Extensive lateral wall enhancement (our technique)

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Lateral pharyngeal wall collapse and splinting possibilities is still unsolved problem in OSA surgery. The commonly used techniques are expansion sphincter pharyngoplasty and relocation pharyngoplasty. I proposed a new technique which is a combination of expansion and relocation called extensive lateral wall enhancement. A study was conducted on 30 cases of isolated lateral wall collapse during DISE. 10 cases managed by expansion sphincter pharyngoplasty and 10 cases were managed by relocation pharyngoplasty, 10 cases by our technique of extensive lateral wall enhancement, maximal AHI reduction occurred with our technique with no wound dehiscence.

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