importance also from the forensic point of view: the court expert witness has a great chance and possibility to make a reliable and sustainable finding for the court needs.