Cholesteatoma is characterized by the presence of keratinized squamous epithelium in the middle ear and other areas of the bony labyrinth, but its development remains unclear despite the multiplicity of publications. The age prevalence ranged from 30 to 70 years. There are more patients with this disease in Caucasians than in African descendants, much less seen in Asian countries (except India).

Microscopical examination (3, 4) showed that the epidermalization process can be observed in several histological and clinical stages, and the main end point is the invasion of the new bone. Yetis, Satar, and Aydin³ have compared patients with acquired cholesteatoma, other patients with chronic otitis media, without cholesteatoma, and control groups. The increased expression of TNF-α has been shown in cholesteatoma cases, the qualitative expression of this factor was not a good predictor of cholesteatoma recurrence at our data.

Important to note that 3 (37.5%) patients in the recurrence group and only 1 (5.0%) in the control group had surgery after 24 years of the first surgery. But even, in detecting the data and analyzing the groups there were similarities between them (p > 0.05).

RESULTS: The mean expression of TNF-α was slightly higher in the group with recurrence than in the control group, respectively 1.7 ± 1.4 and 1.2 ± 1.3, but was not detected statistically significant difference between groups (p = 0.456).

CONCLUSION: Although several articles shows in vitro a bone destruction action of TNF-alpha in cholesteatoma cases, the qualitative expression of this factor was not a good predictor of cholesteatoma recurrence at our data.

REFERENCES