4th European Otolaryngology-ENT Surgery Conference

&

3rd International Conference on **Craniofacial Surgery**

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Posters

Immediate effects of ocean breathing on aerodynamic, acoustic and self-perception parameters of voice in professional voice users

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Voice plays a major role in communication and is a multidimensional entity which reveals the speaker's physical, emotional health, personality and identity. There are certain groups of people who are dependent on their voice for their livelihood and are called as professional voice users. A small change or deviation in their voice can interfere their career. As per the literature survey, professional voice users are at the maximum risk of developing hyperfunctional voice disorders due to their vocal usage and demand in their profession(1). Yoga and pranayama which are nothing but postures and breathing techniques gaining a lot of attention in the field of health science(2). These are used for the therapeutic managements of many disorders and its efficacy has been documented. Breathing techniques like surya bedha pranayama helps in aerating the lungs efficiently and makes the availability of the oxygen level to a greater extent(3). Ocean wave breathing or Ujjayi pranayama helps in the maximum expansion of the lungs, increasing the usage of the lung volume. Also many techniques help in reducing anxiety, hyperactivity, laziness, appetite, and thirst(4). One of the pranayama technique which includes voicing and humming during breathing "Brahmari pranayama" has been proved to improve the voice quality in terms of acoustic characters(5). Since respiration is the source for voice production, good lung capacity and inspiratory-expiratory ratio is very important in producing a good voice quality, a very famous and well proved breathing technique named Ujjayi pranayama or ocean wave breathing is evaluated in this current study. Twenty female Speech Language Therapists after an hour of vocal usage were made to perform this technique. Parameters of aerodynamic, acoustic and self perceptual were analyzed for pre and post practice.

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Biography

Dr. Usha Manjunatha, Speech Language Pathologist currently pursuing PhD final year in Manipal Academy of Higher Education, Manipal, India. I have completed my graduation in Speech and Hearing, and Post graduation in Speech Language Pathology form All India Institute of Speech and Hearing, Mysore, India in 2015. I am a certified yoga practitioner and my area of interest being Voice & its Disorders, currently working on a Department of Science and Technology project – "Effects of Yoga and Pranayama on voice". Also working in the field of voice rehabilitation for professional voice users with hyperfunctional voice disorders. I have got three international publications in this field and have presented more research works in national and international conferences and symposiums. Also have delivered talks on importance of Yoga-Pranayama and its therapeutic effects in the field of Speech and Hearing.

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Anti-Staphylococcal Humoral Immune Response in Patients with Chronic Rhinosinusitis

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Staphylococcus aureus (S. aureus) can behave both as a harmless commensal and as a pathogen. Its significance in the pathogenesis of chronic rhinosinusitis (CRS) is not yet fully understood. This study aimed to determine serum antibody responses to specific staphylococcal antigens in patients with CRS and healthy controls, and to investigate the correlation between specific antibody response and severity of symptoms. Serum samples from 39 patients with CRS and 56 healthy controls were analyzed using a protein microarray to investigate the antibody response to S. aureus specific antigens, with a focus on immunoglobulin G (IgG) directed toward staphylococcal components accessible to the immune system. Holm-Bonferroni corrections were applied in all analyses. Information about growth of S. aureus in nares and maxillary sinus was taken from a previous study based on the same individuals. Clinical symptoms were assessed using a scoring system. IgG antibody levels toward staphylococcal TSST-1 and LukF-PV were significantly higher in the CRS patient group compared to healthy controls, and levels of anti-TSST-1 antibodies were significantly higher in the CRS patient group with S. aureus in maxillary sinus than in controls. There were no correlations between the severity of symptoms and levels of serum anti-staphylococcal IgG antibody levels for LukF-PV and TSST-1. TSST-1 and LukF-PV could be interesting markers for future studies of the pathogenesis of CRS.

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Biography

Dr. Ulrica Thunberg is specialized in otorhinolaryngology. She has been working in the field since 20 years. and has her main research in rhinology. She is working at the university hospital of Örebro, Sweden.

