Endoscopic treatment of benign sino-nasal tumours

Vickash Jankee, MBChB; Priya Achar MS(ENT), MSc, DOHNS; Venkat Srinivasan, FRCS (ORL-HNS)

ABSTRACT

INTRODUCTION

Nasal and paranasal sinus tumours are rare; reported at around 600 cases per year in the UK1 with head and neck cancers making up 3% of all new cancer cases2. Of the benign tumours, the commonest forms are inverted papillomas which make up 45% of all nasal and paranasal sinus tumours. Sinonasal tumours were historically managed with open surgery. However, advances in endoscopic techniques have offered a safer and potentially more effective way of removing these tumours. This paper aims to shed light on the effectiveness of the endoscopic management of benign sinonasal tumours and look into the complications associated with endoscopic approach including recurrence rates.

METHODS AND MATERIALS

A retrospective case note review of patients having endoscopic surgery for benign sino-nasal tumours between 2001-2010. Exclusion criteria: Tumours eroding maxillary antrum, and extending into orbit, soft tissue, skull base or intra-cranially. Review of case series in literature showed identical recurrence rate between the two types of surgery (9%) (See Table); Meta-analysis showed greater difference in recurrence between the two types of surgery (Endoscopy 12% vs. Open 19.5%).

CONCLUSIONS

It is beneficial to patients with benign sino-nasal tumours as it offers a similar, if not decreased, chance of recurrence with additional benefits of fewer complications and scarring. They also have a potential for day-case surgery in selective circumstances.

REFERENCES