



4th European Otolaryngology-ENT Surgery Conference

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3rd International Conference on **Craniofacial Surgery**

August 15-17, 2019 Rome, Italy

Scientific Tracks & Abstracts Day 1

ENT 2019 & Craniofacial Surgery 2019

SESSIONS

Head and Neck Surgery and Oncology | Oral and Maxillofacial surgery | Otolaryngology | Craniofacial surgery | Surgery For Nasal Disorders | Dentistry

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Chair: Stella Maris Cuevas, Hospital of Clinics José de San Martín, Argentina

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- Title:** Importance of tumor thickness in assessing nodal metastasis in oral cavity malignancy
Srijan Sharma, Hindu Rao Hospital, India

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Vestibular and radiological evaluation of hearing impaired children with delayed Motor development

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Background: Combined hearing and vestibular loss in children pose potentially significant problems. Children and infants with vestibular problems are faced with motor problems that could limit their normal development.

Objectives: The aim of the study is to assess the relationship between the vestibular disorders and the delayed motor development in hearing impaired children as well as to assess the integrity of the vestibular system through clinical testing and radiological imaging in those children with delayed motor development.

Methods: Thirty hearing impaired children with history of delayed motor milestones, and a control group of 10 hearing impaired children with normal motor development were included with variable degree of hearing loss. Each child was subjected to careful history taking, general examination, otoscopic examination, motor and balance questionnaires were answered by the parents or caregivers, audiological evaluation either through conditioned play audiometry or conventional audiometry, speech audiometry and Immittancemetry. Vestibular evaluation through cVEMP and caloric tests and finally the radiological studies through CT and MRI of the petrous bone.

Results: There were variable degrees of hearing loss among both groups. In the control group (10 HI children, 20 ears), 18 ears (90%) had VEMP response, while two ears (10%) had absent VEMP, while in the study group (30 HI children, 60 ears), 48 ears (80%) had VEMP response, while 12 ears (20%) had absent VEMP. All children in the control group had normal caloric response, while in the study group, 23 children (77%) had normal response, and seven children (23%) had abnormal caloric response, 4 children had bilateral weakness and 3 had unilateral weakness. CT and MRI study of petrous bone was done for the control group and revealed normal radiology, while in the study group, 21 children had normal imaging (70%) and the last 9 children (30%) had abnormal findings, the most common abnormalities was enlarged vestibular aqueduct (13%), followed by common cavity (7%).

Conclusion: Children with hearing loss, irrespective of the degree of hearing loss, the vestibular system should be screened, assessed as it may be responsible for co-morbidities in fine and gross motor difficulties. Early intervention and effective therapy will be the proper way to get good outcome.

Biography

Dr. Mohammed Elmoursy Kasem presently works at Assiut College of Medicine at Al-Azhar university, Egypt. He completed his Doctorate in Department of Audiology in Assiut University. He perform different vestibular rehabilitation exercise.

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Importance of the Correct Management of Soft and Hard Tissues Around Implants in Aesthetic Zone**Marcelo Numbela**

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In the last few years, bone and soft tissue regeneration in ORAL IMPLANTOLOGY has played a fundamental role in order to obtain satisfactory results for the patient whose demands for functional aesthetics are greater; therefore, we are required to develop more sophisticated materials and treatment protocols. My presentation will provide a clinical profile with scientific support, with the inclusion of high quality photographs and videos to deliver a clear and effective treatment protocol in vertical, horizontal, and tridimensional bone defects cases, it will show how to solve problems in specific areas of high aesthetic demands in a more didactically manner.

Biography

Oral Implantology Specialist, with numerous courses around the world in aesthetics and perio-implantology. Dr. Numbela practice his profession principally in his private clinic; is a professor in Oral Implantology at major universities of Bolivia. He is also vice president of the prestigious Bolivian Society of Oral Implantology. Program leader in Bolivia for the Linhart Continuing Dental Education Program at New York University College of Dentistry. Bolivian representative, opinion leader of the prestigious MEET group (MIS Experts Experiencie Team). From the implant line Mis Implants Tecnology LTD.

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Tubed supraclavicular flap reconstruction of total pharyngectomy defects for carcinoma hypopharynx**Sashikanth Jonnalagadda**

Fellowship in Head and Neck surgery

Consultant and Head, Department of Head and Neck Oncology and ENT

American Oncology Institute, India

Carcinoma of Hypopharynx is challenging to manage because of the delayed presentation resulting in advanced nature of the disease at the time of diagnosis. In advanced cases with T3 and T4 tumors usually require total laryngectomy and total pharyngectomy and this results a reconstruction challenge because of the circumferential nature of the defect. Traditional reconstruction has been through gastric pull but recently tubed radial forearm free flap is increasing being employed in such reconstructions. Gastric pull has significant disadvantages because of the increased morbidity, need of second surgeon and prolonged hospital stay. Free Flap need micro vascular expertise not widely available and some postradiated patients are extremely challenging because of the recipient vessel status.

Hence, we started using tubed supraclavicular flap in the reconstruction of total pharyngectomy defects and here we present our experience including the challenges encountered in 7 patients so far. 4/7 patients had post cricoid carcinoma and 3/7 had pyriform sinus carcinoma with extension to postcricoid region. 5/7 had salvage surgery following recurrence with Chemo-radiation. The indications for this type of reconstruction in our study included only circumferential defects with lower of the defect being above the thoracic inlet. Average length of defect was around 7 cms with range being 5.5 to 9 cm. Wide supraclavicular flap was harvested over the deltoid area usually from the side of the defect and tubed over a Montgomery salivary bypass tube before suturing over the defect. Complications included Pharyngo cutaneous fistula in 4 patients out of which 3 resolved with conservative treatment. We conclude that tubed supraclavicular flap is an easy less morbid alternative that should receive more attention in the reconstruction of circumferential defects which lie above the thoracic inlet.



Patient at 5 Month Post -Op



Supra Clavicular flap tubed over a Montgomery tube-Intra-OP

Biography

Dr. Sashikanth Jonnalagadda has completed M.S (ENT) from Bangalore Medical College in 2005. Later he received Clinical Fellowship training in Rhinology at Lahey clinic, Boston, Massachusetts, (USA) and Clinical fellowship in Head and Neck surgery from Southern Illinois University, Springfield, Illinois (USA). Since 2012 he is working as Consultant and Head, Department of Head and Neck Oncology and ENT in American Oncology Institute, Hyderabad, India. His interests include Thyroid and parathyroid surgeries, Reconstruction in head and neck and endoscopic skull base surgery.

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Hadad Flap and Skull base Reconstruction

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Endonasal endoscopic Approach (EEA) has revolutionized the surgical management of sinonasal and skull base pathologies. The utility of the EEA was initially limited to very small defects using multilayered free nonvascularized tissue grafts including mucoperichondrium, mucoperiosteum, fascia, fat grafts or alloderm and synthetic grafts. However EEA led to 20-30 % incidence of cerebrospinal fluid (CSF) leaks in large intradural lesions (>2 cm) beyond the confines of the sella.

The HADAD-BASSAGASTEGUY FLAP (HB flap), a pedicled, vascularized, mucosal flap of the nasal septum with mucoperichondrium and mucoperiosteum based on the nasoseptal artery was described recently. The HB flap a "Work-horse" flap for anterior skull base reconstruction is sturdy, pliable, versatile, highly vascularized with pedicled blood supply, provides an enough surface area for complete healing with decreased risk of CSF leak.

Indications of HB flaps are skull base reconstruction after endonasal surgery for congenital cysts, large multilobulated pituitary tumours, meningiomas, craniopharyngiomas, clival chordomas and larger CSF leaks (traumatic or spontaneous)

The ultimate goals are to have the stable separation between the nose and the cranial cavity, the protection of neurovascular structures, the conservation or reconstruction of cosmesis and the avoidance of dead spaces. HB flap is not a viable option for reconstruction of very large anterior fossa defects, septal tissue or sphenoid rostrum involved by malignancy and children <10 years old. Postoperative complications can be CSF leak, encephalocele formation, mucocele formation, septal perforation and meningitis. Various studies have reported post-operative CSF leak rate from 4.5% to 24% after EEA. A number of modifications of Hadad flap have been reported in literature with significant advantages.

In our retrospective review of 78 patients postoperative CSF leak was seen in 2.7–4.4% with 97 % success rate.

Conclusion- HB flap is useful, reliable, meticulous multilayered technique with a sharp decrease in the incidence of post-operative CSF leak. The current literature has focused on feasibility and immediate perioperative outcomes. However, we need larger studies with longer follow up to know the long term outcome of HB flap.

Biography

Dr. Rijuneeta Gupta currently she is a Professor in the Department of Otolaryngology and HNS, Post Graduate Institute of Medical Education and Research, Chandigarh, India.