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Psychosocial impact of hearing loss on adults using hearing aids and sign language Users-Icf framework

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Assistant Professor, Amity University Haryana (India)

International Classification of Functioning, Disability and Health (ICF,WHO 2001) is a holistic framework for integrating biological, psychological, and social aspects of human functioning. Purpose of the study: Impact of hearing loss on prelingual and post lingual deafness with and/or without amplification device based on ICF Framework. Method: Group I (GRP-I) consisted of 120 adult hearing aid users and Group II (GRP-II) also consisted of 120 adult sign language users considering the age range of 18-60 years .Results: Mann-Whitney 'U' test was used to compare between GRP-I and GRP-II with respect to domains of ICF. Conclusion: The current study addressed the various issues faced by individuals who are using hearing aid amplification and individuals using sign language as mode of communication. As audiologists we should frame our intervention options in an advanced manner considering all the domains in-order to provide better quality of life to these population.

Key words: ICF, Sign Language Users, Hearing Aid Users, Psychosocial stress.

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Biography

Ms. Manisha Choudhury is specialized is an Audiologist and Speech Language Pathologist currently working as Assistant Professor at Amity University Haryana (India), and has quite a few experiences of cochlear implant mapping along with several audiological rehabilitation services . She also contributed in diagnosis and treatment of pediatric and geriatric hearing impaired and neurogenic communication disorder population.

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Notes:

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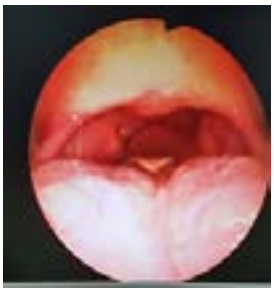
Robotics in Ent, Head & Neck: Our Institutional Experience of 108 cases at Indraprastha Apollo Hospital, New Delhi, India

Kalpana Nagpal
Indraprastha Apollo Hospital, New Delhi, India

The world over robotic surgery is fast gaining ground as a preferred mode of surgery. Apart from clear advantages such as higher patient comfort & safety, it also helps significantly cut down length of stay at hospital. Robotic ENT surgeries program was started in our institution in 2017. Till April'2019, 108 cases have been performed for various indications i.e. sleep apnoea surgeries (61), thyroid surgeries(30), parathyroid surgery(1), haemangioma base of tongue(1), lingual thyroid base of tongue(1), Submandibular gland dissection(1), base of tongue cancers(3). In our experience results of robotic surgeries are very satisfactory for both patient & surgeon. Out of 108, only 1 patient required ICU stay. Patient response in terms of relief, specially in sleep surgeries is overwhelming. Robotic surgery has rapid learning curve, short stay for patient, minimal bleeding, minimally invasive so less morbidity, better cosmesis & very good for teaching anatomy & surgical steps to juniors.

DA VINCI Robotic Arms

Lingual Thyroid



Post healing TORS in sleep apnoea

Tumour Base of tongue

Biography

Dr. Kalpana Nagpal is a senior consultant in Dept. of ENT, Head & Neck Surgery and Robotics at Indraprastha Apollo Hospital, New Delhi, India. She has 26 years of experience. Training for Robotics was from Yonsei University, Seoul, South Korea. She has worked in rhinology with Dr. Frederick Kuhn at Savannah, Georgia, USA. She is doing basic & advanced ENT, Head and neck surgeries.

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Speech-Therapy Performance with Laryngomalacia patients

