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Surgical outcomes of type-1 tympanoplasty on microscopic technique post-auricular approach and endoscopic technique transcanal approach: A single surgeon experience

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Background & Aim: Conventionally, tympanoplasty is a surgical procedure that utilizes the microscope to visualize tympanic membrane and the middle ear. In years past, the use of endoscopes has been limited to paranasal sinus surgeries. Several reports have been made on endoscopic tympanoplasty worldwide. However, there is a scarcity of studies in the Philippines assessing the capacity for endoscopic techniques on micro-otologic surgery. This study aims to describe the surgical outcomes of patients who underwent endoscopic vs microscopic technique in tympanoplasty.

Methodology: Review of charts from 2015 to 2017 were done. Patients who underwent type-1 tympanoplasty by a single surgeon via endoscopic or microscopic approach were included in the study. Tympanic membrane integrity, operative time and complications were noted.

Result: 19 patients were included in the study. The mean age of patients was 43 for Microscopic and 48 for Endoscopic Tympanoplasty. Mean operative time was 140.6 minutes (SD±43.3) for Microscopic and 86.7 minutes(SD=±13.0) for endoscopic tympanoplasty. Majority of patients were male. There was 100% tympanic membrane integrity on both techniques. Hearing results for air conduction pure tone average from 500, 1000, 2000 and 4000 Hz showed improvement in hearing with a gain of more than 10dB on 5 patients via endoscopic tympanoplasty. For bone conduction PTA, there was noted improvement among 5 patients via microscopic tympanoplasty. Change in air-bone gap showed improvement by more than 10dB on 5 patients via microscopic tympanoplasty.

Conclusion: Endoscopic Tympanoplasty is an alternative to microscopic tympanoplasty. It has a high success rate in closure of perforation and yields less operative time.

Biography

Jenina Rachel D J Escalderon is an MD has completed her medical degree from University of Santo Tomas, Manila, Philippines. She is currently an otorhinolaryngology- head and neck surgery resident at the same hospital.

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