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Role of Infrahyoid myofasciocutaneous flap in tongue reconstruction: Experience from a tertiary cancer care centre in india

Hemanth Varma, Yeshwanth Rajagopal and Vinod Prakash B
Kidwai Memorial Institute of Oncology, Bengaluru, India

The reconstruction of anterior tongue is done by a variety of techniques ranging from secondary healing to free flaps. We present a less often used technique of infrahyoid myofasciocutaneous flap for reconstructing tongue lesions. This is a simple method of reconstruction with the use of loco regional tissue not reacquiring specialized instrumentation or training. From October 2016 to February 2018, this technique was performed in nine patients of squamous cell carcinoma of tongue. In this presentation we will elaborate our experience, the advantages of using this surgical technique and the functional outcome for tongue reconstruction after ablation surgery in oral cancer.

**Recent Publications**

1. Varma H, Mohammed Z. A Rare Case of Mandibular Angioleiomyoma. Int J Oral Health Med Res 2017;4(6):98-101.

Biography

Dr. Hemanth Varma is specialized in head and neck surgical Oncology, and has experiences of oral cancer ablative and reconstructive surgery. He did his fellowship training in Head and Neck Oncology from Kidwai Memorial institute of Oncology, Bengaluru, India. Currently he is working in a newly developing Oncology unit- Homi Bhabha Cancer Hospital and Research Centre, Visakhapatnam, India.

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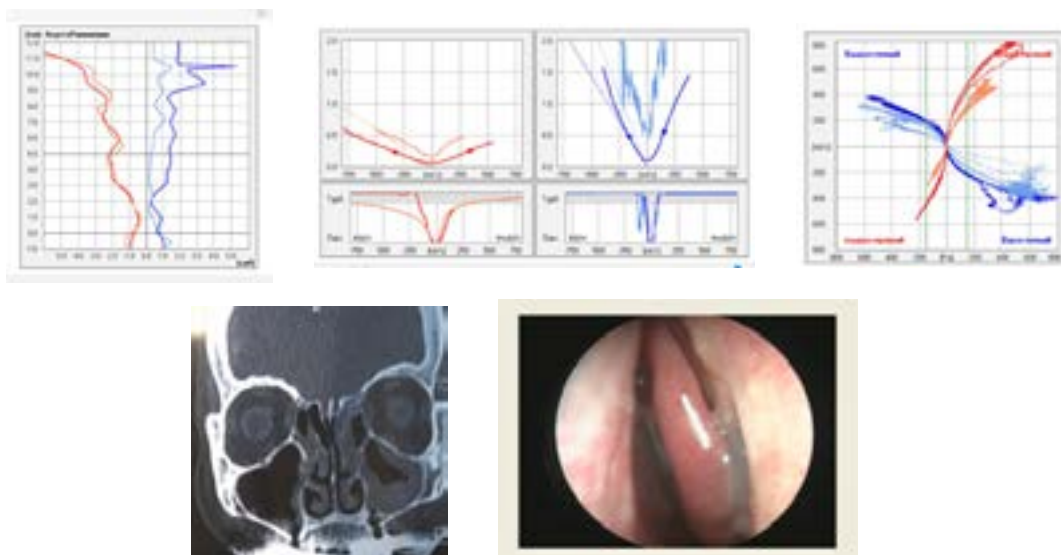
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Nasal obstruction: A modern view of the problem

Marina Budkovaia Aleksandrovn
St. Petersburg Research Institute, Russia

Nasal breathing disorder leads to the complex formation of pathological conditions and reduces significantly the quality of patients' life. Particular difficulties arise when patients' complaints of nasal breathing difficulty do not correspond with the results of rhinoscopic picture of the nasal cavity, as well as when patient is dissatisfied with the results of surgical treatment in relation to the restoration of respiratory function of the nose. In order to solve this problem, we conducted an objective diagnosis of nasal breathing disorders with the calculation of the main aerodynamic parameters of the nasal flow and a differential analysis of the causes of nasal obstruction formation, followed by a comparison of the identified changes to the results of multispiral computed tomography(CT) of the paranasal sinuses and nasal endoscopy examination of the nasal cavity and motor activity evaluation of the nasal cavity shimmering epithelium. This diagnostic complex is used in the examination of patients with subjective nasal breathing disorders before the planned surgical treatment and in long term after surgical correction of the external nose, intra-nasal structures and in the selection of patients with allergic rhinitis for allergic - specific immunotherapy. Simultaneous analysis of the parameters of anterior active rhinomanometry (AARM), rhinoresistometry and acoustic rhinometry before and after the test with decongestant allows to identify objectively or exclude the presence of nasal obstruction, to differentiate the causes of nasal breathing disorders into functional, structural and combined. The registered changes in the proposed method are compared with the results of nasal endoscopy and CT of the sinuses of the nose and are used to determine conservative or surgical management of patients to achieve good functional result and objective control of the effectiveness of nasal breathing restoration.



4. 5. Fig. A: The results of an objective study in a patient with mixed structural-functional component: 1.- AARM; 2.- resistometry,3.- acoustic rhinometry. 4.- CT scan,5.- nasal endoscopy.

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Recent Publications

1. Budkovaia MA, Artemeva ES. Objective assessment of the function of nasal breathing in patients after rhinosurgical interventions // Russian otorhinolaryngology. 2018;1(92):25-34. http://entru.org/files/j_rus_LOR_1_2018_uv.pdf
2. Budkovaia MA, The Place of topical corticosteroids in the treatment of allergic rhinitis/ Medical advice. 2018. No. 8. P. 72-76.
3. Budkovaia M. A., Artemieva E. S. Peculiarities of nasal breathing in patients with nasal obstruction // Russian otorhinolaryngology. - 2019.
4. Budkovaia MA, Rebrova AS, Artemieva ES. Clinical aspects of the comprehensive evaluation of disorders of nasal breathing/II all-Russian Congress of the National medical Association of ENT. Russia .21-23 November 2018, Sochi: p.30-31.
5. Ryazantsev SV, Budkovaia M.A, Current view of the treatment of chronic rhinosinusitis with nasal polyps// Russian rhinology. - 2017. - Vol. 25. - № 1. - P. 54-59.

Biography

Dr. Marina Budkovaia Aleksandrovna is specialized in otorhinolaryngology. She deals with the diagnosis, conservative and surgical treatment of patients with pathology of the upper respiratory tract. She is now working in the department of development and implementation of high-tech methods of treatment of the St. Petersburg Research Institute of Ear, Throat and Speech.

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Association between vocal symptoms reported with video laryngoscopy in teachers of basic educationAlessandra Regina Brito¹, Celmo Celeno Porto², Neuza Josina Sales³, Ikaro Daniel de Carvalho Barreto⁴, Pedro Ivo Machado P. de Araújo⁵¹Federal University of Goiás, Brazil

Objective: To characterize the sociodemographic profile of Basic Education teachers and analyze associations between vocal symptoms reported in perception protocols with videolaryngoscopy. **Methods:** A descriptive, cross-sectional study with 107 female teachers, aged 40-49 years, working in seven public schools in Goiânia, Goiás, Brazil. The interviews were applied to sociodemographic aspects, perception protocols through the Voice Disorder Screening Index, Participation in Voice Profile and Activities, and videolaryngoscopy exam. **Results:** The calculation of the sample was performed by descriptive analysis, bivariate and odds ratio. In the sample 72 (67%) of the teachers were elementary school teachers, 23 (21%) Infant and Child Education, 12 (11%) in Special Education. 33 (31%) described working time between 1-10 years, 46 (43%) between 11-20 years and 28 (26%) between 20 years. For the shift, 56 (52%) worked in one period, 46 (43%) in both periods and 5 (5%) in three periods. The prevalence of female teachers with vocal symptoms reported 82 (77%) and laryngeal changes for videolaryngoscopy 44 (41%). There was a significant difference between the symptoms of hoarseness ($p = 0.005$), loss of voice ($p = 0.042$) and breakdown of voice ($p = 0.002$) in relation to videolaryngoscopy. Vocal fatigue was the symptom most reported by female teachers, with 21%. There was no significant association between sociodemographic data and laryngeal changes. **Conclusion:** There was a significant association between hoarseness with vocal symptoms, loss of voice, and break or failure of voice, referred by female teachers with laryngeal alterations associated with videolaryngoscopy. The study showed female teachers with associations between vocal symptoms reported in the protocols and changes in videolaryngoscopy, female teachers with vocal symptoms reported in the protocols, without changes in the videolaryngoscopy tests, as well as female teachers without vocal symptoms, but with changes in the videolaryngoscopy tests. The clinic is important at all times for an interdisciplinary treatment.

Biography

Dr. Alessandra Regina Brito done her Master in Environmental Sciences and Health (PUC / 2007), PhD in Health Sciences (FM / UFG / 2015). Specialist in the areas of Orofacial Motricity, Voice, Family Health Strategy (NASF), Collective Health and Labor Speech-Language Pathology. Postgraduate teaching: Teaching and Research Methodology (CEPAE / UFG), Epidemiology (IPTSP / UFG), Worker's Health (FEN / UFG) and Mental Health (FEN / UFG). (IPTSP / UFG / 2011), Technical Course on Multi-Media Didactics (IFG / 2013), Phonoaudiology Graduation (PUC / 2013-2015) and coordination in Collective Health (PUC), (IPTSP / UFG), Health of the Worker (FEN / UFG) and Health Situation Analysis (IPTSP / UFG), researcher in the Health Sciences graduate program (FM / UFG). Lines of research: Public Health, Epidemiology, Voice, Worker's Health, Collective Health, Speech-Language Pathology, Education, Communication and Distance Education. (ADHOC / CEP / Goiânia Emergency Hospital / SES 2009), Speech Therapist of the Reference Center on Occupational Health (CEREST / SMS / 2006-2012), Volunteer at Hospital das Clínicas (UFG- 2015 -2017), Head and Neck and Otolaryngology outpatient clinic. Clinical speech therapist and Director in Vocare Speech Therapy, with advice and advice in Human Communication.

