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Our experience with nasal dermoid in 41 years old female (case report)

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Statement of the Problem: Nasal dermoid is an uncommon midline anomaly. Its incidence has been reported to be 1 out of 20,000 live births. Most lesions are diagnosed within the first 3 years of life but in some cases the diagnosis can be delayed. Complete excision of nasal dermoid is mandatory in order to prevent recurrence. Multiple approaches have been described, including vertical incision, transverse incision, lateral rhinotomy, medial paracanthal, U-shaped dorsal incision, external rhinoplasty, degloving procedure, transglabellar incision, brow incision, and bicoronal incision. We discuss in this poster the radiological imaging and our surgical approach for a 40-year-old female with nasal dermoid.

The case presentation: A 41-year-old female presented with a painless mass on the dorsum of the nose for 3 months. According

to patient history, no discharge from the mass. The investigation including CT scan and MRI was done, which showed a midline nasal bone defect, soft tissue lesion 24.75*16.43 mm at the dorsum of the nose with extension into the nasal cavity and termination in the midline of the anterior superior ethmoid sinus. The patient underwent open septorhinoplasty and functional endoscopic sinus surgery with a navigation system to achieve complete excision of the dermoid cyst and good cosmetic results.

Conclusion: It is a rare case and the aim of our surgical approach was to give good cosmetic results, a low recurrence rate, and good exposure during operation. After 6 months of surgery, there was no recurrence and good cosmetic results.

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