



**RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA**

**“A COMPARATIVE STUDY OF INTERVENTIONS OF
MIDDLE TURBINATE MEDIALIZATION IN
ENDOSCOPIC SINUS SURGERY”**

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ABSTRACT

OBJECTIVES & BACKGROUND:

Middle turbinate bulk, shape and position play an important role in the ventilation and drainage at middle meatus. The middle turbinate constitutes corner stone for performance of osteomeatal complex and as one of the major goals of FESS and thus middle turbinate should be interfered with in patients of sinusitis with or without polyposis to prevent obliteration of osteomeatal complex. In addition, among the normal middle turbinate which may lateralize postoperatively and cause re- obstruction of drainage and ventilation in middle meatal area this serial clinical study was planned prospectively to postulate which middle turbinate medialisation intervention is effective of at all and compared with non-medialized middle turbinate cases.

METHODS:

Sixty patients aged 15-60 years of chronic sinusitis with/out polyposis with clinical as well as radiological evidence presented at ENT OPD – SDM College of Medical Sciences and Hospital, Dharwad in between November 2017 to June 2019 and underwent FESS and the patients were divided into three group, Group A – Bolgerization (n=20), Group B – Vicryl – conchopexy (n=20) and Group C - control during ESS (n=20). The three groups were compared in relation to postoperative patency persistence of ipsilateral middle turbinate/middle meatal region and correlated to postoperative symptom profile in terms of the middle turbinate status (medialized or lateralized or neither of the two).

RESULTS:

70% of the patients in group A and 80% of patients in group B who underwent medialisation of middle turbinate got complete improvement without any

recurrence of sinusitis compared to group C where the middle turbinate was not interfered with and developed recurrence of sinusitis due to re-obliteration of middle meatus by synechia between middle turbinate and lateral wall leading to lateralization of middle turbinate.

CONCLUSION

Broadly speaking, intervention with normal middle turbinate can be considered as one of significant steps during FESS that may help towards improvement of patient symptom outcome and outcome of the conventional procedure.

KEY WORDS: Middle Turbinate Medialization, Middle Turbinate Intervention, FESS, Chronic Sinusitis, Nasal Polyposis, Synechia