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A rare case of Camel bite to the face resulting in injuries to parotid duct facial nerve, and globe

Mohamed A. Al-Ali, Korana Balac, Tahra AlMahmoud and Fikri Abu-Zidan
UAE University, UAE

Introduction: Camel bites are relatively uncommon. They are more common during the rutting season where male camels become more aggressive. Hereby we report a unique case of a 25-year-old man who was repeatedly bitten to his face and neck by an aggressive camel that resulted in left eye evisceration, parotid duct injury, and facial nerve injury.

Presentation of case: A 25-year-old male camel caregiver presented with history of camel bite to the left side of his head and neck. There were multiple laceration wounds on the left side of his face and neck. Maxillofacial CT showed a fracture of the medial orbital wall with sagging of medial rectus muscle into the fracture space, medial rectus muscle hematoma, fracture of lacrimal bone and displacement of piece of it into the orbit, left preseptal hematoma, complete opacification of left intraocular content (hemorrhage), crystalline lens was not identified, and the eye appeared as one chamber with loss of the eyewall integrity. He underwent an emergency wound exploration and debridement. There was a massive corneal laceration with expulsion of the eye content. Salvaging the left eye was not possible, and evisceration of the eye was performed. The left cheek wound site revealed macerated muscle with a partially transected Parotid duct which was approximated. On a postoperative day 6, the patient developed a small left-sided salivary fistula. This was managed with Hyoscine tablets, transdermal scopolamine, and pressure dressing. The patient was discharged home on day 9 in a good general condition. A follow up at one month showed a satisfactory scar, completely healed salivary fistula, and a residual weak upper lip function.

Conclusion: Camel bite injuries to the face may result in serious long-term sequelae. Extreme care should be taken when dealing with camels, especially during the rutting season. The details of the case and management of parotid duct injury will be discussed.

Recent Publications

1. Al-Ali MA, Hefny AF, Abu-Zidan FM. Head, face and neck camel-related injuries: Biomechanics and severity. *Injury*. 2019 Jan;50(1):210-214. doi:10.1016/j.injury.2018.11.029.
2. Al-Ali MA, Hefny AF, Idris KM, Abu-Zidan FM. Cervical necrotizing fasciitis: an overlooked diagnosis of a fatal disease. *Acta Otolaryngol*. 2018 Apr;138(4):411-414. doi: 10.1080/00016489.2017.1393841.

Biography

Dr. Mohamed Al-Ali has completed his residency training in Otolaryngology, Head & Neck Surgery from the Sahlgrenska University Hospital, the University of Gothenburg, Sweden in 2014. He is a fellow of the European Board of Otolaryngology- Head and Neck Surgery. He works as an Assistant Professor at the department of Surgery/ Otolaryngology, College of Medicine and Health Sciences, UAE University. He is a consultant Otolaryngologist in Al Ain Hospital, Abu Dhabi, and UAE.

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Comparison of surgical tracheostomy and percutaneous dilatational tracheostomy in intensive care unit patients

Inn-chul Nam

The Catholic University of Korea, Republic of Korea

Percutaneous dilatational tracheostomy (PDT) has become an increasingly popular method of establishing an airway for patients in need of chronic ventilator assistance. The aim of this study is to assess and compare two main strategies for doing tracheostomy: traditional open surgical tracheostomy (ST) and PDT. We retrospectively reviewed medical records of 43 patients who underwent tracheostomy between the years 2016 and 2017. All patients were under intensive care unit (ICU) care and referred to the department of otolaryngology for tracheostomy. All tracheostomies were performed at the bedside using either percutaneous dilatational technique or open surgical technique by a single surgeon. In cases of PDT, either blind puncture technique without any guidance or laryngoscopy-guided puncture technique was used. Demographic and procedural variables and complications were compared between the two groups. PDT was performed in 29 patients and ST in 14 patients. Of those who underwent PDT, 15 patients received the blind puncture technique and 14 patients laryngoscopy-guided puncture technique. The cricosternal distance was longer and the amount of blood loss and duration of the procedure was lesser in the PDT group. In the PDT group, there was no difference in blood loss nor in the duration of the procedure according to the puncture technique, whereas critical complications occurred more frequently when the blind technique was used. Subjective difficulty of the procedure is predictive of complications. The study show that PDT is a useful and safe procedure for ICU patients. Also, guidance on using the flexible laryngoscopy during PDT can prevent severe complications.

Biography

Dr. Inn-chul Nam has completed his MD from The Catholic University of Korea and acquired PhD from the same institute. He is the assistant professor of The Catholic University of Korea, College of Medicine. He has been serving as the head surgeon of the division of Head and Neck Surgery, Department of ORL-HNS of Incheon St. Mary's Hospital.

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Auricular schwannoma: A case report

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University of Anbar, College of Medicine, Iraq

Schwannoma is a benign tumour of schwann cells and is seldom to be seen in the auricle. In the literature, very few cases of schwannomas originating in the pinna were reported. In this article, we described a 35-year-old female patient who presented with right painless auricular mass which was treated by excision under general anesthesia. The clinical and histopathologic features, the differential diagnosis, and the treatment of auricular schwannoma are discussed.

Key words: auricle, schwannoma, Iraq.

Introduction: Schwannomas are slowly growing benign tumour of neuro-ectodermal origin. Schwannomas are well known to arise from schwann cell of the branches of peripheral, cranial or autonomic nerves. They are usually presented as a painless solitary swelling. They are affecting the head and neck in a 25-45%, where the vestibular schwannoma is the commonest. The presentation of head and neck schwannomas depends on their location. Auricle is a rare site of affection by schwannoma (1). The first case of external ear schwannoma was reported in 1977 (2). When we were reviewing the literatures, only five cases of auricular schwannomas were reported in the world (1-5). In the present article we describe a further case of auricular schwannoma.



Figure 1: The patient with right auricular mass.



Figure 2: The excised mass contains a blood with in its cavity and has a thick wall.

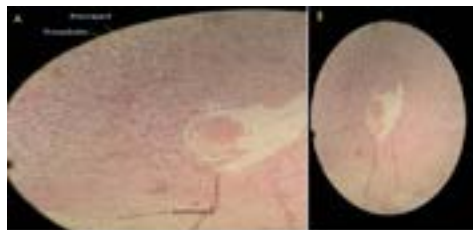


Figure 3: Microscopic section of the tumor showing areas of compact spindle cells arrayed in a palisade pattern known as Antoni type A, Antoni type B, Verocay bodies and an area of hemorrhage within a cavity. (H&E staining, A: 40× and B: 4× magnification power)

Verocay in 1908 was the first who describe the solitary schwannoma and gave it the name of neurinoma; the name schwannoma was assigned by Batsakis in 1974. Schwannoma is also known by other terms, such as neurinoma, neurilemmoma, mioschwannoma, schwannoglioma, etc (6). The first case of auricular schwannoma was reported by Fodor et al in 1977. Following this case only 4 cases were reported in the world (1-5).

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Schwannoma is a slowly growing, painless, benign, encapsulated tumour arising from schwann cell, so any nerves could be affected by this kind of tumour except the olfactory and optic nerves. Affection of the external ear by schwannoma is extremely rare (7).

The nerve supply to the auricle are derived from auriculotemporal, greater auricular, lesser occipital and partly from facial and vagus nerves (1). Owing to the location of the presenting case, the swelling may have originated from the branch of greater auricular nerve.

Due to its rarity occurrence, auricular shwannoma is rarely put in the differential diagnosis of the swelling of the pinna. The final diagnosis of the schwannoma depends on histopathological evaluation and immunohistochemical study. The treatment of choice for such tumour is by complete surgical excision. The recurrence is rare after complete surgical removal (7).

Conclusion: Despite auricular schwannoma is extremely rare tumour, it should be considered in the differential diagnosis of a benign looking swellings of the pinna.

Biography

Dr. Raid M. Al-Ani , I got MBChB from Kufa College of Medicine in 1989. He is working as a Otolaryngologist since 2000 when I achieved the Fellowship of Iraqi Board for Medical Specializations in Otolaryngology and Head and Neck Surgery. In 2015, he achieved the MRCS from Edinburgh. I got the fellowship of European board in Otolaryngology and Head and Neck Surgery in 2017. In addition to his practice as an Otolaryngologist and an instructor, he received many positions like a chief of department, Assistant Dean for Scientific affairs and Post graduate Studies and others.

