DACRYOCYSTORHINOSTOMY ENDOCOPIC ENDONASAL: ANALYSIS OF 17 CASES

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ABSTRACT

Nasolacrimal duct obstruction is a common change clinically manifested by the presence of epiphora and/or dacryocystitis. It presents a varied etiology. Although drug therapy may resolve the symptoms, the definitive approach consists of surgical procedure to restore patency of the lacrimal drainage system. The objective is to analyze the technique and evaluate the success of endoscopic dacryocystorhinostomy to remove obstructions in the lacrimal ducts of 17 patients operated at a University Hospital.

METHODS AND MATERIALS

This is a retrospective study. All 17 surgeries were performed from May 2006 to January 2011. Variables of interest were age, gender, duration, clinical presentation, etiology, surgical technique, use of silicone tubes, complications and postoperative success.

In the preoperative, use of systemic antibiotic (amoxicillin-clavulanic 875 mg 12/12h or ciprofloxacin 12/12h) and corticosteroids Successful surgery: absence of symptoms and tear flow after 7 months of follow-up.

INTRODUCTION

We noticed that females were predominant (70.59%). There was a eleven women, one girl and five boys, ages 3 to 71 years (average age 40.11) performed by unciform process incision and posterior flap of lacrimal sac. The most involved side was right (n=11). The etiology was idiopathic and the most predominant clinic was dacryocystitis. The silicone tube was used in 2 cases. We obtained a primary success of 94.11%. We used the same technique for all cases Complication: major bleeding in 1 case (anterior tamponade).

RESULTS

Dacryocystorhinostomy endoscopic endonasal performed by unciform process incision and posterior flap, is a good alternative on the treatment of nasolacrimal duct obstruction. It is a good technique for the development surgical skills of residents and has a great rate of success.

DISCUSSION

Dacryocystorhinostomy endoscopic endonasal performed by unciform process incision and posterior flap is a good alternative on the treatment of nasolacrimal duct obstruction. It is a good technique for the development surgical skills of residents and has a great rate of success.

CONCLUSIONS

Primary success rate in most cases. Endoscopic surgery is a safe technique with excellent results for nasolacrimal duct obstruction. Also, it is an excellent surgical option for otorhinolaringology residents in University Hospitals.

REFERENCES