Preoperative staging and surgical approaches for sinonasal inverted papilloma

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Abstract

Introduction

Sinonasal inverted papilloma (IP) is a rare but locally aggressive benign tumor. IP tends to recur after surgical resection, and is occasionally associated with exquisitely carcinomas (SCC). Most recurrent cases, especially those involving malignant transformation, are difficult to access through endoscopic procedures and are frequent sites of recurrence. Patients who underwent endoscopic resection with ESS+TA were classified into the endoscopic subgroup. Treatment of T4 tumors around the lamina papyracea and the tegmen of the ethmoid sinus is the first choice for T1 and T2 cases. Endoscopic surgery, including ESS, ESS combined with endoscope-assisted transantral approach (ESS+TA) was performed in the endoscopic subgroup. A total of 30 patients were treated for sinonasal IP between January 2002 and February 2006 at the Department of Otolaryngology-Head & Neck Surgery, Hokkaido University Hospital, Japan. The preoperative diagnosis of two cases was inflammatory nasal polyps, so MRI was not performed and they were excluded from the study. No tumor recurrence was observed in either case. In six patients, surgery was performed for recurrent IP and they were also excluded from the study. The remaining 22 patients (15 males and 7 females) ranged in age from 28 to 86 years (mean, 57 years; median, 58 years).

Methods:

A total of 30 patients were treated for sinonasal IP between January 2002 and February 2006 at the Department of Otolaryngology-Head & Neck Surgery, Hokkaido University Hospital, Japan. The preoperative diagnosis of two cases was inflammatory nasal polyps, so MRI was not performed and they were excluded from the study. No tumor recurrence was observed in either case. In six patients, surgery was performed for recurrent IP and they were also excluded from the study. The remaining 22 patients (15 males and 7 females) ranged in age from 28 to 86 years (mean, 57 years; median, 58 years).

Results

A total of 30 patients were treated for sinonasal IP between January 2002 and February 2006 at the Department of Otolaryngology-Head & Neck Surgery, Hokkaido University Hospital, Japan. The preoperative diagnosis of two cases was inflammatory nasal polyps, so MRI was not performed and they were excluded from the study. No tumor recurrence was observed in either case. In six patients, surgery was performed for recurrent IP and they were also excluded from the study. The remaining 22 patients (15 males and 7 females) ranged in age from 28 to 86 years (mean, 57 years; median, 58 years).

Conclusions

The preoperative staging of IP, especially by MRI, is useful for selecting patients who can be managed by endoscopic approaches, resulting in lower tumor recurrence and morbidity. To prevent recurrence of IP, careful consideration should be given to the selection of endoscopic approaches for patients with stage T3 extension.

Bibliography