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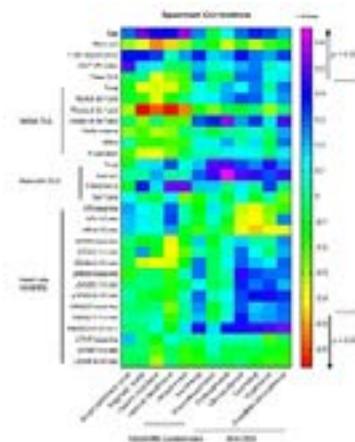
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Measurement of cognitive load and heart rate variability during a Video-Based Learning for the Acquisition of History Taking and Physical Examination Skills

Li-Ang Lee

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Video-based learning represents an effective way to reduce cognitive load (CL) when teaching a complex task. However, how best to assess the effects of different CL measures is unknown. In this preliminary study, we assessed the impact of subjective or objective CL measures on learning experiences and outcomes with a video-based learning for history taking and physical examinations. Twenty undergraduate medical students were prospectively enrolled and randomly assigned to a 360° virtual reality (VR) video group and 2-dimensional (2D) video group with different visual angles and self-determinations. Standard deviation of normal to normal R wave intervals in the 360° VR video group were significantly higher than those in the 2D video group. Difference in learning experiences and Mini-CEX scores between both groups were not statistically significant whereas global satisfaction of the 360° VR video group was significantly better than that of the 2D group. Temporal demand could independently predict overall clinical competence whereas the 360° VR video independently predicted global satisfaction in multivariate analyses. Our preliminary results suggested that subjective and objective CL measures have considerable potentials when assessing the role of CL/autonomic nervous system fluctuations in video-based learning for the acquisition of history taking and physical examination skills.



Recent Publications

1. Lee LA, Fang TJ, Li HY, Huang CG, Chen TC, Liao CT, Kang CJ, Chang KP, Yen TC. Low expression of pRB predicts disease relapse in early glottic cancer treated with transoral laser microsurgery. *Laryngoscope*. 2019 Jun;129(6):E220-E226.
2. Lu CT, Li HY, Lee GS, Huang YS, Huang CG, Chen NH, Lee LA. Snoring sound energy as a potential biomarker for disease severity and surgical response in childhood obstructive sleep apnoea: A pilot study. *Clin Otolaryngol*. 2019 Jan;44(1):47-52.

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3. Lee LA, Wang CJ, Lo YL, Huang CG, Kuo IC, Lin WN, Hsin LJ, Fang TJ, Li HY. Drug-Induced Sleep Computed Tomography-Directed Upper Airway Surgery for Obstructive Sleep Apnea: A Pilot Study. *Otolaryngol Head Neck Surg.* 2019 Jan;160(1):172-181.
4. Lee LA, Wang SL, Chao YP, Tsai MS, Hsin LJ, Kang CJ, Fu CH, Chao WC, Huang CG, Li HY, Chuang CK. Mobile Technology in E-Learning for Undergraduate Medical Education on Emergent Otorhinolaryngology-Head and Neck Surgery Disorders: Pilot Randomized Controlled Trial. *JMIR Med Educ.* 2018 Mar 8;4(1):e8.
5. Lee LA, Chao YP, Huang CG, Fang JT, Wang SL, Chuang CK, Kang CJ, Hsin LJ, Lin WN, Fang TJ, Li HY. Cognitive Style and Mobile E-Learning in Emergent Otorhinolaryngology-Head and Neck Surgery Disorders for Millennial Undergraduate Medical Students: Randomized Controlled Trial. *J Med Internet Res.* 2018 Feb 13;20(2):e56.

Biography

Dr. Lee has completed his MD from Kaohsiung Medical University (Kaohsiung, Taiwan), residence from Linkou-Chang Gung Memorial Hospital (Taoyuan, Taiwan), and MSc (Medical Education) from Graduate Institute of Clinical Medical Science, Chang Gung University (Taoyuan, Taiwan). He is the director of Division of Laryngology, Department of ORL-HNS, Linkou-Chang Gung Memorial Hospital and professor of Faculty of Medicine, Chang Gung University (Taoyuan, Taiwan). He has published more than 97 papers in reputed journals and has been serving as member of council, International College of Surgeons, Taiwan.

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Low-Level Laser Therapy Applied to Dysphagia

Roberta Busch

Hospital Moriah, Brazil

Low-Level Laser Therapy (LLLT) has been used in the speech-language clinic as an additional resource to aid the therapeutic results. This technology uses a non-ionizing wavelength that does not cause harm to cells but stimulates them when light is absorbed by chromophores in mitochondria, regulating the cellular metabolism. The low-level laser device red light is used on superficial tissues and the infrared light on the deep ones, such as muscles and nerves. The cells which are in oxidative stress, when absorb the light, increase the production of adenosine triphosphate (ATP), promoting the muscular activation, reducing the fatigue, the production of free radicals, inflammatory processes and edema. The laser stimulates the cell's metabolism regulation and associated with conventional therapy can improve muscles performance and regulate functions that are at risk. Thus, when applied on the muscles that participate in swallowing, can improve the lip seal, antero-posterior movement of tongue, elevation of the larynx and glottic closure, reducing the risk of tracheal aspiration, specially when associated with muscular exercises. When applied on the salivary glands, may reduce or increase saliva production, depending on the dosage applied. The red laser also can be used on radial artery - Intravascular laser irradiation of blood modified or transdermic (ILIB), as it has been adapted in Brazil, favors the increase of blood flow, resulting in an improvement of alertness level, the capacity to eliminate secretions and increase voluntary swallow frequency. Three clinical cases will be presented, demonstrating the application of the laser associated with the exercise to orofacial myofunctional, to reduce saliva therapy and increase

Biography

Dr. Roberta Busch is a Speech Therapist and Master in Neurosciences and presently she is working as a Speech Pathologist in Moriah Hospital and IGESP Hospital and she is an active Founding partner of CAAD - Advanced Care Center in Dysphagia, São Paulo, Brazil. She has an experience as a graduate and post-graduation teacher and also work as clinical therapist on dysphagia of adults patients which neurological disease.

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Surgical treatment of 200 patients with oral & maxillofacial cancer with neck dissection

Sabah Abdulaziz Issa

Ghazi Alhariri Hospital, Iraq

Background: Oral cancer represent 3-5% of all body cancer, while Squamous cell carcinoma represent 90% of oral cancer. Its disease of elderly people affect mainly age between 60-70 years. Diagnosis depend on their clinical examination, investigations & proved by incisional biopsy to arrange their TNM system. The treatment was resection of primary site with different types of neck dissection.

Patients and methods: This study includes 200 patients with oral cancer (96 females & 104 males). Age range between 20-90 years, were treated with primary site resection and different types of neck dissection. All patients treated in maxillofacial department in Ghazi alhariri hospital-medical city-baghdad-Iraq. Surgery done by consultant maxillofacial surgeon (dr. Sabah Abdulaziz Issa). The primary sites mainly affect tongue, mandibular alveolus, maxillary alveolus, cheek, floor of mouth, lower lip, parotid gland, submandibular gland, oral commissure & upper lip in sequence. While neck treatment with selective neck dissection, classical n. dissection & functional n. dissection in sequence.

Results: The main age group affected was between 61-70 y. (55 patients) followed by age group between 51-60 y. (40 patients). Regarding primary site tumor size, 77 patients with T4, 70 patients with T3, 52 patients with T2 & only 5 patients with T1. Regarding sites, tongue was 30% and the least site was upper lip was 1%. About types of oral cancer, sq.c.c. (155 patients) followed by mucoepidermoid carcinoma (19 patients) & the least type was duct cell carcinoma (1 patient). Regarding lymph nodes metastasis of the neck 80 patients with N1, 54 patients with N2, 53 patients with N0 & 13 patients with N3. About the surgical treatment of neck 70% treated with selective n. dissection, 24% treated with classical n. dissection & only 6% treated with functional n. dissection. Regarding the sides of n. dissection were 106 left side & 107 right side with 187 patients with unilateral n. dissection & 13 patients with bilateral n. dissection.

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E-BABE-The use of free flaps in children with head and neck tumors – 33 clinical cases.**Grachev N.S., Vorozhtsov I.N and Babaskina N.V.**

D. Rogachev National Research Center of Pediatric Hematology, Oncology, and Immunology, Moscow

Experience of 33 surgical operations with free-flap microsurgical reconstructions in children between 4 and 18 years with head and neck malignant and benign tumors was obtained in department of pediatric surgery and oncology in D. Rogachev National Research Center of Pediatric Hematology, Oncology, and Immunology in 2015-2019 years.

33 surgical operations were performed in patients with benign (17) or malignant (16) tumors of upper (8), lower (23) jaws or temporal soft tissues (2) with simultaneous (28) or delayed (5) reconstruction with fibula (27) or iliac crest (4) osteomuscular or soft-tissue radial (2) free flaps. Operations were planned using 3D-modeling with building stereolithographic models and resection limiters, fixing orthodontic devices were used to save occlusion in most cases of jaw resections. Also in all cases intact nerves (especially facial nerve with branches) and main vessels were preserved using microsurgical techniques.

In all cases the anastomoses were functional, the flaps were viable, good aesthetic and functional results were achieved. Stage-by-stage rehabilitation treatment of patients after reconstruction of the upper and lower jaws includes teeth implantation at the age of 14-18 after bone consolidation and recurrence-free period. On current in 3 cases dental implants with dental prosthetics were installed.

