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**Endoscopic technic of cartilage «slinky» myringoplasty in pediatric patients**

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**Introduction:** Endoscopic otosurgery develops extremely fast. Development of myringoplasty techniques for work with one hand under the vest of an endoscope is relevant. The present study evaluated the results of the graft success rate and hearing gain of children who underwent endoscopic underlay «slinky» myringoplasty due to chronic otitis media.

**Material & Methods:** The study included 18 pediatric patients aged between 6 and 17, who had endoscopic underlay «slinky» myringoplasty with the diagnosis of chronic otitis media between September 2017 and September 2018 in ENT department of National Scientific and Practical Center of Children's Health. All patients' demographics, perforation size, and hearing status were examined.

**Results:** Tympanic membrane perforation was  $\geq 4$  mm in 5 patients and between 4 and 8 mm in 13 patients. The air-bone gap (ABG) of the patients was  $19.4 \pm 5.32$  dB preoperatively,  $8.81 \pm 3.03$  dB postoperatively second month,  $7.92 \pm 2.55$  dB postoperatively sixth month, and  $7.56 \pm 2.32$  dB postoperatively 12th month. 2 (11.1%) patients had recurrent perforation in the postoperative follow-ups. The average operation time was  $17,0 \pm 7, 6$  minutes. Reactive phenomena of the external auditory canal skin were minimal after 7 days. No additional cuts were made.

**Conclusions:** In children, endoscopic inlay «slinky» tympanoplasty is a surgical technique with short duration, high graft success, effective hearing reconstruction, and high levels of postoperative patient comfort.