



2nd International Conference on

Ear, Nose and Throat Disorders

May 14-15, 2018 Osaka, Japan

Posters

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Coorelation between serum squamous cell carcinoma antigen level and tumor volume in head and neck cancer

Teerapol Kotamnivates

Prince of Songkla University, Thailand

Background: Tumor marker in head and neck cancer is one of the most investigated areas. Squamous cell produces squamous cell antigen(SCC-Ag) which is expected to be higher in cancer. Level of SCC-Ag associated to cancer prognosis has been shown in literatures. The investigators conducted the first study determining correlation between SCC-Ag level and tumor volume in head and neck cancer.

Materials and Methods : SCC-Ag level of the patients was measured from venous clotted blood. Tumor volume was calculated by the typical ellipsoid formula. The tumor width, length, and height were measured from CT scan. Correlation between SCC-Ag level and tumor volume was analyzed.

Results : Fifty-two patients, 50 male and 2 female, were studied. Mean age of patients was 62.4 year. Tumor subsites were oral cavity cancer 11 cases (21.6%), oropharyngeal cancer 21 cases (40.38%), hypopharyngeal cancer 8 cases (15.7%), and laryngeal cancer 12 cases (23.5%). Differentiation of tumors were well differentiated 20 cases (38.4%), moderate differentiated 27 cases (52.9%), and poorly differentiated 5 cases (9.8%). Mean of tumor volume was 20.013 mL³ with 0.02-91.46 mL³ in range. Critical point of tumor volume was 30.8 mL³. Mean of SCC-Ag was 2.69 ng/mL with 0.5-14.6 ng/mL in range. Critical point of SCC-Ag was 5.8 ng/mL. Tumor volume in head and neck cancer significantly related to SCC-Ag by Pearson's product-moment correlation with P value = 0.0002213 and 52.4% correlation (moderate level).

Conclusions : Study of head and neck tumor volume and SCC-Ag level demonstrated moderate correlation.

Biography

Teerapol Kotamnivates has completed his MD from Thammasat University. Currently he is during the residency program of Otolaryngology Head and Neck Surgery, Prince of Songkla University.

hankyent@hotmail.com

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Accepted Abstracts

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Endoscopic approach for stapedectomy: A series of cases in a teaching hospital from Brazil

Henrique F Pauna, Luiz H Chequim, Raquel A Lauria, Alexandre C Guimarães, Vagner A Rodrigues, Walter A Bianchini and Arthur M Castilho
University of Campinas, Brazil

Surgical management of otosclerosis is one of the therapeutic options, and differential diagnosis includes ossicular malformations, oval or round window atresia, congenital cholesteatoma, middle ear tumors, or ossicular trauma. Recent advances in endoscopic surgery have provided greater evolution within the concept of minimally invasive procedures. Endoscopic stapes surgery is becoming one important option to treat otosclerosis, however, only few studies have described their techniques and results. Here we describe our experience using endoscopic approach on stapes surgery. Eight patients underwent to complete endoscopic stapes surgery. Three of the patients were submitted to conventional stapes surgery with surgical microscope helped with an endoscope. All of the eight patients were submitted to stapes surgery with local anesthesia. Six patients had their complete audiological evaluation with a closing gap after the surgery. Only one patient had no audiometry after the procedure because of the short period of time after his surgery. The duration of the surgery – endoscopic or conventional – was a longer in endoscopic approach, however it was not significant. Endoscopic stapes surgery is an option available for training and also an option to treat otosclerosis. Our results may help to improve data regarding this subject.

h_pauna@hotmail.com

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Mistaken identity of a laryngeal polyp in an airway emergency

Khadijah M N^{1,2}¹Serdang Hospital, Malaysia¹Universiti Putra Malaysia, Malaysia

Supraglottic polyp is a benign lesion the treatment of laryngeal polyp is elective excision after fully preparing the patient, but it may become an emergency when it is obstructing the airway. Acute upper airway obstruction from laryngeal polyps is uncommon. However, a large pedunculated laryngeal polyp, when unrecognized, may produce sudden airway obstruction. Even more immediate action need to take care of when it is no longer polyp, it turn up to be Laryngeal Lymphoma. We report a case of a lady who presented with a 2-month history of progressive dysphagia. Bedside flexible scope showed a pedunculated huge polypoidal mass arising from left supraglottic region which was obstructing the laryngeal inlet in a ball valve effect and another lobulated mass at left base of tongue. Biopsy was taken and was reported as high-grade B -cell lymphoma. Extranodal lymphoma involving the larynx is much more an uncommon encounter. Presentation of extranodal lymphoma of head and neck typically involves structures of the Waldeyer ring (tonsils) followed by the nasopharynx, salivary glands and base of tongue. The consequences of a missed diagnosis warrant awareness and vigilance for this type of tumor. Another point to highlight is surgery, is not the standard treatment for lymphoma. But in this case, it is of special consideration, as there was evidence of impending airway obstruction warranting emergency excision of the supraglottic mass to protect the airway.

khadijahmnor@upm.edu.my

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Transaxillary endoscopic thyroidectomy: Gas insufflation versus gasless technique**Kitti Jantharapattana and Peesit Leelasawatsuk**
Prince of Songkla University, Thailand

Purpose: To compare the clinical outcomes between gas insufflation and gasless technique of transaxillary endoscopic thyroidectomy.