The use of free flaps in children with head and neck tumours seems appropriate and feasible since it makes it possible to close extensive mixed defects of head and neck contributing to the rapid rehabilitation and social adaptation of patients, which is especially important during the growth period of patients.

Biography

Grachev Nikolai Sergeevich has completed his PhD at the age of 35 from D. Rogachev National Research Center for Pediatric Hematology, Oncology and Immunology. He is the head of the Head and Neck Surgery department with reconstructive plastic surgery of this center. He has published over 35 articles in reputed journals and is a member of the editorial board of 2 Russian journals.

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Importance of tumor thickness in assessing Nodal Metastasis in oral cavity malignancy

Srijan Sharma

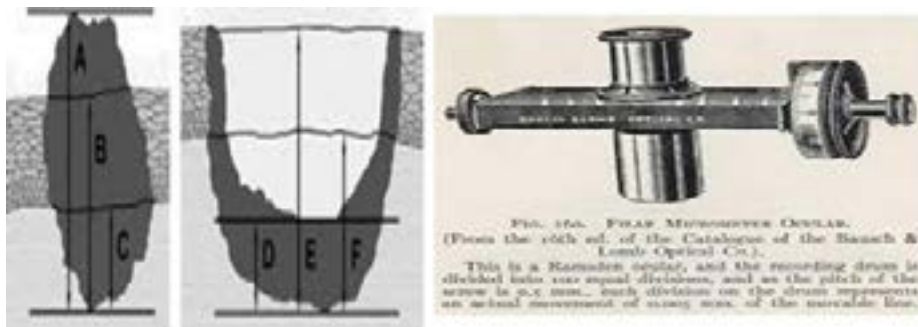
Hindu Rao Hospital, India

Squamous cell carcinoma of oral cavity is the sixth leading cause of cancer worldwide¹. It accounts for 0.6% to 5 % of all cancers in Europe, United States, and Australia , respectively, but up to 45% of cancers in India².

A major determinant of the prognosis of oral carcinoma is the risk of cervical lymph node metastasis. Advanced oral tumours most often exhibit clinically evident cervical lymph nodes but studies have shown that the incidence of occult neck node metastasis in stage disease can be as high as 42%. The presence of metastasis to cervical lymph nodes can reduce the cure rate by 50%.

An observational, descriptive study was conducted over a period of 12 months in rural India comprising of 81 patients with clinical diagnosis of oral cavity malignancy to identify the optimal tumor thickness and depth of invasion cut off point for prompting prophylactic neck management.

Based upon our study tumor thickness of 10 mm (p value = 0.004) and depth of invasion 7 mm (p value = 0.024) were found to be statistically significant in determining presence of nodal metastasis in oral cavity malignancy.

**Recent Publications**

1. KS Burse, S Sharma, C Bharadwaj, SV Kulkarni. Primary tuberculous otitis Media: A Case Report. IOSR Journal of Dental and Medical Sciences 2017; 16, (2) Ver. VII: 48-51.

Biography

Dr. Srijan Sharma is an ENT surgeon, completed his DLO and DNB degrees from 2 different medical colleges. After his post graduation, he has worked in BARC Hospital , where he was involved in teaching post graduate student. Currently, working in North Delhi Municipal Corporation Medical College, where he is involved in teaching undergraduate students.

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Scientific Tracks & Abstracts Day 2

ENT 2019 & Craniofacial Surgery 2019

SESSIONS

Otology | Cleft-Lip and Palate Repair | Rhinology | Autogenous Bone Grafting for Orbital Floor Fracture | Hearing Impairment and Deafness Causes | Craniofacial Congenital Syndromes

Chair: Vik Veer, Royal National Throat Nose & Ear Hospital, UK

Chair: Debashis Acharya, Primary Health Care Corporation(PHCC), Qatar

SESSION INTRODUCTION

- Title:** Neuromuscular electrical stimulation in Obstructive Sleep Apnea Syndrome (OSAS)
Ana Paula Lefèvre M, ENSI - National School of Integrated Health, Brazil
- Title:** The Importance of Ethical Selling of Hearing Aid Solutions
Oliver F. von Borstel, Masters of Business Development, Netherlands
- Title:** Selective osteogenesis distraction at the level of mandibular body in patients with facial asymmetry and dento-alveolar discrepancy
María del Carmen Navas-Aparicio, Hospital Nacional de Niños, Costa Rica
- Title:** Impact on quality of life among older adults with tinnitus in Indian context
Manisha Choudhury, Amity University, India
- Title:** Surgical interventions performed among patients with anaplastic thyroid carcinoma
Carlo Victorio Garcia, Phillipine General Hospital, Philippines
- Title:** The impact of gastroesophageal reflux on breastfeeding and the development of oral functions
Roseane Rebelo S. Meira, University of Campinas, Brazil
- Title:** Oromyofunctional management of allergic patient after adenoidectomy
Taísa Giannecchini, University of São Paulo, Brazil
- Title:** Is there a reasonable body of evidence to discard mandatory brain imaging in acute mastoiditis? A Meta-analysis
Nir Avrameto, Bnai-Zion Medical Center, Israel
- Title:** Non-allergic rhinitis: Misdiagnosing a common disease. Classification, Diagnosis, Treatment
Michail G. Tzanakakis, University of Crete, Greece
- Title:** The small triangular flap and lip adhesion as adjunctive management of unilateral complete cleft lip
Park Daehwan, Catholic University of Daegu, South Korea
- Title:** Vestibular profile in auditory neuropathy spectrum disorder
Tejaswini Patel, Narayana Health City, India.
- Title:** Low Level Laser Therapy and Neuromuscular Electrical Stimulation in ENT Rehabilitation: New therapeutic resource
Andrea Signoretti, University Center São Camilo, Brazil
- Title:** A Laser-Patterned Microcoagulation (LPM) Technology: Clinical study of gingiva regeneration in implantation zone
Ekaterina A Zernitckaia, St. Petersburg State Medical University, Russia
- Title:** The Effect of Radiofrequency ablation and Mitomycin C in the surgical management of Human tympanostomy, could it be the end of the Grommet era?
Shaimah Najmussaquib, Taiba Hospital, Kuwait

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Neuromuscular electrical stimulation in Obstructive Sleep Apnea Syndrome (OSAS)

Ana Paula Lefèvre M

National School of Integrated Health, Brazil

Obstructive sleep apnea syndrome (OSAS) is characterized by repetitive episodes of upper airway occlusion during sleep associated with sleep fragmentation and daytime hypersomnolence. It's well established that the most effective treatment for OSAS is continuous positive airway pressure (CPAP) but adherence is limited. However, new and promising therapeutic modalities have been used to improve the management of swallowing, voice and orofacial myofunctional conditions. One of them is the neuromuscular electrical stimulation (NMES) used to promote sensory and excitatory stimuli that facilitate strength gain and endurance of musculature and improve orofacial functions as well.

Based on studies of other specialties and on our clinical experience, we perform a therapy using intraoral neuromuscular electrical stimulation at a sensory and excitatory level with the FORMA® extensors on the soft palate, lateral pharyngeal wall, lips, tongue (lateral/lower side) and cheeks; myofunctional oral and oropharyngeal exercises are associated. Noticeable improvement on the Mallampati score, sleep questionnaires (Epworth and Pittsburg), polysomnography data and snoring measures were achieved as result.

Details of two OSAS cases will be shown demonstrating the technique including parameters of electrical stimulation used. The combined use of NMES, and "conventional" therapy techniques was effective to reduce the symptoms of sleep apnea and offer stronger patients adherence.



Biography

Dr. Ana Paula Lefèvre M. - Speech Therapist; Master in Health Sciences; PhD in Public Health Coordinator of the Epidemiology Committee of the *Sociedade Brasileira de Fonoaudiologia* Founding partner of ENSI - National School of Integrated Health, São Paulo, Brazil Experience as a graduate and post-graduation teacher; also work as clinical therapist on orofacial and myofunctional disorders and neurological rehabilitation. Currently coordinates the Training course in Electrical Stimulation applied to the Speech and Hearing Clinic

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The importance of ethical selling of hearing aid solutions

Oliver F. von Borstel

Masters of Business Development, Netherlands

Main subject of presentation: Many in the audiology and/or dispenser industry of Hearing Solutions apply rather 'product' or brand selling methods than putting individual the focus on patients real needs. This ends often in a dissatisfying situation for the patient and/or his/her spouse of family member.

Needs of a patient are not only to 'amplify' sound but, even more important, to help the patient and his/her spouse to an improved quality of life.

Goal of the presentation: The primary purpose of this presentation is to inspire and motivate participants how important the moral and ethical aspects are when selling Hearing Aid Solutions to those who are in dear needs of an improvement: patient, spouse and/or other family members of the patient. The impact the Hearing Aid Solution has or might have for all involved when it comes to health-able features (such as activity monitoring, fall detection etc.).

Participants learn how important it is that audiology specialists put their focus rather on the improvement of ones life quality rather than on amplifying technics, and, what their responsible role is when it comes to advise a patient of the individual best and most optimal Hearing Aid Solution.

