



Five years experience of Canal Wall Down Mastoidectomy at Dhaka Medical College Hospital: Review of 123 cases

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Background: Canal wall down (CWD) mastoidectomy is an important surgical procedure for the treatment of CSOM with cholesteatoma. Management of the mastoid in cases of chronic otitis media with cholesteatoma remains challenging, whether to leave the canal wall up or perform a canal wall down technique continues to be addressed.

Keywords: Chronic otitis media, Cholesteatoma, Canal wall mastoidectomy.
Objectives Several works have been done on CWD mastoidectomy, therefore it was essential to conduct this study to describe our own experiences with canal wall down mastoidectomy, outlining the common findings, complications and results of these patients in our setting and compare our results with those from other centres in the world.

Methods: A prospective clinical study was conducted in Department of ENT and Head Neck Surgery, Dhaka Medical College Hospital (DMCH), Bangladesh over a period of five years from 1st July 2014 to 30th June 2019. One hundred twenty three (123) patients underwent canal wall down mastoidectomy of either sex in the age group 5-61 years were selected. Pre and post operative hearing assessment were done with pure Tone Audiometry (PTA). Post operative complications of canal wall down mastoidectomy were noted. Post mastoidectomy cavities were examined. All the information were recorded in the fixed protocol.

Results: Among 123 cases, age of the patients ranged from 5 years to 61 years with the highest number of cases belonged 2nd and 3rd decade (39% & 29% respectively) of life, poor class people group 93 (75.6%), rural 98 (79.7%), illiterate and primary education group 98 (79.7%), farmer 32 (27.6%) of labourer 32 (26%) or their dependent were sufferer more. Commonest presenting complain was foul smelling ear discharge with impaired hearing.

Conclusion: Canal wall down mastoidectomy is a standard treatment modality for the management of CSOM with cholesteatoma. Early diagnosis and timely intervention in skilled hand is prerequisite for better outcome in terms of improved hearing and dry post mastoidectomy cavity.



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[4th International Conference on Ear Nose and Throat March 16-17, 2020 Sydney, Australia](#)

Name : DR. MOSTAFA KAMAL AREFIN, Title of abstract : five years experience of canal wall down mastoidectomy at dhaka medical college hospital: review of 123 cases, Short name of webinar : ENT CONFERENCE 2020, [4th International Conference on Ear Nose and Throat March 16-17, 2020 Sydney, Australia](#)