Material & Method: During June 2011 to August 2017, a total of 60 patients underwent transaxillary endoscopic thyroidectomy. All patients were operated by one surgeon. Gas insufflation technique was performed in 38 patients and gasless technique was performed in 22 patients. The clinical outcomes were compared between the both groups.

Result: The patients' characteristics were not different between the two groups. The operative time for the gas insufflation group was shorter than in the gasless group (209.3±63.1 vs. 267.6±66 min; P=0.001). The estimate blood loss for the gas insufflation group was less than in the gasless group [10(5.20) vs. 30 (16.2, 50) mL; P<0.001]. The drainage content was significantly less in the gas insufflation group [0 (0.70) vs. 81.5 (74.2, 104.5) mL; P<0.001]. The hospitalized days were significantly less in the gas insufflation group [1.5 (1.1, 2) vs. 1.8 (1.5, 2.5) day; P=0.032]. Regarding of pain between the gas insufflation and gasless groups, there was no statistically significant difference of VAS at 24 and 48 hours. Morbidity and other complications were comparable across groups. Tract recurrence was not found in the both groups

Conclusion: Compared to the gasless technique, the gas insufflation technique provided better clinical outcomes in terms of operative time, estimate blood loss, drainage content, and hospitalized day. There were comparable outcomes regarding the postoperative pain, complication and tract recurrence.

kittient@hotmail.com

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Application of a lightweight encryption algorithm to a quantized speech image for secure IoT

Mourad Talbi

Researches and Technologies of Energy, Tunis

The IoT internet of things being a promising technology of the future. It is expected to connect billions of devices. The increased communication number is expected to generate Data Mountain and the data security can be a threat. The devices in the architecture are fundamentally smaller in size and low powered. In general, classical encryption algorithms are computationally expensive and this due to their complexity and needs numerous rounds for encrypting, basically wasting the constrained energy of the gadgets. Less complex algorithm, though, may compromise the desired integrity. In this paper we apply a lightweight encryption algorithm named as secure IoT (SIT) to a quantized speech image for secure IoT. It is a 64-bit block cipher and requires 64-bit key to encrypt the data. This quantized speech image is constructed by first quantizing a speech signal and then splitting the quantized signal into frames. Then each of these frames is transposed for obtaining the different columns of this quantized speech image. Simulations result shows the algorithm provides substantial security in just five encryption rounds.

mouradtalbi196@yahoo.fr

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Lentivirus-mediated RNAi on aggrecanases of chondrocytes for cartilage tissue engineering: *In vitro* and *in vivo***Zhenghui Wang**

Xi'an Jiaotong University, China

Aggrecanases plays important role in degrading aggrecan. To further explore the potential of Lentivirus in cartilage tissue engineering, the aggrecanases inhibited chondrocytes by Lentivector-mediated RNAi were seeded into scaffolds for tissue engineered cartilage and observe the effects of RNA interference (RNAi) on chondrocyte proliferation, function and immunological rejection after allogenic tissue-engineered cartilage transplantation. In vitro engineered cartilage-like tissue grown on the scaffolds was characterized by histology, scanning electron microscopy, biochemical assays and analysis of gene expression at different time points of the in vitro culture. The allograft and immunological response were examined at 1, 2, 4, 8 and 12 months postoperatively with hematoxylin and eosin histo-chemical staining, immune-histochemical staining (aggrecan, type II collagen, class I and II major histocompatibility complex) and flow cytometry for peripheral blood cluster of differentiation 4+ (CD4+) and CD8+ T-cells. The transduced constructs showed more cell proliferation and extracellular matrix of chondrocytes than that of un-transduced constructs. The glycosaminoglycan production and hydroxyproline content of tissue grown on the transduced constructs were higher than that of the un-transduced group. The expression levels of aggrecan and collagen II were evidently heightened in the transduced constructs compared with the un-transduced construct. Compared to the control group, the RNAi group had fewer eukomonocytes infiltrated, which were only distributed around the graft. The ratio of CD4+/CD8+ T-cells in the RNAi group was significantly lower than the normal one. The aggrecanases RNAi for chondrocytes promoted the formation of engineered cartilage and decreased the immunological rejection effect.

wangzhenghui77@xjtu.edu.cn

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