Rate of cervical lymph node involvement in Supraglottic squamous cell carcinoma without clinical and radiological involvement

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Background: Management of laryngeal squamous cell carcinoma (SCC) that originates from supraglottis requires remarkable concern due to its lymphatic drainage. The classic approach is elective dissection of second, third and fourth cervical zones’ lymph nodes in patients with negative clinical and radiological findings. Neck dissection is an extremely extensive procedure that has major wound, vascular and nerve complications. The aim of this study was to evaluate the rate of positive lymph nodes in patients with supraglottic SCC who had negative finding in clinical and radiological assessments.

Methods: 60 patients with supraglottic SCC and preoperative negative physical exam and radiologic finding who underwent elective neck dissection of second, third and fourth cervical zones were selected consecutively and the dissected lymph nodes evaluated pathologically. Lymph nodes involvement and parameters such as age, gender, tumor grade and smoking were analyzed.

Result: The rate of the occult neck metastasis in patients with supraglottic SCC without clinical and radiological involvement was 37%. No significant correlation was found between lymph node involvement and tumor grade, smoking, age and sex.

Conclusion: Our study showed a remarkable percentage of cervical lymph node involvement. According to our study we advise elective bilateral neck dissection in all supraglottic SCC patients regardless of age, gender, smoking and tumor grade.

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How can you persuade the neurosurgeon by ESBS?

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Aim: To discuss the way by which we can transfer the neurosurgeons from the microscope to the endoscope.

Methods: We tried to analyze how the neurosurgeons start to use the endoscope in many countries (Syria, Iraq, Lebanon) in some centers. We can see that the personal relations are very important in some places especially if they are not tertiary centers and in the places far from the centers, whereas the scientific conferences have the most important role in tertiary centers. The scientific discussion is a good way for the short term. The results are the most important way for the long term. Unfortunately financial and commercial issues play serious role in some cases.

Results: Scientific discussion, personal relations, conferences, trials are some of the methods to shift the neurosurgeons to endoscope, but the results are the most important way.

Conclusions: There are many ways by which we can convince the neurosurgeon to use the endoscope instead of the microscope.