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Introduction: The dysphagia is a symptom that is characterized by the difficulty in the bolus transit between the mouth and stomach, which may cause deviations in this path, with obstruction or not of the respiratory passages. The causes that affect the coordination sucking-swallowing-breathing are numerous. Among these causes of pediatric dysphagia there are the abnormalities of the upper airway, as the laryngomalacia (LM). The LM is a laryngeal malformation that affects the supraglottic area and is characterized by the colapse of the laryngeal supraglottic structures, epiglottis, arytenoid mucosa and aryepiglottic folds during the inhalation. This is the most commom cause for childhood laryngeal rattling (50 to 70%) and the biggest cause for larynx congenital abnormality. The LM diagnosis is accomplished through a nasofibrolaryngoscop exam, carried out by the otolaryngologist that detects the characteristic abnormalities, besides excluding other pathologies. The symptoms should disappear between 18 – 24 months and 10% of the cases need surgical treatment. Besides the rattling, patients with LM can present alimentary difficulties, with weight gain, dysphagia, aspiration, apnea, cyanosis, gastro-oesophageal reflux, obstructive sleep apnea and, in the severe cases, pulmonar hypertension. The gastro-oesophageal reflux disease is an important comorbidity of LM. The LM cause is not clear yet. Nowadays, the most accepted theory suggests that children with LM perform an alteration of the laryngeal tônus and of the integrative function sensorimotor. The LM is classified in three degrees: slight, mild and severe, and it's based only on the symptomatic performance. In slight cases only the rattling is involved. As to the mild cases, it also occurs chokes and alimentary difficulties. During the swallowing occurs the interruptions of breathing. Therefore children with airway impairment or others respiratory difficulties may not be able to safely coordinate the suction, swallow and breath functions, leading into a dysphagia and a possible aspiration. In these cases, it's possible to exist cough, chokes, cyanosis and respiratory sounds, which can be related to the laryngotracheal penetration or aspiration. There is also the possibility of having an increased time in the ingestion of food and difficulty in weight gain.

Objective: To emphasize the necessity of speech therapy assistance in the LM cases.

Method: The evaluation of swallowing is held according to the symptoms, clinical evaluations of swallowing carried by a speech therapist and instrumental studies of objective evaluations of swallowing, including VF and VED.

In the LM cases, 50,3% of the patients report dysphagia symptoms or alimentary difficulties and 9,6% of the patients have difficulty in weight gain. When these patients are clinically evaluated and with complementary exams, this incidence increases, thus suggesting cases of silent aspiration.

Result: The main objective of the speech-therapy intervention in these cases is to promote a safe feeding, efficient and pleasant. In this regard, it is necessary to have a therapy with the focus on orofacial motricity aiming to have an adequacy of the orofacial musculature (sensitivity, tonus and force) and its orofacial functions, therefore improving the standard of sucking-swallowing-breathing. Besides that, in some cases it is necessary to make an adaptation of consistencies and tools to improve the control of the flow and of the food volume.

Biography

Dr Roseane Rebelo S. Meira is a speechtherapist specialized in swallowing disorders with several international courses. She has been seeing baby pacients for 27 years with large experience in breastfeeding and cheewing issues. She has been teaching in neonatology courses for speechtherapists for 15 years, contributing to the training of new professionals.

Mixed type tumor Histiocytic Sarcoma & Langerhans Cell Sarcoma

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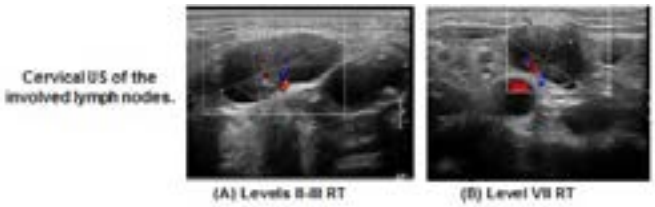
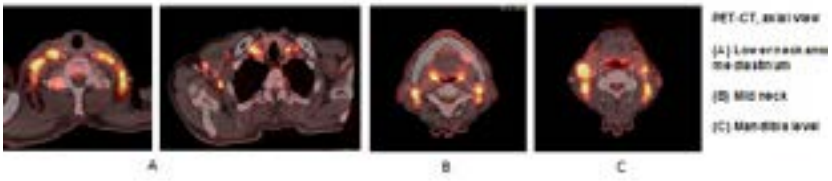
Department of pathology, ZIV Medical Center, Israel

