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THE ADDED VALUE OF ENDOSCOPIC DACROCYSTORRHINOSTOMY PERFORMED BY THE OTOLARYNGOLOGIST: A TERTIARY CARE EXPERIENCE

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Introduction: Dacryocystorhinostomy (DCR) is the preferred treatment for lacrimal duct blockage. Endoscopic DCR has been practiced increasingly in recent years as it avoids a facial scar and can be performed as a day procedure. Recent improvements in endonasal surgical technique led to success rates of up to 90 per cent. However, the endonasal approach often requires concomitant procedures along with DCR for optimal outcome. This includes procedures like septoplasty, turbinoplasty etc.

Aims and Objective: The aim was to assess the added value of endoscopic DCR performed by otolaryngologist surgeons in terms of simultaneous intranasal procedures for optimal outcome which cannot be performed by oculoplastic surgeons.

Design of Study: Retrospective tertiary care study.

Materials and Methods: we retrospectively studied the demographic, clinical, and surgical data of 87 endoscopic DCR cases performed over the last 3 years. Complication rates in the patients who had simultaneous procedures were documented.

Results: The rates of simultaneous nasal procedures (septoplasty, turbinectomy, and polypectomy) were 21.8%. no complications were noted.

Conclusions: A significant proportion of patients undergoing endoscopic DCR may require ancillary endonasal procedures that is performed by the otolaryngologist at the same operative setting with minimal complications for optimal outcome and to decrease the recurrences.

Biography

Abdulaziz neazy has been Graduated from Umm-alqura university college of medicine and surgery – Saudi Arabia - makkah as Medical Doctor, he participated in many researches , the latest one was The added value of endoscopic Dacrocystorhinostomy performed by the Otolaryngologist: A tertiary care experience 2016 at KAMC in makkah.now he is training at king abduallah medical city in the otolaryngeology department.

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