Research methods involved studying specific literature and the own experience of Oliver F. von Borstel since 2006 while personal coaching ca. 500 audiologists/HIS (hearing aid specialists) on the job in Europe.

Biography

Oliver F. von Borstel lives in Netherlands. He is born in 1956 and he is a CEO of different high-tech companies in Europe until 2005. Since 2006 the owner of Masters of Business Development BV, Amsterdam/Schiphol Airport. Specialized in helping audiologists/HIS improving their business. And His company has subsidiaries/affiliates in Switzerland, USA and Australia

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Selective osteogenesis distraction at the level of mandibular body in patients with facial asymmetry and dento-alveolar discrepancy**María del Carmen Navas-Aparicio**

Hospital Nacional de Niños, Costa Rica

Osteogenesis distraction is a surgical procedure that allows the correction of the bone deficiency in all craniofacial areas, since it is a versatile alternative that can be adjusted to the patient's need. Cases of children with bone deficiency at the level of mandibular body who underwent surgery based on selective osteogenesis distraction will be presented, in order to achieve facial symmetry and new bone to favour tooth eruption and alignment, in order to improve the quality of life.

It is important to know, that today osteogenesis distraction is a treatment option, either as an intermediate or final procedure, in those cases in which there is a bone deficiency in a growing child, which implies that the analysis of the case and the surgical plan are important, to obtain the best results for the patient.

Biography

Dr. María del Carmen Navas-Aparicio is a Head of Cleft-Lip and Palate and Craniomaxillofacial Unit, at Hospital Nacional de Niños, San José, Costa Rica and is a Professor at the Universidad de Costa Rica. She is Specialist in Oral Surgery, carried out in "Klinikum an der Christian-Albrechts-Universität zu Kiel" and in "Marienhospital Stuttgart, Akademisches Lehrkrankenhaus der Universität Tübingen", Germany. This title is validated as maxillofacial surgeon in Costa Rica. She has a Master's Degree in Pediatric Dentistry, Universidad Complutense de Madrid, Spain. She is a researcher at the Universidad de Costa Rica and Hospital Nacional de Niños, Costa Rica. She is a speaker at national and international congress and she has publications in national and international journals.

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Impact on quality of life among older adults with Tinnitus in Indian context

Manisha Choudhury

Assistant Professor, Amity University Haryana (India)

Determine the impact of tinnitus and its impact on the quality of life (QoL) among elderly subjects (≥ 65 years) with subjective tinnitus. Regarding Epidemiology of Hearing Loss Study, self-reported data on tinnitus and quality of life were assessed and obtained by interview at the first follow-up examination (1998–2000; N = 2800; ages 53–97 years). The Medical Outcomes Study Short Form Health Survey (SF-36) was used to assess quality of life. Results reveal that scores decreased (worsened) as the severity of tinnitus increased (None, Mild, Moderate, Severe) for the parameters like Bodily Pain, Physical, Vitality, and Mental Health domains, and the Physical Component Summary scale (F-tests for linear trend, $p < .05$). On the other hand scores were better for those individuals who first reported tinnitus at the initial stage of follow-up (five-year incidence of tinnitus) compared to those who reported tinnitus at the baseline and follow-up examinations (prevalent tinnitus). This study indicates clear associations between tinnitus and reduced quality of life in this large cohort of older adults.

Key words: Hearing Disorders, Tinnitus, QoL

Recent Publications

1. Choudhury M, Sanju Himanshu et al : Self-reported satisfaction with digital hearing aids among older adults in Indian context. . Indi. J of Anatomy & Surg of Head, Neck & Brain 3(4) .2018
2. Choudhury M, Sanju Himanshu. et al: Effect of Stuttering Intervention on Depression, Stress and Anxiety among individuals with Stuttering: Case Study. J Speech Pathol Ther 3:1,2018 DOI: 10.4172/2472-5005.1000132.
3. Choudhury M, Sanju Himanshu et al : Perception of Sentences in Noise using Different Numbers of Channels in simulated Cochlear Implant Users. J. Otolaryngol ENT, 8(4). 2017
4. Choudhury M, Sanju Himanshu : Central Auditory Processing Disorder (CAPD) in school going children. Otolaryngol Open J.,2017,DOI: <http://dx.doi.org/10.17140/OTLOJ-SE-7-104>.
5. Sanju, H. K., & Choudhury, M. Neo-natal hearing Screening should be mandatory medical regime in INDIA. Indi. J of Anatomy & Surg of Head, Neck & Brain 3(4) .2017

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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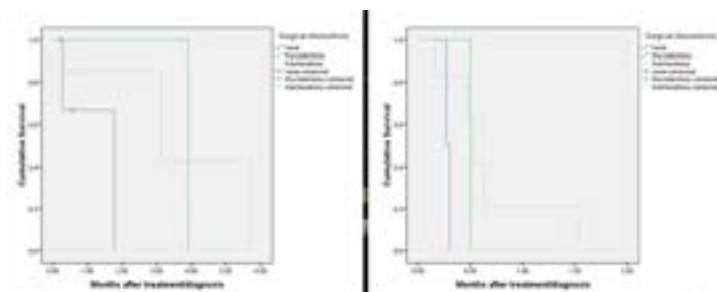
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Surgical interventions performed among patients with anaplastic thyroid carcinoma

Carlo Victorio Garcia, Arsenio Claro Cabungcal and Alfredo Quintin Pontejos
Philippine General Hospital, Philippines

Anaplastic thyroid carcinoma (ATC) has one of the most dismal prognoses for any malignancy. Attempts at surgical clearance can be frustrating for both patient and surgeon and is generally only advocated for early stage disease. For advanced cases, palliation and improved survival (however short) is the norm. In this paper, we attempted to analyze the survival benefit of surgical interventions, namely tracheostomy and thyroidectomy, performed on ATC patients admitted in a tertiary government hospital. A 5-year retrospective chart review of 22 patients was done. Patients discharged alive as of the time of last chart entry were followed up via phone interview or personal visit. Patients who cannot be reached were censored in the analysis. Overall survival was 1111111111 the main outcome measure which was plotted as Kaplan-Meier estimates and compared via log-rank test. The incidence of complications surrounding the two procedures were also noted. In this study, all patients presented with either stage IVB or stage IVC disease. A significant difference in survival curves were noted when comparing between stages ($p < 0.05$). Subgroup analysis per stage, however, revealed no significant difference in overall survival when comparing patients who did not undergo surgery, those who underwent tracheostomy or those who underwent thyroidectomy for both IVB ($p = 0.244$) or IVC ($p = 0.165$) disease. The incidence of complications for tracheostomy was 60%, the most common being mucus plugging. One patient succumbed to respiratory failure after accidental decannulation. For thyroidectomy, the incidence of complications was 80% with hypocalcemia being the most common.

**Biography**

Dr. Carlo Victorio Garcia is an otorhinolaryngology resident and he is presently working at University of the Philippines-Philippine General Hospital, Philippines.

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The impact of Gastroesophageal reflux on breastfeeding and the development of oral functions

Roseane Rebelo S. Meira

Philippine General Hospital, Philippines

The Gastroesophageal reflux (GER) or the gastroesophageal reflux disease (GERD), whether primary or secondary to some pathology, act on the larynx esophageal area, causing inflammations and irritability on the baby. As a consequence, there is a significant alteration on the sensibility of the pharyngeal larynx region (Suskind, 2006) and intraoral hypersensitivity (Meira, 2017), which may result in dysfunction on swallowing and disorders of suction force, compromising the effectiveness of breastfeeding. Since there is an alteration on the sensibility of the oropharyngeal musculature, it is possible to observe early weaning or the impairment of the beginning of breastfeeding, difficulty in weight gain, difficulties in feeding introduction, food refusal behavior and/or food selectivity, difficulties in the development of the chewing function, disorders in facial skull development and disorders in nasal respiratory function. Speech therapy can rapidly work on this sensitivity, allowing the adequacy of oral functions. In some cases, when there is no positive therapeutic response, the speech therapy work can become an important tool for diagnosing diseases such as GERD, food allergies, eosinophilic esophagitis (EoE), etc.