We present a case of a 70 Year-old man with night sweats, weight loss, bilateral leg pain and neuralgia with a single physical examination finding of bilateral enlarged cervical lymph nodes. He was diagnosed with a rare type of Langerhans Cell Sarcoma (LCS) mixed with Histiocytic Sarcoma (HS). Both malignancies are hard to diagnose because they are rare and have non-specific symptoms. Furthermore, HS has similar features as Non-Hodgkin's lymphoma and other B-cell Lymphomas. The diagnosis in this case was made by an open biopsy from the left neck, level IV, which revealed a 19mm hard lymph node without necrosis or adhesions. The pathology showed paracortical and interfollicular large cell neoplasm, with intermediate/divergent phenotype between HS (Lysozyme+/CD68-KP1+) and LCS (CD1a+/Langerin+). PET-CT showed a disseminated disease; therefore, the patient was not a candidate for surgery. In conclusion, although this diagnosis is extremely rare, we should always include it in the differential diagnosis process of a suspicious cervical lump or mass..





Biography

Leemor Wallach is an intern in Ziv Medical Center. She received her MD from Tel -Aviv University and B.Sc. in Animal Science from the Hebrew University. She graduated with honors. Leemor was an Army medic, worked as a vet's assistant in a veterinary hospital, a doctor's assistant in the ER and managed a surgeon's clinic. She intends on pursuing a career as an otolaryngologist.

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Osteonecrosis of the mandible after the use of bisphosphonates- case report

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Introduction: In the treatment of the malignant processes in the bone tissue bisphosphonate drugs are used. When using bisphosphonate may occur lesions are formed in bone tissue and oral mucosis. Bisphosphonate lesions are a relatively new pathological condition known less than twenty years.

Case report: We present the case of a male patient at the age of fifty-five, treated by multiple myeloma. He received biphosphonates from therapy for over a year. He had painful ulceration and fistula on the alveolar ridge of the mandible on the right, from which the purulent contents were tended. The radiographic image showed the dilution of the bone in the described part, with a visible fistula. The patient received Klindamycin tablets from therapy, rinsing the mouth and woud of scin with disinfectant. After calming the symptoms of the infection, partial resection of the mandible was made.

Conclusion: Prevention is the best way to prevent the occurrence of bisphosphonate lesions, but in order to apply it is necessary to know the pathology of bisphosphonate lesions.

Keywords: bisphosphonate, mandible, osteonecrosis.

Biography

Tanja Boljevic is medical doctor, Master of Medical Science. Shi is specialist of Maxillofacial Surgery since 2014. in Clinic of Otorhinolaryngology and Maxillofacial Surgery, in Clinical Center of Montenegro. Tanja is assistant in the Medical faculty and Dental faculty on the subject Maxillofacial Surgery in Montenegro and expert witness in Medicina in part of Maxillofacial Surgery. He has published 7 papers in reputed journals.

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Notes:

E-BABE-The surgical treatment of JNA – 5 years experience

Vorozhtsov I.N., Grachev N.S. and **Frolov S.V**
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Perform a retrospective analysis of JNA surgery and evaluate recurrence. From 2013 to 2018 73 patients with JNA stages Fisch- Andrews I-IIIB (7-18 years old) were operated. 93 operations (20 revisions) were performed, 7 open approaches, 86 transnasal endoscopic. The 58 patients were radically operated (2 recurrence), 12 patients had a residual tumor component (RTC) (9 continued growth) and 3 patients were scheduled for 2 stages of surgical treatment. Revisions was performed in 14 patients (7 radical, 2 RTC without continued growth). 5 patients had continued growth and they underwent a 2nd revision (2 radically, 2 RTC without continued growth). 1 patient underwent the 3rd revision, then the patient was sent for radiation therapy. We had a relapse or continued tumor growth in 11 patients (15.1%) after the first surgery. Of the 14 patients who underwent secondary surgery (3 patients planned second stage), we had a continued growth in 5 patients (35.7%). In our group: 65 were radically operated, in 7 patients the RTC without continued growth, 1 patient received radiation therapy. Follow-up of all patients from 3 months to 5 years.

