



A RETROSPECTIVE STUDY OF FUNCTIONAL OUTCOMES IN PATIENTS OPERATED FOR MODIFIED RADICAL MASTOIDECTOMY AT TERTIARY CARE CENTRE, AHMEDABAD.

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ABSTRACT

Background: Chronic otitis media is inflammatory process in middle ear space that results in long term, or more often permanent change in tympanic membrane including atelectasis, dimer formation, perforation, tympanosclerosis, retraction pocket development or cholesteatoma.

Classification of chronic otitis media (COM) into

- 1) COM with/without cholesteatoma (squamosal/mucosal)
- 2) Chronic inactive otitis media
- 3) Chronic inactive otitis media with frequent reactivation

Aims: To assess hearing improvement in patients undergoing Modified radical mastoidectomy. **Study Design:** A Retrospective study. **Setting:** ENT Department GMERS MEDICAL COLLEGE AND HOSPITAL SOLA, AHMEDABAD **Materials and Methods:** It was a retrospective study carried out in a tertiary care centre ENT DEPARTMENT SOLA, AHMEDABAD for a period of one year from JANUARY 2022 To JUNE 2022. 50 cases OPERATED FOR MODIFIED RADICAL MASTOIDECTOMY were included in this study. The parameters included in the study were age, gender, TYPE OF THE DISEASE, type of operation and pre operatively audiogram and post operatively audiogram. Data were analysed **Result-** Out of 50 patients undergoing modified radical mastoidectomy, 46 patients have improved hearing and getting dry, self cleansing ear **Conclusions:** Modified radical mastoidectomy is ideal procedure for cholesteatoma or chronic otitis media atticofacial type. It gives advantage of hearing improvement, gives dry, self cleansing healthy cavity in ear.

KEYWORDS

Middle Ear, mastoidectomy, cholesteatoma, function Outcomes

INTRODUCTION :

Chronic otitis media is inflammatory process in middle ear space that results in long term, or more often permanent change in tympanic membrane including atelectasis, dimer formation, perforation, tympanosclerosis, retraction pocket development or cholesteatoma.

Classification of chronic otitis media (COM) into

- 1) COM with/without cholesteatoma (squamosal/mucosal)
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Cholesteatoma is an erosive process defined by trapped squamous epithelium that produces and accumulates desquamated keratin debris. It can be divided into two general categories : congenital and acquired.

Every patient with COM (SQUAMOSAL) having symptoms of long standing foul smelling ear discharge, ear ache, reduced hearing etc with otoscopic finding suggestive of visible cholesteatoma flakes, retraction scutum erosion. Diagnosis is confirmed by microscopic examination, HRCT temporal bone, MRI temporal bone and with audiological evaluation.

Surgery is mainstay treatment of patient with COM (SQUAMOSAL TYPE). On basis of extension of disease it is classified as

1. Simple (cortical, complete) mastoidectomy
2. Modified radical mastoidectomy
3. Radical mastoidectomy.

Depending on preserving posterior superior meatal wall, it is classified into canal wall up mastoidectomy and canal wall down mastoidectomy.

Modified radical mastoidectomy is done when cholesteatoma is unresectable, it has advantage over canal wall up mastoidectomy for complete removal of cholesteatoma.

AIMS AND OBJECTIVE

- 1) To assess hearing improvement in patients undergoing canal wall down mastoidectomy.
- 2) To assess effectiveness of canal wall down mastoidectomy in eradication of disease and provision of dry ear in patients with squamosal type (CSOM1)

MATERIALS AND METHODS

It was a retrospective study carried out in a tertiary care centre ENT DEPARTMENT SOLA, AHMEDABAD for a period of one year from APRIL 2021 To APRIL 2022. 50 cases undergoing modified radical mastoidectomy

Inclusion Criteria

- All patients with extensive cholesteatoma proven from clinically as well as radiologically.
- All patients with written informed consent

Exclusion Criteria

- All Patients who have limited disease, CSOM (mucosal type).
- All patients who do not give consent for the study

DISCUSSION

Out of 50 chronic otitis media patients who presented to ENT OPD, GMERS SOLA, Ahmedabad. All underwent modified radical mastoidectomy. Modified radical mastoidectomy is the term used to describe an operative technique done for managing cholesteatoma in which all diseased tympanomastoid air cells are removed, everted and exteriorized to external auditory canal with reconstruction of middle ear transformer mechanism. Modified radical mastoidectomy have low rate of recurrence of disease compare to intact canal wall technique. It has advantage of reduced air bone gap and provide healthy cavity. Out of 50, 46 patients have decrease air bone gap, with 4 patients having no improvement.

CONCLUSIONS

Most of the patients come to OPD with complaint of ear discharge and reduced hearing. Modified radical mastoidectomy done on the basis of extent of disease, CT scan finding. Modified radical mastoidectomy gives reduced air bone gap and healthy, self cleansing cavity

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