



5th Global Summit and Expo on

Head, Neck and Plastic Surgery

June 19-20, 2017 Philadelphia, USA

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Head, Neck and Plastic Surgery 2017

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The role of HPV infection in oral and larynx lesions

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The precancerous lesions in the oral cavity mucosa are leukoplakia and erythroplakia. The involvement of HPV in these lesions is under investigation. Human papilloma viruses (HPVs) are epitheliotropic and infect cutaneous or mucosal squamous epithelium depending on their genotype. Based on their association with carcinoma they are divided into high-risk types (HPV 16, 18, 31, 33 and 35) and into low-risk types (HPV 6, 11, 13 and 32). Studies have demonstrated that the prevalence of HPV in nondysplastic and in dysplastic leukoplakias is 20.2% and 26.2% respectively and the predominant HPV types in oral leukoplakia were (HPV 6/11, 55.8%) followed by (HPV 16/18, 28.2%). The incidence of HPV 16/18 is not different among patients with mild, moderate and severe dysplasia but HPV-16 is predominant in oral and oropharyngeal squamous cell carcinoma (68.2% and 86.7% respectively). Despite the fact that many studies have reported the presence of HPV DNA in oral leukoplakias; however, there is not enough evidence to prove correlation among HPV and oral leukoplakia or its progression to carcinoma. Regarding the oral erythroplakia there are few data in the literature but from a research, it was found a high association with HPV infection (50%) in a sample of 10 patients with this lesion. The relationship between HPV infection and laryngeal dysplasia is still unknown but there is a probability that HPV is a cofactor in the malignant progression of these lesions.

Biography

Avlonitou Eirini is an ENT Doctor of Athens Medical School in Greece. She has completed her PhD in Sleep Medicine and has expertise in the management of obstructive sleep apnea syndrome in children and adults. She has number of publications in Greek and international journals in the subjects of rhinology, neurotology, sleep medicine and pediatric otorhinolaryngology.

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Notes:



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Nasal unit transplantation: A cadaveric anatomical feasibility study

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Background: The science and technical acumen in the field of vascularized composite allotransplantation (VCA) has progressed rapidly over the last 15 years and transplantation of specialized units of the face, such as the nose, appears possible. No study to date has evaluated the technical feasibility of isolated nasal unit transplantation (NUT). In this study, we explore the anatomy and technical specifics of nasal unit transplantation.

Methods: 4 fresh cadaver heads were studied. Bilateral vascular pedicle dissections were performed in each cadaver. The facial artery was cannulated and injected with food dye under physiologic pressure in 2 cadavers and with lead oxide mixture 2 cadavers to evaluate perfusion territories supplied by each vascular pedicle.

Results: The facial artery and vein were found to be adequate pedicles for NUT transplantation. Divergent courses of the vein and artery were consistently identified, which made for a bulky pedicle with necessary inclusion of large amounts of subcutaneous tissue. In all cases, the artery remained superficial, while the vein coursed in a deeper plane and demonstrated consistent anastomoses with the superior transverse orbital arcade. While zinc oxide injection of the facial artery demonstrated filling of the nasal vasculature across the midline, dye perfusion studies suggested that unilateral arterial inflow may be insufficient to perfuse contralateral NUT components. Discrepancies in these two studies underscore the limitations of non-dynamic assessment of nutritive perfusion.

Conclusion: NUT based on the facial artery and facial vein is technically feasible. Angiosome evaluation suggests that bilateral pedicle anastomoses may be required to ensure optimal perfusion.

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Complications and failures of 1000 cochlear implantations at Apollo Health City, India

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Objective: To evaluate cochlear implant complications and failures to determine possible causes and discuss medical and surgical management.

Method: Retrospective study of 1000 cochlear implants for a period of 1994-2016 in a tertiary care center was done. The sample consisted of 930 pre-lingual and 70 post lingual patients, 593 male and 407 female, 920 children below 18 years and 80 adults above 18 years, 916 unilateral and 42 bilateral subjects, 764 normal anatomy and 246 abnormal ears were taken.

Results: The overall rate of complications was 6.0% (60 of 1000), with 43 (4.53%) minor complications and 17 (1.78%) major complications; all were treated medically and surgically.

Conclusions: Cochlear implantation is a safe technique with a relatively low complication rate; however, certain complications may require specific attention to prevent or correct them. It is important to keep studying the causes of such complications and find possible solutions that can lead to minimizing them.

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Ear reconstruction using the Antia-Buch principles

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Purpose: The reconstruction of the ear following resection of part of it especially the helix, scapha and anti-helix is a confronting problem for plastic surgery. Many techniques had been described to approach this issue and to minimize the complications raised from resection of tumors as well. We present our experience with ear reconstruction using chondrocutaneous flaps and a modified Antia-Buch technique in order to obtain a more realistic result with least complications.

