Endoscopic Treatment with Radiofrequency in Larynx Cancer
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ABSTRACT
Descriptive, prospective and retrospective study of patients with glottic and supraglottic malignant tumors undergoing microsurgery of the larynx with Rfq between March 2004 and December 2009.

Methods and Materials
Fourty-four patients were treated, 38 males and 6 females. 39 had glottic and 5 supraglottic tumors. Two patients were treated with surgery + Qt/Rt (one of them had a neuroendocrine carcinoma and the other a T3 supraglottic cancer).

Results
The aim of this study is to demonstrate that microsurgical treatment with Rfq equipment, protected knife and conventional set for microlaryngeal surgery was used. Endoscopic cordectomies were performed in two different settings. Surgical procedure consisted in in bloc or fragmentary resection of the tumor. Intraoperative biopsies were performed to evaluate superficial and deep free margins. The local control rate of the disease with an average follow up of 2.3 years was 90.9% (40/44). Total laryngectomy and endoscopic microsurgery of laryngeal cancer. 3rd European Congress of the European Society for Head and Neck Surgery. 10-13 November 2004 - Turín, Italy.

Conclusion
Microsurgical resection of malignant laryngeal tumors with uncontrolled radiofrequency is an effective treatment, with similar local control rates, complications and morbidity as the reported with CO2 laser.

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REFERENCES
2. Basterra J, Frías S, Alba J, Perez A, Zapater E. Comparative study of acute tissue damage produced by the CO2 laser (2-3W, 10 and 200 mm lens microscope, Kleinsasser and distending laryngoscopes, Rfq equipment, protected knife and conventional set for microlaryngeal surgery). He reports that it is the same with the cutting mode, and higher with the coagulation mode. The use of Rfq would possibly cause less tissue damage because of its physical properties characteristics.