

# OTORHINOLARYNGOLOGY

August 07-08, 2017 London, UK

## Role of balloon assisted eustachian tuboplasty in treating middle ear cleft disease – our experience

Dipak Ranjan Nayak, Asheesh Dora G and N Apoorva Reddy  
Kasturba Medical College, India

**Background:** Defective ventilation through eustachian tube is one of the major pathology for middle ear diseases. Various treatments are available to restore the middle ear ventilation. The authors would like to share their preliminary experience in selected cases undergone balloon assisted eustachian tuboplasty (BET) for treating middle ear diseases not benefited from other forms of treatment.

**Aim:** Aim of this study is to assess the efficacy of BET in treating middle ear cleft disease.

**Material & Methods:** It is a single institution retrospective observational study from August 2013 to March 2016. 11 subjects who underwent balloon assisted eustachian tuboplasty were included. Subjects with recurrent middle ear disease with effusion who were not responding to medical management and or standard surgical treatments including adenoidectomy for more than one year were carefully selected and taken up for BET. Patient with very long standing effusion and having adhesive otitis media were not taken for procedure. Tympanometry and symptom scoring using a 7 point questionnaire were done pre and post-operatively to assess the efficacy of the procedure. Results were analyzed by Wilcoxon signed ranks test using SPSS 16.0 software.

**Results:** All subjects showed significant relief from their symptoms at four weeks post-surgery. All patients improved symptomatically and were again followed up at 16 weeks and on tympanometry, the negative pressure in the middle ear was found to become less negative in all the 22 ears (11 patients). Nine cases were followed up for more than six months and two cases were lost to follow up after three months. SPSS 16.0 software was used and the results were analyzed using Wilcoxon signed ranks test. Based on the pre-operative and post-operative scores, the p value was 0.003 and is hence significant. There were no significant complications except synechia between septum spur and inferior turbinate due to injury following guide catheter insertion on the deviated side.

**Conclusion:** The present study suggests that BET is an effective treatment for treating middle ear dysfunction including early otitis media with effusion, which is resistant to medical management and myringotomy with/without grommet insertion. However, long term outcome and a suitable selection criterion for the procedure needs to be ascertained as enough clinical data are not available for the same at present.

### Biography

Dipak is a Professor in the Department of ENT - Head & Neck Surgery at Kasturba Medical College and Hospital, Manipal University, Karnataka, India. He completed his medical degree in MBBS from the institute of S.C.B. Medical College affiliated to the University of Utkal, Cuttack in the year 1983 and M.s in E.N.T from the institute of S.C.B. Medical College affiliated to the University of Utkal, Cuttack in the year 1988. He had served Kasturba Medical College & Manipal University at various capacities including HOD for more than 27 yrs. He published more than 100 scientific research publications in the field of Otolaryngology-Head & Neck Surgery.

drnent@rediffmail.com

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