Conclusion: All patients who underwent revision for continued growth had IIIa-IIIb stages Fisch-Andrews. Continued growth was observed in patients with RTC in the pterygoid process and the large wing of the sphenoid bone. The risk of recurrence of JNA is increasing with number of surgery.

Biography

Vorozhtsov Igor Nikolaevich has completed his PhD at the age of 31 from D. Rogachev's National Research Center of Pediatric Hematology Oncology and Immunology. He is the senior researcher of the Head and Neck Surgery with reconstractive plastic surgery department of this center. He has published 5 articles in reputed journals, and over 30 articles in Russian journals.

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Accepted Abstracts

RHINOPLASTY IN HISPANIC NOSE

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Rhinoplasty is one of the most common facial plastic surgeries in the world. Civilizations of all ethnic groups have always had an interest in facial beauty over time.n At present the pure races are less frequent and therefore, facial plastic surgeons around the world we face groups of different cultural and ethnic groups who want to improve their appearance. Ethnic rhinoplasty is often considered a procedure to reshape the nose of a black or Asian patient, few rhinoplasty has been described in mestizo or Hispanic patients. The mestizo race is a combination of Caucasians, descendants of Africans and local Indian tribes. The proportion of each one depends on the area where the patient comes from. There has been a large increase in the Hispanic population of the United States and Europe. This has made facial plastic surgeons see a concomitant increase in requests for rhinoplasty among this population. The goal of rhinoplasty is to correct the nose to have an appearance consistent with your race after the surgery- It would not be pleasant or harmonious for a Caucsian person with a thick nose and large nostrils, or a person with the face of people with a very thin nose and high back. Below, we show some cases of Hispanic nose and the result of rhinoplasty according to the physical characteristics of each patient.Each patient must be handled individually.

Vocal health: preventive speech and hearing

Carla Nelide G. Z. Balderrama
APAE Matinhos PR and APAE Guaratuba PR, Brazil

The Voice is a man-made phenomenon that identifies not only its age, its sex and its physical type, but it is also one of the strongest means that identifies our personality characteristics and emotional states. It is considered as a set of sounds, which is "manufactured" in the larynx, through the Vocal Strings. Also known as Language, because the voice is considered a means of communication. The voice is produced in the larynx, where the vocal folds are located (vocal cords). As we breathe, the vocal folds open and air enters and leaves the lungs. As we speak, they approach and the air coming out of the lungs, passing through the vocal folds, produces a vibration that we call the voice. The vocal folds are very versatile and effective, but it also has its limits: talking too much, screaming, coughing or excessive throttling, talking in noisy environments talk a lot when the flu can harm the voice.

Pediatric Sleep Questionnaire As A Screening Tool To Predict Surgical Intervention In Pediatric Sleep Related Breathing Disorders – A Prospective Study

Varada Elamon and **George Kuruvilla**
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Paediatric Sleep Related Breathing Disorders (SRBDs) is viewed as a continuum of severity from partial obstruction of the upper airway to continuous episodes of complete upper airway obstruction or obstructive sleep apnoea (OSA). A few published validated questionnaires have been designed to assess the SRBDs and associated symptoms occurring in children. Sleep endoscopy is a consistently reliable tool, which is well established now a days for identifying the site of obstruction in children with SRBDs. The objective of this study was to evaluate the effectiveness of Paediatric Sleep Questionnaire (PSQ) score in predicting the need for surgical intervention in children with SRBDs using the following parameters:

1. By co-relating the PSQ score with sleep endoscopy results in children with SRBDs.
2. The use of PSQ scores as a screening tool to predict the need of surgical intervention in paediatric SRBDs.

Methodology This prospective observational study was conducted in the Department of ENT, Lourdes Hospital, Kochi, Kerala from December 2015 to November 2017. A total of 60 patients clinically suspected to have SRBDs and posted for sleep endoscopy study were selected. On the day of admission, after undergoing routine ENT examination, the parents were requested to answer the questions in the validated Paediatric Sleep Questionnaire. The patient then underwent sleep endoscopy on the following day and the site and severity of obstructions was assessed followed by possible surgical intervention. The score obtained from the PSQ for a particular patient was then co-related with the sleep endoscopy findings with or without surgical intervention.

