Volume 6, Issue 6

drbucci@libero.it

Page 24

Notes:

discomfort. In order to better understand the relationships between nasal obstruction and OSA, we performed an analysis of the medical literature relating to this subject. According to other authors, we found that when dealing with a patient with sleep apnea, it is not adequate to ascertain the severity of the disease with a sleep test alone; it is imperative to assess the patient's upper airway and evaluate the airflow dynamics from the nose to the larynx. Our review provides convincing evidence that there is an association between OSA and nasal obstruction. **Biography** Alessandro Bucci was Director of the 1st International Conference on Rhinology and Rhino-Allergology/5th Bulgarian Italian Rhinology Meeting, 2016 Senigallia, Italy and Committee Member and Chairman of the International Specialists Conference on Ear, Nose and Throat Disorders, November 2016 Alicante, Spain. He was University Professor at UNIVPM - Ancona - Italy and International Faculty member of the VI Bulgarian Italian Meeting of Rhinology. He attended medical school at Catholic University (UCSC) in Rome, and completed his Residency in Otolaryngology-Head and Neck Surgery at UCSC - Gemelli Hospital in Rome. He has obtained PhD in Rhinology and Rhino-Allergology in 2006 at UCSC, Rome. He is Vice-President of the ONLUS association: ANATRA.it (National Association of

The nose and the OSA (Is the evaluation of the nose really important in OSA?): Literature review and our personal experience

Cleep-disordered breathing (SDB) has been recognized as a serious disorder for a century. The most studied and the most common • form of sleep-disordered breathing is OSAS. The nose and pharynx begin the upper airway system and represent a continuum. A biologic basis for nasal obstruction as a cause of SDB lies in the effect of nasal breathing on resistance and flow velocity, which affects the differential pressure between the atmosphere and the intrathoracic space. Nasal airway resistance is responsible for approximately two thirds of the total airway resistance in wakefulness. The nose has been described as a variable resistor with a collapsible segment, such that flow limitation in the nasopharynx results in conditions favorable to downstream pharyngeal collapse. The importance of effectual nasal breathing in maintaining the automatic respiratory rhythms in sleep has long been recognized. An inconsistent link between OSA and nasal obstruction has been reported in the literature for decades but the relationship between obstructive sleep apnea (OSA) and nasal obstruction is still unclear. The consequences of daily nasal obstruction (allergic rhinitis, chronic sinusitis, septal deviation etc.) on sleep quality have been well demonstrated, resulting poor sleep quality, daytime fatigue and day-to-day

Alessandro Bucci

ENT Department - Senigallia-AV2-ASUR Marche - Italy

Tracheotomised patients) and Member of the European Rhinologic Society.

ENT Surgery Conference International Conference on **Craniofacial Surgery**

2nd European Otolaryngology

Alessandro Bucci, J Otol Rhinol, 6:6 DOI: 10 4172/2324-8785-C1-005



October 16-18, 2017 Rome, Italy