Recent Publications

1. Meira, RRS, Speechtherapist: when to indicate?. Coordinators: Chiba, SM, Alvarez, AE, Bolonetti, LSM. in Pediatrician pneumology, Atheneu, RJ, 33: 367-372, 2019.
2. Meira, RRS, Nakamura, C, Gonçalves, PMP, Monteiro, P, Prematurity and the speech therapy work, to be published in june/2019.
3. Meira, RRS, Gonçalves, PMP, Maunsell, R, Favaro, MMA. Laryngomalacea and Babies Swallowing Disorders. <https://www.brasfono2018.com.br/wp-content/uploads/2018/100/sessaodeposterres/335.pdf>
4. Meira, RRS, Marciano, DMF, Consequences of the GER and APLV on Pediatric and Speechtherapy Clinic. A case report. Published in V International Neonatology Congress. 2018.
5. Meira, RRS, Puccinni, F, Suction Pattern and the nipple confusion. file:///C:/Users/Roseane/Downloads/Anais-Confus%C3%A3o%20de%20bicos.pdf

Biography

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

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Oromyofunctional management of allergic patient after Adenoidectomy

Taisa Giannecchini

University of São Paulo, Brazil

In the speech-language clinic, respiratory disorders are frequent and involve a large number of school-aged patients. Oromyofunctional therapy is constantly preparing to deal with the consequences of allergic crises, seeking the appropriateness of breathing and other oral functions. The objective of the present study was to demonstrate the effectiveness of speech and language therapy in a case of allergic patients, as well as the importance of early intervention. Method: This study was submitted to the Research Ethics Committee, the person responsible signed the Free and Informed Consent Form and the child signed the Term of Assent. A bibliographic survey of the national scientific literature was published in PubMed, with articles published between 2005 and 2017, on speech-language pathology in this area, in order to prepare the appropriate therapy. For the patient, the diagnosis of Infections of the upper airways defined the prognosis, being considered a limit imposed by the respiratory pathology and the discussion with the multidisciplinary team defined the conduct to be taken by priorities: treatment with the otorhinolaryngologist, speech pathologist and physiotherapist. The 5-year-old child with diagnosis of allergic rhinitis and severe myofunctional orofacial and cervical dysfunction was submitted to 12 oromyofunctional work sessions with emphasis on nasal aeration work among allergic crises in order to achieve improvement in patient responsiveness treatment. As results, the patient presented increased immunity and longer interval between seizures. Stimulation of nasal breathing between crises helps prevent inflammation secondary to allergies, improving the patient's prognosis.

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1. Giannecchini T. Speech Motor Control: stimulation of non-verbal Praxis to phonemes placement. I Archives of Otorhinol. 2014;18(1):118.
2. Giannecchini T, Padovani M. Verbal Praxis in adults: speech in excellence. I Archives of Otorhinol. August 2015:116-7.

Biography

Dr. Taisa Giannecchini is a Clinical Speech-Language Pathologist, PhD in Speech-Language Pathology and Audiology, PhD in Speech-Language Pathology - Speech Disorders - University of São Paulo, Campus Bauri, and expert in Language by the Federal Council of Speech Therapy - Brazil, professor of improvement and specialization courses in several centers in Brazil and Portugal.

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Is there a reasonable body of evidence to discard mandatory brain imaging in acute mastoiditis ? A meta analysis

Nir Avrameto^{1,2}, Riad Khnifles^{1,2}, Lena Koren¹, Noam Yehudai^{1,2}, Roni Barzilai², Tamer Mansour^{1,2}, Michal Luntz^{1,2}¹Ear and Hearing Program, Department of Otolaryngology-Head & Neck Surgery, Bnai-Zion Medical Center.²Technion-Bruce Rappaport Faculty of Medicine, Haifa, Israel.

Introduction: Acute mastoiditis (AM) related intra-cranial complications (ICC) are prevalent and should be diagnosed and treated promptly. Infectious ICC are diagnosed using brain imaging and may be missed without it. Nevertheless most clinicians base their decision to perform brain imaging on clinical suspicion only. The aim of the study was to determine whether there is an association between rate of imaging performance and the diagnosis of ICC in AM.

Methods: Google scholar, PubMed, Medline, EMBASE, Web of science and Cochrane websites were searched from 1992 to 2017 (last search conducted on November 2017) using the key words: acute mastoiditis, otomastoiditis, imaging and intracranial complications in English only with no restrictions regarding age of patients.

Results: The database search yielded 1071 studies. 40 studies were found to be suitable for the meta-analysis. The rates of ICC were found to be significantly higher in centers where brain imaging was mandatory done, as compared to centers where brain imaging was performed 'as needed', based on clinical presentation. A typical clinical combination on which centers based their indication for imaging in AM patients was hard to elucidate.

Conclusions: Available publications (up to 2017) do not offer high grade clinical evidence based measures for defining the AM patient who is at a high risk for developing ICC. ICC are under-diagnosed in centers where brain imaging is performed in the minority (<50%) of AM patients, based on ad hoc clinical judgment only.

Biography

Dr.Nir Avrameto is 4th year Resident physician at Bnai-Zion Medical center in Haifa - Israel. Department of Otorhinolaryngology Head and Neck Surgery, affiliated with The Ruth and Bruce Rappaport Faculty of Medicine at the Technion (Israel Institute of Technology) Clinical tutor of medical students at their rotations in ENT. Graduated medical school from Sapienza university of Rome, La Facoltà di Medicina e chirurgia at 2013. Achieved his medical license in Italy at 2014 and in Israel at 2015. 2014 – Internship at Policlinico Umberto I hospital of Rome affiliated to the Faculty of Medicine and Surgery at the Sapienza Università di Roma, Italy. 2015 - Internship with elective rotation in Neurosurgery department at Rambam medical center in Haifa, Israel

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Non-allergic rhinitis: Misdiagnosing a common disease. Classification, Diagnosis, Treatment

Michail G. Tzanakakis

University of Crete, Greece

The term "rhinitis" denotes nasal inflammation causing a combination of rhinorrhea, sneezing, congestion, nasal itch, and/or postnasal drainage. Although allergic rhinitis has a clear definition and its pathophysiology has been thoroughly investigated, nonallergic rhinitis (NAR) remains poorly defined and understood. There is consensus, however, that nonallergic rhinitis consists of a variety of heterogeneous conditions and affecting millions of people.

Nonallergic rhinitis includes a heterogeneous group of conditions, involving various triggers and distinct pathophysiologies. Non allergic vasomotor rhinitis is the most common form of NAR and the diagnosis is based on a detailed medical history and exclusion of clinically relevant sensitization to airborne allergens. As NAR involves a variety of conditions, the pathophysiology may vary but can roughly be divided into a classic inflammatory pathway, neurogenic pathway and other (largely unknown) pathways. Understanding and recognizing the presence of NAR in a patient is essential for the correct selection of medications and for successful treatment outcomes.

Recent Publications

1. E. Proimos, G. Perogamvrakis, T. Chimona, E. Theodoraki, M. Tzanakakis, CE. Papadakis: Ranula treatment in children. Greek Archives of Stomatology and Maxillofacial Surgery 8(1):35-39, 2007.
2. T. Chimona, G. Perogamvrakis, E. Proimos. Theodoraki, M. Tzanakakis, CE. Papadakis: Huge dermoid cyst of the floor of the mouth. Case report. (Galenos)
3. T. Chimona, M. Tzanakakis, E. Proimos, G. Perogamvrakis, E. Theodoraki, CE. Papadakis. Unusual anomalies of brachial clefts. Greek Otolaryngology Head and Neck Surgery 2007;28:12-16.
4. E. Proimos, T. Chimona, D. Tamiolakis, M. Tzanakakis, CE. Papadakis. Brown tumor of the maxillary sinus in primary hyperparathyroidism. A case report. J Med Case Reports.
5. T. Chimona, G. Perogamvrakis, E. Proimos, E. Theodoraki, M. Tzanakakis, C. Papadakis. Multiparametric comparison of cold knife tonsillectomy, radiofrequency excision and thermal welding tonsillectomy in children. 72(9):1431-6), Int J Pediatr Otorhinolaryngology, September 2008.

Biography

Dr Michail G. Tzanakakis is an ENT Surgeon, specialized in Rhinology and has quite a few experience of rhinosurgery. He has a Masters Degree in Rhinology and Rhinosurgery and a PhD degree from the University of Crete. He is a member of the Greek ENT society and works in private since 2010 in collaboration with Chania General Clinic where he performs most of his surgeries.

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The small triangular flap and lip adhesion as adjunctive management of unilateral complete cleft lip**Daehwan Park**

Catholic University of Daegu, Republic of South Korea

Perfect correction is not easy in the complete cleft lip patient. Lip adhesion without presurgical orthopedic appliance was performed on 8 consecutive infants with unilateral complete cleft of the primary palate before definitive lip repair with Millard I procedure modified by using small triangular flap. 6 patients were complete unilateral cleft lip and 2 patients were complete cleft lip and palate. Lip adhesions were performed at 1–2 months of age and definitive repair was done at 5 – 6 months of age. Lip adhesions were performed by Randall's method and Millard I technique modified by using small triangular flap were used for cheiloplasty. Satisfactory result of lip and nose were obtained aesthetically in 8 cases after an average follow-up of 32 months. The vertical height of the medial and lateral lip segments were a symmetric appearance, while the vermilion tubercle, philtrum, and Cupid's bow were natural. However, 1 more operation needed with more scar adhesion at operation site. In conclusion, preliminary lip adhesion can have better functional, aesthetic and emotional results since the disadvantages are minor compared to the advantages

Biography

Dr. Daehwan Park is a Professor and Chairman at Department of Plastic Surgery, Catholic University of Daegu, Korea He is the National Secretary of Korea, International Society of Aesthetic Plastic Surgeons (ISAPS). He is currently the Program Chair of Asian Pacific Anti-aging Course(APAAC) and Annual Daegu Oriental Blepharoplasty Symposium. He has been invited to speak over 200 seminars, conferences and international meetings to give lectures, panel and keynote speakers. He also performed more than 20 live surgeries about cosmetic eyelid surgery and chair and co-chair at several major Cosmetic Surgery Symposiums.