Results: In this study the PSQ score was found to be effective as a screening tool in predicting the need for surgical intervention in children with SRBDs. The PSQ score obtained also co-related well with the endoscopically assessed severity of obstruction.

The Incidence of Thyroid Gland Invasion in Advanced Laryngeal Squamous Cell Carcinoma

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Objectives: To evaluate the frequency of the thyroid gland invasion in patients with advanced laryngeal squamous cell carcinoma submitted to total laryngectomy and thyroidectomy and to determine whether clinical and pathological characteristics of laryngeal carcinoma can predict glandular involvement.

Methods: A retrospective case series with chart review, from March 2009 to January 2018, was undertaken in the Princess Norah Oncology Center, King Abdul-Aziz Medical City, Jeddah / KSA. An inception cohort of 56 patients with laryngeal squamous cell carcinoma was considered. Nine cases were excluded. All patients had advanced stage cancer larynx (clinically T3-T4) and underwent total laryngectomy in association with thyroidectomy. Total thyroidectomy was performed in all bilateral lesions or if there was suspicion of contralateral lobe involvement. Hemithyroidectomy was performed in all lateralized lesions. Retrospective histopathologic analysis of thyroid specimens was subsequently performed. The frequency of thyroid gland invasion was calculated and analysis of demographic, clinical and pathological characteristics associated with thyroid gland invasion was performed.

Results: In all, 47 patients underwent total laryngectomy (40 treated with primary laryngectomy and seven treated with salvage laryngectomy following radiation failure or chemoradiation failure). Hemithyroidectomy was performed in 42 patients and the total thyroidectomy was performed in five patients. The overall frequency of invasion of the thyroid gland was 4.3%. Glandular involvement was seen in one advance transglottic squamous cell carcinoma and one subglottic. In spite of thyroid cartilage invasion in 25.5% of cases detected in the preoperative radiological imaging, only one case demonstrated microscopic thyroid gland invasion.

Conclusions: Invasion of the thyroid gland is not a general feature of advanced laryngeal carcinoma. There is no need for performing thyroidectomy in all total laryngectomy cases. The thyroidectomy may only be required during total laryngectomy for selected cases of advance transglottic tumors and tumors with subglottic extension more than10 mm.

Endoscopic technic of cartilage «slinky» myringoplasty in pediatric patients

Yuri Rusetsky, Irina Meytel
National Scientific And Practical Center Of Children's Health, Russia

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 udernlay «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 >=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 ± 5.32 dB preoperatively, 8.81 ± 3.03 dB postoperatively second month, 7.92 ± 2.55 dB postoperatively sixth month, and 7.56 ± 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 ±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.

Perceptual-auditory and acoustic characteristics of speech of individuals with dentofacial deformities

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Pontifical Catholic University of São Paulo, Brazil

Speech is one of the ways human beings use to communicate. It is a complex task and needs to be carried out in a coordinated, organized and planned manner. Some factors may impair speech, such as maxillomandibular disproportions, found in individuals with dentofacial deformities (FDD). The speech changes found in individuals with FDD are related to the production of sounds that move the lips and tongue, such as fricative sounds. For a comprehensive evaluation of these changes or modifications, perceptual-auditory analysis evaluations and acoustic analysis were used to identify and understand the speech patterns of individuals with FDD. The analysis was performed in 28 subjects aged 16 to 50 years. It was verified that there are specific characteristics in the speech of individuals with FDD, which are associated to the structural variation of the vocal tract. The details of perceptual-auditory assessment along with acoustic analysis will be shown in selected cases. Also, the results regarding the peculiar speech characteristics of these individuals with FDD.

