

Przetoka perylimfatyczna jako problem diagnostyczny i leczniczy

Perylimphatic fistula: diagnosis and treatment

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Summary

Introduction. Diagnosis and management of perilymphatic fistula (PLF) is a controversial topic in the international neu-rotologic literature. An illustrative case of post traumatic PLF with clear surgical indications is presented. This manuscript also reviews the various clinical presentations, pathogenesis, diagnostic examinations, and management options of PLF. **Materials and methods.** Case report and literature review. **Results.** A 40 y/o female presented with paroxysmal vertigo, imbalance and severe sensorineural hearing loss (SNHL) following minor occipital head trauma from a fall six months prior to presentation. Laboratory examination included intermittently positive fistula sign on videonystagmo-graphy. Patient failed to respond to trials of pharmacologic treatment and bedrest and ultimately underwent surgical exploration and repair. Patient had earlobe fat placed in the round and oval windows. Postoperatively, she had prompt resolution of vestibulopathy and ultimate full return of sensorineural function. **Conclusions.** Patients with appropriate antecedent history demonstrating fluctuating SNHL and vestibulopathy, failing to respond to conservative medical treatments, should be considered for exploratory tympanotomy. In the absence of any other violations of labyrinthine integrity, connective tissue grafting of the round and oval windows should be performed even if no obvious flow of fluid is observed. This management protocol is safe and effective in properly selected patients.