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Vestibular Profile in Auditory Neuropathy Spectrum Disorder

Tejaswini Patel

Narayana Health City, Bangalore, India

Auditory neuropathy spectrum disorder describes a condition in which a patient's otoacoustic emissions (OAE) are (or were at one time) present, and auditory brainstem responses (ABRs) are abnormal or absent. In some instances, ANSD is identified on the basis of present cochlear microphonics (CM) and abnormal or absent ABRs with or without abnormalities of OAEs. The vestibulocochlear nerve is a sensory nerve that serves the organs of hearing and equilibrium. In disorders affecting the cochlear nerve, it is probable that the vestibular nerve is involved as well. But the association of vestibular neuropathies in patients with ANSD is not well known as vestibular testing is not routinely done on patients who do not complain of vestibular problems. So the objective of our study was to describe the vestibular profile in ANSD where 25 patients aged between 18 yrs-65 yrs were studied. In this presentation we show how patients not presenting with balance disorders had abnormal vestibular function tests. We also talk about the effect of Age, Gender, Birth history, Co-morbidities on ANSD. The study also revealed that there may be no correlation between degree of hearing loss and vestibular functions. This study shows that awareness of the presence of vestibular dysfunctions in patients with ANSD may allow therapeutic approaches directed at the vestibular disorders that would improve gait and balance.

**Biography**

Dr. Tejaswini Patel is an ENT surgeon who has done a fellowship in Audio-vestibular medicine and is very passionately pursuing neurotology. She has given talks on Neurotology in various National and International forums. She is currently working as a consultant Neurotologist at Narayana Health City, Bangalore, India

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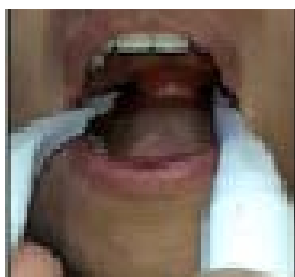
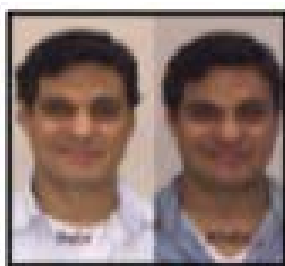
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Low Level Laser Therapy and Neuromuscular Electrical Stimulation in ENT Rehabilitation: New therapeutic resource**Andrea Signoretti**

University Center São Camilo, Brazil

The newest features in speech therapy clinic like Neuromuscular Electrical Stimulation (NMES), Transcutaneous Electrical Nerve Stimulation (TENS) and more recently, the Low Level Laser Therapy (LLLT) have been promising and effective in dealing with ENT, both for enabling early intervention as well as speeding up the recovery process. In our clinic, NMES is used to promote sensory and excitatory stimuli extraoral or intraoral, using FORMA® extensors, which facilitate strength gain and endurance of musculature, TENS has been used to relieve pain, reducing fatigue, improving vascularity and helping muscle relaxation and LLLT has biomodulator action in the inflammatory, nociceptive, scarring, edematous, nervous and muscular repair processes. The use of TENS associated with vocal techniques was used in a female patient, 38 years old, teacher, with high vocal demand and with the diagnosis of bilateral sulcus vocalis stria minor and vocal nodules and contributed to total resorption of the vocal nodules. In another case, a 20-year-old patient, Adenotonsillectomy surgical post, evolved with moderate hypernasal resonance focus dysphonia and dysphagia, nasal reflux for liquids. Using NMES at a sensory and excitatory level with the FORMA® extensors on the soft palate and conventional therapy it was possible to recovery functional movement completely of the soft palate, to equilibrate the resonant focus and eliminate the symptoms of dysphagia. Several studies has been demonstrated that the LLLT is an alternative to speed up facial normality in pediatric and adult Bell's Palsy, and it has seen in our clinic too, however, there is no scientific studies to late facial palsy. In an initial process of rehabilitation, using LLLT combined with NMES with the FORMA® extensors, a male, 40 years old, peripheral facial paralysis for 18 years Facial SCHWANNOMA removal post, has shown promising results with improvement of the facial mimic. As we have seen, these new features have great applicability in ENT Rehabilitation. In addition to being considered as a safe, non-invasive, and widely accepted by patients, the combined use of these new techniques with the conventional techniques of speech and language rehabilitation has added efficiency, assertiveness and celerity in the rehabilitation process.

**Biography**

Dr. Andrea Signoretti is a Speech Language Pathologist, specialized in Dysphagia and Voice. Graduate certificate in Neuromuscular Electrical Stimulation. LSVT® LOUD Certified Clinician to Apply Speech Treatment for Parkinson Disease and Neurological Conditions. For 27 years worked closely with ENT

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specialists. Has experience in voice and dysphagia rehabilitation on Otorhinolaryngology demand and Head and Neck Surgery. Worked in several Hospitals, such as HCOR, ICESP, São Camilo and others, for more than 10 years, focusing bedside attendance on neurogenic and mechanical disorders of voice, speech and swallowing. Nowadays, has a private office sharing experiences with her medical colleagues, psychologists and physiotherapists for a multiprofessional attendance. She was born and raised in Sao Paulo, Brazil

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Laser-Patterned Microcoagulation (LPM) Technology: Clinical study of gingiva regeneration in implantation zone

Ekaterina A Zernitckaia

St. Petersburg State Medical University, Russia

Fractional laser treatment is a new concept of laser treatment of tissue. The concept of fractional treatment or Laser Patterned Microcoagulation or Microablation (LPM) can be explained as formation in the tissue of islets of damaged tissue surrounded by viable tissue. Tissue regeneration occurs through natural tissue healing response which includes a cascade of processes, such as removal of “old” tissue in the damaged islets and replacement with new extracellular matrix and “young” somatic cells, and stem cell recruiting and activation. Multifractional treatment can initiate complete regeneration of treated tissue. Theoretical and experimental data of patterned islets of tissue damage in skin, gingiva, and bone with different lasers will be presented. The tissue regeneration process can be regulated and optimized by proper selection of laser parameters, such as wavelength, pulse width, size of microbeams, and their density.

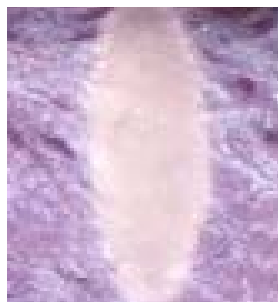
Objective: In this presentation we will review novel methods of tissue regeneration around dental implants using controlled fractional tissue damage and natural healing process.

Method: A diode laser with a wavelength of 1550 nm, power of 25 W, and pulse width in the range 60 to 250 ms was used for gingiva regeneration around the implant suprastructures.

Conclusions: Fractional laser treatment is safe and effective method effecting the oral mucosa. It was proven that fractional lasers can be used for gingival and bone regeneration which has great potential for a new minimally invasive method of treatment of different dental conditions.



Micro column of tissue coagulated with laser system.



Histology of vertical cross-section of column

Biography

Ekaterina A Zernitckaia has completed her postgraduate studies in maxillofacial surgery department in I.P. Pavlov First St. Petersburg State Medical University. She is PhD student and her dissertation work deals with laser treatment in implantology. She has her private practice as an oral surgeon in Saint-Petersburg. She has published more than 7 papers in domestic and international journals and made a several presentations on international congresses.

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The Effect of Radiofrequency ablation and Mitomycin C in the surgical management of Human tympanostomy, could it be the end of the Grommet era?**Shaimah Najmussaquib**

Taiba Hospital, Kuwait

Acute otitis media and otitis media with effusion are among the most commonly diagnosed medical problems in children .It has been found that 39% of infants experience an episode of acute otitis media by 6 months and 20% had more than one episode .Maintaining middle ear ventilation to reduce the severity and frequency of otitis media remains the focus of the surgical management of otitis media . The performed tympanostomy's were done with radiofrequency ablation with and without the use of mitomycin-C.The function of mitomycin-C is to prevent replication of fibroblasts and epithelial cells .It actively interrupts the DNA replication and inhibits new cell formation thus affecting the healing process. Hereby this study was made in a randomized controlled manner to determine the feasibility of radiofrequency with or without mitomycin -C application in delaying the closure time of human tympanostomy and to screen its efficacy in the management of recurrent otitis media and otitis media with effusion . The conclusion that was reached was when tympanostomy is done with the use of radiofrequency ablation with application of mitomycin-C it had shown a delayed closure time ,slower healing rate than the tympanostomy done with radiofrequency without mitomycin-C application. And as we continued to follow up with the patients , we had reached another amazing conclusion ,patients operated for tympanostomy with radiofrequency and mitomycin-C application had shown a better cure rate in recurrent otitis media (45% to 80%) , And otitis media with effusion (28% to 59%).

Biography

Shaimah najmussaquib graduated from the prestigious mahatma gandhi medical college and research center India , having a egyptian background she proceeded to work at sheikh zayed hospital Egypt for 6 months pro-bono. Presently working at Taiba hospital she looks forward to learning and progressing her knowledge in the feild of ENT.

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