Predictive biomarkers for treatment response in Head and Neck cancer

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Head and Neck Squamous Cell Carcinoma (HNSCC) tumors are often resistant to therapies. Therefore searching for predictive markers and new targets for treatment in clinically relevant. The aim of these studies was to evaluate the impact of hypoxia and on CSC/EMT phenotype on response to therapy of HNSCC cells. HNSCC cell lines were cultured in 2D and 3D models under normoxic (21% O2) or hypoxic (1% O2) conditions and the treatment sensitivity for radiation, cisplatin, cetuximab and dasatinib was assessed using a crystal violet assay or a MTT assay. Expression of epithelial (e.g. E-cadherin) and mesenchymal markers (e.g. N-cadherin, vimentin) and markers for CSC (Nanog, Sox) were analyzed on mRNA and protein level. In 2D, HNSCC cells became significantly more resistant to cetuximab, cisplatin and radiation as well as significantly more sensitive to dasatinib treatment under hypoxia. Hypoxia-induced EMT was attributed to HIF-1α overexpression and was observed in all analyzed cells, markedly in cell lines possessing epithelial-like phenotype. Additionally, hypoxia led to augmentation of stem cell transcription factors. In 3D, all spheroids showed an up regulation of CDH1, NANOG and SOX2 in comparison to 2D but changes in the expression of EGFR and EMT markers varied among the cell lines. Moreover, most HNSCC cells grown in 3D showed decreased sensitivity to cisplatin and cetuximab (anti-EGFR) treatment. In summary, the 2D study shows that hypoxia is a predominant cause of chemo- and radioresistance as well as EMT in HNSCC cells. When comparing our two models we found notable differences between these two cellular systems in terms of EMT-associated gene expression profile and drug response. As the 3D cell cultures imitate the in vivo behaviour of neoplastic cells within the tumor, our study suggest that 3D culture model is superior to 2D monolayers in the search for new therapeutic targets.

Clinical implications of the nasal septal deformities

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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.

Effect of adenoidectomy in children in the management of paediatric Rhinosinusitis and associated diseases

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Objectives: The effectiveness of adenoidectomy in the management of pediatric sinusitis is still a controversial issue. The size of the adenoid and associated diseases are the factors for consideration. The adenoid has been studied and is proved to be a probable source of infection for the paranasal sinus. The purpose of this study is to evaluate the efficacy of adenoidectomy in reducing the frequency of sinusitis in children.

Methods: A prospective study was done in pediatric patients with rhinosinusitis admitted in Dr.N.M.B.Baruah Nursing Home for adenoidectomy from June 2017 to June 2018. Pre-operative frequency of rhinosinusitis, underlying diseases and the diseases caused by the adenoid were recorded. The adenoid size was evaluated by lateral skull X-ray. The patients were followed after surgery and frequency of rhinosinusitis and associated diseases were compared with the pre-operative period.

Results: There were 50 patients with mean age of 5+/-2.8 years. 92%of the patients had obstructive sleep disorder and 88.2% had adenoid-nasopharyngeal ratio >0.7. There was a statistically significant reduction of episodes per year of rhinosinusitis and obstructive sleep disorder after surgery

Conclusions: Adenoidectomy was proved to be effective in the management of pediatric rhinosinusitis in this series. Adenoidectomy should be most beneficial as a surgical option before endoscopic sinus surgery (ESS), especially in younger children with obstructive symptoms.

Vocal Fold Leucoplakya : What To Do ?

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Leukoplakia of larynx has remained a debatable topic in laryngeal pathology for decades as per classification, histology and treatment is concerned. Smoking and alcohol are the major causes and there is sufficient evidence implicating gastroesophageal reflux and human papilloma virus in its pathogenesis. A wide range of therapeutic strategies are available for different grades of dysplasia. Despite this, a significant proportion of patients progress to carcinoma for which the patients with dysplasia need to be kept in regular follow-up. It is indispensable to subject leukoplakia to histopathological examination due to its nonspecific clinical polymorphism that may represent a wide range of epithelial changes in the laryngeal mucosa. It is, therefore, essential to subject these lesions to histological analysis to determine their biological nature. We discuss what to do with leukoplakias, nWe reviewed the clinical charts of 94 patients diagnosed with vocal cord leukoplakia treated in our service from January 2009 to January 2019. We discussed the histopathological diagnoses and the therapeutic approach.