

Food Allergy

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Introduction

Developmental errors in facial regions of new-born children sometimes drag them towards social isolation and ill-treatment. Such issues need care and empathy from all section of the society. Medical science has extended its 'hands of support' to eradicate the issue and to provide the sufferers a better life to live. Cleft lip, defective larynx, errors in ear, nose or any other facial region, which is defined by structural and functional impairment are the subject in Otolaryngological studies. Otolaryngology is known to be the oldest medical specialty in the United States. 'Otolaryngology: Open Access' is an open peer review journal that publishes clinical and medical studies in relation to the Otolaryngology and emphasizes on topics involving Rhinitis and Rhinosinusitis, sinonasal disorders, common cold, nasal disorders, Neurotology, Laryngology, head, neck and oral oncology, sinusitis and many more. Otolaryngology: Open Access of Volume 7 Issue 1 presents several articles on diagnosis on food allergy, case report on non-hodgkin lymphoma, case report on cervicofacial actinomycosis, surgical to interim-chair side management of hemimaxillectomy patient, stapes surgery using stapedotomy versus partial stapedotomy, utilizing acupuncture and osteopathic manipulative in the integrative treatment of TMDs, and structured analysis of nose to achieve natural results in Rhinoplasty.

Most people can eat a variety of foods without problems. However, in a small percentage of the population, certain foods can cause adverse reactions perhaps food poisoning, intolerance to an ingredient in a meal. Identification of allergen present in food involves a combination of a detailed medical history, along with the laboratory data and also, an oral food challenge, a confirmatory of either tolerance or an adverse food reaction. Medina et al. [1], conferred the cornerstone of food allergy management is the elimination of the allergen present, however it is suggested that the allergen elimination process could predispose patients, especially in children to inadequate diets and cause nutritional deficiencies thus eliminating diets should be done in the most specific way possible.

Lymphoma signifies less than 1% of malignant laryngeal tumors and the main site in larynx for Lymphoma is supraglottis. It is known that symptoms are very interspecific and the diagnosis is a challenge. Junior et al. [2], presented a case of 23 years-old-man complaining about dysphonia and globus for 2 months. CT scan and nasofibrolaryngoscopy showed a supraglottic mass without any specific features. Author concluded that the identification of non-Hodgkin lymphoma laryngeal is a challenge to the otolaryngologist, since, patients present with non-specific complaints and the diagnosis is done only by biopsy. However, it is an imperative consideration in the differential diagnosis of laryngeal tumors, as lymphoma is treated with chemo radiation instead of surgery.

A dermoid cysts are benign congenital lesions of ectodermal origin that is not commonly observed in the mouth. However, it is a swelling in the middle of the mouth floor usually due to retention of germinal epithelium during growth of branchial arches and Lower jaw. Elarbi et al. [3], presented a case of 13-years-old boy presented with firm painless swelling in the floor of mouth extending into the sub-mental space. The main treatment is surgical excision using an intraoral approach to avoid scar extra-orally. Based on clinical presentation and behaviour of the cyst without advanced investigation, author recommended a follow up is mandatory as there are cases reported with recurrence after excision and up to 5% of dermoid cysts undergo malignant changes in teratoid type.

Cervicofacial actinomycosis (CA) is a rare infection caused by Actinomyces species and it is infrequently found in the maxilla. Klein et al. [4], reports a case of a 31 year old man with a history of drug abuse. The patient was HIV-positive and advanced to an extensive, destructive lesion in the maxilla. However, the patient is treated with crystalline IV penicillin G and amoxicillin orally and preceded under follow-up. Based on studies, author suggested that Cervicofacial actinomycosis can be divided into the differential diagnosis of maxillary lesions. Also, the healthcare professionals should dedicate special attention towards the patients with systemic conditions such as HIV infection and drug abuse that may intensify the development of more aggressive CA forms.

Fabrication of Interim obturator soon after the surgical procedure can be difficult for the patient due to pain and related trauma. The key goal of rehabilitating maxillofacial defects is to reduce the disease and to improve the quality of life. Prosthetic intervention should start from the time of surgical resection and will be essential for rest of the patient's life. Raza et al. [5], presents article with technique of converting surgical obturator as a custom impression tray followed by fabrication of closed hollow bulb obturator. It is recommended that the conventional impression method could be traumatic to the patient especially when they have reported after a recent surgery. This described method helps in reducing patient trauma and maintains the facial profile and function.

Alzhrani et al. [6], compared the audiological outcomes of two diverse approaches of stapes surgery, that is stapedotomy versus partial stapedectomy. Specifically, author experience in this area is reviewed and compared to results obtained from other centres performing this kind of surgery. It is observed that there is significant improvement established in postoperative closure of Air Bone Gap in both groups. However, Stapedotomies are seen to be more effective and a traumatic than partial stapedectomies because of better hearing results when the full range of speech frequencies (500 Hz-4000 Hz) is considered. Therefore, Stapedotomy operation should be preferred owing to a lower incidence of postoperative vertigo.

Rhinoplasty is one of the principles of plastic surgery that can be regarded as a perfect marriage of art and science. The significance of proper planning and analysis cannot be overstated. Parashar et al. [7], aim to offer a structured analysis of the nose, as well as elucidate how to derive an operative plan, in order to achieve the most natural and long lasting results. The presented analysis consists of facial analysis, surgeon's blueprint, patient discussion, final blueprint and operative plan. Patient plays a significant role in planning as they guide the surgeon to what they are realistically looking for and expecting. It is important that the operative plan be as simple as possible to achieve the goals, and at the same time be flexible. With this algorithmic approach, it is possible to consistently deliver natural results.

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