

Title:

Different TECHNIQUES or the correction of dorsal septal deviation:

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ABSTRACT:

OBJECTIVE: THE OBJECTIVE OF THIS STUDY WERE TO DESCRIBE AND COMPARE BETWEEN FIVE TECHNIQUES USED TO CORRECT THE DORSAL SEPTAL DEVIATION BONY AND CARTILAGENOUS PARTS. STUDY DESIGN: THE AUTHER CONDUCTED A RETROSPECTIVE CLINICAL CHART REVIIIEW IN 130 patients the age range from (18-60) years, cases varied between 35 patients underwent Septorhinoplasty with close technique, 50 patients with Daniel technique, 55 patient with Dallas technique and 10 cases with toriumi technique. The corresponding author perform all operations over a period of 5 years at the department of

otorhinolaryngology, head and neck surgery at king Abdullah medical city, HOLY Makkah Saudi Arabia.

METHOD: Patient and diseases information were collected retrospectively and analysed after IRB approval.

RESULTS: - THERE WAS SUBJECTIVE IMPROVEMENT IN BREATHING ACCORDING TO THE PATENT SATISFACTION SCORE IN BREATHING WAS 85% OF CLOSE ONE AND 84.5% IN ALL OTHER TECHNIQUES. THIS DIFFERENCE WAS NOT STATISTICALLY SIGNIFICAN , BUT IN AESTHETIC POINT OF VIEW WITH PATIENT SATISFACTION SCORE THE LAST THREE TECHNIQUES GIVE A BEST RESULTS THAN

THE FIRST TWO TECHNIQUES. - OBSERVATION OF THE DORSAL AETHETIC LINES PRE AND POST OPERATIVE, WE OBSERVE THAT IN CLOSE TECHNIQUE AND EXTRACORPORIAL TECHNIQUES THE LINES NOT IN AN IDEAL SYMMETRY BUT IN DANIEL, DALLAS AND TORIUMI TECHNIQUES THE DORSAL LINES BECOME IN AN IDEAL SYMMETRY -THE NASOLIBIAL ANGLE, IN CLOSE TECHNIQUE WE FIND NO CHANGE IN THE ANGLES PRE AND POST OPERATIVE, IN EXTRACORPORIAL ONE THE ANGLES INCREASED MORE THAN THE IDEAL SO NEED REVISION SURGERY DUE TO WORKING IN A K STONE AREA, BUT IN DANIEL, DALLAS AND TORIUMI TECHNIQUES THE ANGLE IMPROVED AND REACH TO THE IDEAL RANGE SO THERE A SIGNIFICANT DIFFERENCE CALCULATED IN OUR STUDY.

CONCLUSION: TREATMENT OF DORSAL SEPTAL DEVIATION MAY BE TECHNICALLY CHALLENGING AND MANY FUNCTIONAL, STRUCTURAL, AND ESTHETICAL CONSIDERATION MUST BE TAKEN INTO ACCOUNT ON THE BASES OF THIS SERIES BOTH DALLAS AND TORUMI TECHNIQUE MAY BE CONSIDERED FOR CORRECTION OF DEVIATIONS IN THIS AREA. THE FUNCTIONAL IMPROVEMENT IN ALL TECHNIQUES DUE TO STRAIGHTENING OF THE SEPTUM AND REDUCTION OF THE TURBINATE SIZE IN MOST OF OUR PATIENT BY LASER ASSISTED TURBINOPLASTY