

Strategia leczenia guzów masywu szczękowo-sitowego

Strategy of the sinonasal tumors treatment

Eugeniusz Czecior, Grzegorz Namysłowski, Maciej Misiótek, Wojciech Ścierański, Aleksandra Polok, Grażyna Lisowska, Katarzyna Mrówka-Kata, Bogusława Orecka, Piotr Pawlas

Summary

Introduction. The sinonasal tumors belong to rare diseases. They state 0,2-0,8% of all the malignant neoplasms and about 3% of head and neck tumors. These tumors are two times frequent observed in men than in women, mainly between 50 and 70 years old. In the sinonasal complex besides the primary are seen also the metastatic tumors. They state about 1% of all tumors (kidney, testum, breast, pulmonary). **The aim of our study** was to retrospective analysis of the sinonasal tumors, treated in the ENT Department Silesian Medical University in Zabrze. The special attention was carried on the preoperative diagnostics and proper qualification to the surgical treatment. **Material and methods.** 26 patients treated in the ENT Department Silesian Medical University in Zabrze between 2000 and 2006 suffered from the sinonasal tumors were retrospectively analyzed. **Results.** In the histological examination in 4 patients the benign neoplasm and in 22 patients malignant tumors were diagnosed. 24 patients were surgically treated (2 patients were not qualify to surgery because of the general diseases). On the basis of the CT and MRI examination as well as the description of the surgical procedure we stated that in 13 cases the primary localization of neoplasm was the maxillary sinus, in 5 cases ethmoidal cells, in 3 nasal cavity. In one patient the estimation of primary tumor localization was not possible, because of the very large extension of the neoplasm. The choice of the surgical procedure was depend on the tumor extension and localization. In 19 cases lateral rhinotomy with different modifications was performed. In one case the cranial incision was done. In 8 patients with the infiltration of lateral nasal wall the medial maxillectomy were performed. In 8 other patients upper maxillary resection were done. In two cases the total maxillectomy were performed, in the next two lower maxillary resection. All the patients were postoperatively treated by radiotherapy.