BACK AND FORTH ENDOSCOPIC SEPTOPLASTY: TECNIQUE AND RESULTS

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ABSTRACT

INTRODUCTION

A back-and-forth endoscopic septoplasty (EBFS) is described as an acceptable procedure that can be used as an alternative to traditional techniques. This is a report of an endoscopic back-and-forth septoplasty (EBFS). METHODS: From January 2005 to November 2008, 243 patients underwent EBFS at the Department of Otorhinolaryngology, San Raffaele Scientific Hospital, Milan, Italy. RESULTS: From January 2005 to November 2008, 243 patients underwent EBFS at the Department of Otorhinolaryngology, San Raffaele Scientific Hospital, Milan, Italy. 204 of the patients were males and 39 were females, with age range from 17.5 to 78 years. Among these patients, 70% were nasal airway obstruction (NAO), 24% were nasal obstruction due to allergies, and 6% were other causes such as trauma. METHODS: The surgical indication was based on the patient's symptoms and nasal endoscopy findings. The surgical technique was based on the principle of conservative surgery, with minimal manipulation of the nasoseptal area. The nasal septum was divided into two parts: the anterior part and the posterior part. The anterior part was divided into two subparts: the superior part and the inferior part. The posterior part was divided into two subparts: the superior part and the inferior part. The surgical technique was performed in a back-and-forth manner, with the surgeon moving from one side of the nose to the other side of the nose. RESULTS: Of the 243 patients, 74.1% experienced resolution of nasal airway obstruction, while 16.4% experienced only improvement. 9.5% noted the persistence of symptoms. All patients were followed for at least six months, with an average follow-up of 18.2 months. CONCLUSION: EBFS is a viable alternative to traditional endoscopic septoplasty and offers several advantages, including minimal manipulation of the nasoseptal area, a direct-targeted route, and a natural transition between septoplasty and endoscopic sinus surgery. Additionally, endoscopic septoplasty facilitates the interruption of connective-tissue fibers using a ball-shaped double-ended probe in a back-and-forth direction (Fig. 2c, d). Patients undergoing EBFS in our series had a higher rate of symptom resolution and improvement compared to traditional endoscopic septoplasty. This is likely due to the less aggressive surgical technique and minimal manipulation of the nasoseptal area, which allows for a more conservative approach to septal surgery.

SURGICAL TECHNIQUE

EBFS is a back-and-forth endoscopic septoplasty technique that can be used as an alternative to traditional techniques. METHODS: From January 2005 to November 2008, 243 patients underwent EBFS at the Department of Otorhinolaryngology, San Raffaele Scientific Hospital, Milan, Italy. RESULTS: Of the 243 patients, 74.1% experienced resolution of nasal airway obstruction, while 16.4% experienced only improvement. 9.5% noted the persistence of symptoms. All patients were followed for at least six months, with an average follow-up of 18.2 months. CONCLUSION: EBFS is a viable alternative to traditional endoscopic septoplasty and offers several advantages, including minimal manipulation of the nasoseptal area, a direct-targeted route, and a natural transition between septoplasty and endoscopic sinus surgery. Additionally, endoscopic septoplasty facilitates the interruption of connective-tissue fibers using a ball-shaped double-ended probe in a back-and-forth direction (Fig. 2c, d). Patients undergoing EBFS in our series had a higher rate of symptom resolution and improvement compared to traditional endoscopic septoplasty. This is likely due to the less aggressive surgical technique and minimal manipulation of the nasoseptal area, which allows for a more conservative approach to septal surgery.