



Mucoceles of Paranasal Sinuses: A Single Centre Experience

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Abstract Describe experience of managing paranasal sinus mucoceles, with either endoscopic endonasal approach (EESS) or combined external with EESS approach. Retrospective study done at SDMCMS&H, between 2007 and 2019, on patients undergoing surgical excision of mucocele. Results described as mean, median, mode, percentages. Twenty-one patients were included, with male to female ratio (0.75:1), mean age (42.95 years). Commonest presentation were facial pain (42.85%), visual symptoms (28.57%), headache (23.80%). Signs included, proptosis (52.38%), facial deformity (23.80%). Imaging: showed frontal mucoceles (42.85%), fronto-ethmoid (38.09%), ethmoid (14.28%), sphenoid (4.76%). Orbital extension in 42.85%, sinusitis (33.33%), skull base erosion (23.80%). EESS or combined external and EESS approach (61.90%, 38.09% respectively) were performed. Complete excision of mucocele wall done. Recurrence in two cases (average-2.5 years), revision surgery performed without further recurrences. Either EESS or combined external and EESS approach used based on site and extension of mucoceles. Complete peeling of mucocele wall without obliteration of the sinus cavity was the mode of surgical management in all cases.

Keywords Mucoceles · Paranasal · Sinus · Frontal

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