Methodology: The study is retrospective in design with accurate description of the ear reconstruction technique that was performed by the same surgeon on all patients. Twenty (20) patients included in this study. The collected data included demographics, any post-operative complications and post-operative measurements of both reconstructed and normal ears.

Results: There were no post-operative complications, all tumors were completely excised. No flap loss, wound dehiscence or haematoma has occurred. The mean residual defect was 21.8 mm ranging from 14 mm to maximum of 30 mm in size. There were differences noticed in height, width and projection.

Conclusion: This technique allows preservation of anatomical landmarks and contour of the ear and therefore maintaining normal overall 3D appearance of the reconstructed ear. Reconstruction of 10 mm defects are basically allowed through this technique with no loss in size. Due to the potential lobule distortion, we recommend applying this technique to defects up to 25 mm.

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Molecular pathology of oral cancer: Clinical implications

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Oral cancer is a major health concern in India being the most common cancer in males and fifth most common cancer in females and annual incidence of 77,003 new cancer cases, contributing 26% of the global oral cancer burden. Somatic mutations, aberrant expression, epigenomic regulation and genomic SNPs constitute specific alterations in oral cancer. The focus of our group investigating the molecular pathology of oral cancer is on identification of predictive biomarkers to indicate risk of oral cancer and molecular markers for early diagnosis, prognosis and as therapeutic targets. Somatic mutations in p53, H.ras, EGF-R and NOTCH1 have been observed in 30-60% patients and epigenetic deregulation via hypermethylation in p15/16, DAPK, MGMT, MLH1 and E-Cadherin in 36-50% patients; histone modification in H3 histone via methylation in 39-47% and acetylation in 37-80% and miRNA deregulation in 70% oral cancer patients, providing excellent targets for specific treatment. Several single nucleotide polymorphisms (SNPs) as genomic variants in genes associated with cell cycle, proliferation, differentiation, metastasis, oxidative stress and apoptosis were examined using allelic discrimination real-time PCR assay or high resolution melt-curve analysis. Oral cancer patients demonstrated increased risk with OR 2 to 6.73 and narrow confidence intervals in SNPs including rs4512367 (PREX2), rs1800734 (MLH1), rs34329 (p27), rs16944 (IL1- β), rs2071214 (Survivin), rs13026208 (GALNT13), rs3803300 (AKT1), rs187115 (CD44), rs1982073 (TGF β), rs1229984 (ADH1B), rs187238 (IL-18) and rs189037 (ATM). Whereas 50% decreased risk was observed with alternate genotypes in PREX2 and TGF β . Further, the somatic mutations in H.ras gene at codons 12/13/61 was used as a prototype target for identification of small molecules from Maybridge Hit Finder Library, for selective inhibition of constitutive activation of H.ras and consequent proliferation of oral cancer cells. The identified molecules may be potential single or combinatorial therapeutic agents. Thus, molecular biomarkers of oral cancer indicate clinical applications for better management of oral cancer patients.

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Submandibular gland transfer: Prevention of post-treatment xerostomia in oropharyngeal cancer patients

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Oropharyngeal cancers are on the rise globally. Of late, many innovations have been applied to optimally treat this complex cohort of patients. A multidisciplinary treatment approach is crucial in meeting the complex needs of patients with head and neck disease as well as optimizing oncologic and functional outcomes. In particular, the application of transoral robotic surgery (TORS), a minimally-invasive, robotic-assisted surgical procedure, to the treatment paradigm has revolutionized the surgical approach, reducing long-term dysfunction. It offers a faster return to day-to-day activities; significantly less morbidity, less complications, scarring and risk of infection and reduced risk of long-term swallowing problems. In these cases, adjuvant radiation is often indicated. For patients with tumors precluding an upfront surgical approach, primary chemoradiation is an effective treatment. One of the most troubling sequelae from radiation treatment is xerostomia. This is a largely irreversible change that leads to the development of new medical problems that significantly affect quality of life. Submandibular gland transfer is a novel approach for preservation of salivary function in the prevention of post-radiation xerostomia. It is a relatively minor surgical procedure that when performed prior to radiation treatment can significantly improve quality of life. This has significant implications on patients swallowing function and oral comfort level during and post-treatment. Advances in other types of treatment techniques are currently in development which may have a major impact on how cancer patients are treated in the future.

