

Technika chirurgiczna mikroendoskopowej operacji wewnątrznosowej u chorych z masywnymi i nawrotowymi polipami nosa i zatok przynosowych - doświadczenia własne

Surgical technique of endonasal micro-endoscopic operation in patients with massive and recurrence nasal polyposis -own experience

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Summary

The author presents modification of the well-known surgical techniques used in endonasal optically aided operations in the patients with massive and recurrent nasal polyposis. After septal correction the attachment of the middle turbinate and lower turbinate is identified. It helps to find an appropriate place to open a maxillary sinus through uncinectomy. Opened maxillary sinus makes possible to find orbital lamella. The posterior maxillary sinus wall as the anatomic point helps to find the anterior wall of sphenoid sinus through posterior ethmoidectomy. After finding choane it is possible to open sphenoid sinus without cutting the posterior part of the middle turbinate. From this part it is possible to continue the operation like in the posterior-to-anterior technique, because it is well known where is the ethmoid roof. The operation is finished after opening frontal recess and correction of the middle turbinate. I did 110 total endonasal sphe-noethmoidectomies using this technique in the patients with massive and recurrent nasal polyposis without any serious complications. I didn't have any problems with orientation in operative field even in very complicated cases.