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Vowel category formation in Korean-English bilingual children

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One of the long-standing theoretical issues in bilingualism is whether bilingual children develop one or two linguistic systems in the learning of their respective languages. The one-system hypothesis suggests that children initially posit linguistic rules common to both languages; then they differentiate the two as they master higher linguistic knowledge. The two-system hypothesis, on the other hand, holds that children in bilingual environments differentiate both systems at an early age and those children are capable of keeping the two linguistic systems separate as these develop. Though the one-system hypothesis has been challenged on both methodological and empirical grounds, most research on this issue has dealt with the lexical, syntactic and phonological domains but whether bilingual children develop one or two distinct phonetic systems has not been fully explored. My colleague and I have investigated phonetic category formation in Korean-English bilingual children and found that phonetic category of stop consonant changes as durations of exposure of two languages increases. During this presentation, I will present English and Korean vowel data produced by 57 Korean-English bilingual children at 3, 5, 7 and 10 years of age as compared to 60 monolingual English or 60 Korean children. We found developmental patterns and multi-dimensional representation of phonetic categories between vowels and stops. Specifically, 3 and 5 year-olds distinguished vowels but not the stop categories of Korean and English whereas 7 and 10 year-olds distinguished both vowels and stops. Results suggest that the phonetic systems of bilingual children continue to evolve during the developmental process and that bilingual children require different durations of exposure per speech category in order to establish detailed phonetic categories across languages.

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Retropharyngeal abscess: Our experiences

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The retropharyngeal space has a very complex anatomy and is located posterior to the pharynx (nasopharynx, oropharynx and hypopharynx), larynx and trachea. The space largely contains retropharyngeal group of lymph nodes. Retropharyngeal abscesses are deep neck space infections that occur in this space and can pose an immediate life-threatening emergency with potential for catastrophic complications. The high mortality rate of retropharyngeal abscess is due to its association with respiratory distress and airway obstruction, mediastinitis, aspiration pneumonitis, jugular venous thrombosis, sepsis and sometimes erosion into the carotid artery. The incidence of the disease is gradually going down due to the widespread availability of good antibiotics; this is also reducing a clinician's experience in managing such cases. This is a retrospective study of cases with the discharge diagnosis of retropharyngeal abscess treated in the past 10 years, the disease predominantly presented with fever and pain in throat with dysphagia, poor oral intake, neck pain and sore throat. Respiratory distress was seen in a few cases. Surgery was not performed in all the cases and in milder forms and in cases where patients refused for surgery, conservative management was done. Patients were investigated by X-ray and CT scan and ultrasonography and once the diagnosis of retropharyngeal abscess was established, they were managed by drainage/aspiration under general anesthesia along with intravenous antibiotics. Early diagnosis is the key to management of these conditions to avoid morbidity and mortality. Some interesting observations like incidence of Koch's lesions and type of surgical intervention chosen along with possibility of recurrence will be presented in detail.

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Outcomes of lipofilling in pediatric age

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Neubert named the first description for fat graft in 1893. One century after, in 1995 Sydney Coleman with his personal technique and method of Lipostructure® allowed the improvement of the survival of this type of graft. Lipofilling is a thoroughly applied technique in our unit of Pediatric Plastic Surgery for the treatment of many pathologies like scars as a result of burn or surgery, the sequelae of pediatric cancers, breast related pathology, craniofacial malformations, Parry Romberg syndrome, Treacher Collins syndrome, etc. In our unit of Pediatric Plastic Surgery, it is a commonly used and feasible technique due to good results not only in aesthetic, but also in durability in the treatment of pathologies that in the past years it was only suitable for treatment with implants, flaps, fillers or nothing. 86% of our patients were very satisfied with the results despite the reoperation in some cases due to fat reabsorption. Autologous fat grafting is a very valuable, trustworthy and excellent technique for the treatment of aesthetic and functional sequelae in plastic pediatric surgery and improves the results of congenital and acquired diseases.

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Pleomorphic hyalinizing angiectatic tumors: Recognizing a novel source of cancer in the upper extremity

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Statement of the Problem: Soft tissue masses of the upper extremity often represent benign pathological entities, but the astute hand surgeon should use precaution when the possibility of malignancy arises. In the differential diagnosis, one needs to consider pleomorphic hyalinizing angiectatic tumors (PHAT), a novel pathology with increasing reports in the literature. The aim of this study is to report a case of PHAT in the hand and to describe diagnostic findings and management from a systematic review.

Methodology & Theoretical Orientation: We report a case of PHAT and conducted a systematic review of the literature for all published data on diagnosis and management of this novel entity. Publications from 1965 to 2016 were selected from databases such as PubMed/Medline, Cochrane Review and Google Scholar. Collected data included patient characteristics, anatomical sites of predisposition, tumor sizes, clinical signs, imaging findings, treatment options and recurrence. Results are reported as means and interquartile ranges.

Findings: In total, there have been 48 publications on PHAT, but only 8 reported it in the upper extremity including 11 patients. Tumor sizes ranged from 26 cm to 4 cm in largest diameter with clinical findings significant for pain on direct palpation in 91% of cases. Treatment strategies include surgical excision with wide margins (91%) and radiotherapy (9%), without any chemotherapy. No local recurrences have been reported for 10 years.

Conclusion & Significance: Pleomorphic hyalinizing angiectatic tumors are rare soft tissue masses that can arise in the upper extremity. Early recognition of clinical signs and surgical resection with wide margins has not resulted in recurrence so far.

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