Endoscopic-assisted septoplasty versus traditional septoplasty: assessment by the NOSE scale

Context Nasal obstruction is a very common complaint, which may be caused by various causes, one of the most important being septal deviation. Many techniques have been described to correct these septal deviations since the middle of 19th century. There have been several modifi cations since its inception. The application of endoscopic techniques to correct septal deformities was initially described by both Lanza and colleagues and by Stammberger in 1991. **Aims** Comparing the effi cacy of endoscopic septoplasty with traditional septoplasty in the treatment of cases with septal deviations. **Patients and methods** Thirty cases complaining mainly of nasal obstruction due to signifi cant septal deviations were selected. They were randomly divided into two groups: group A patients underwent endoscopic septoplasty and group B underwent traditional septoplasty. The Nasal Obstruction Symptom Evaluation (NOSE) scale was an important step in assessment. **Results** The two procedures are suitable to correct septal deformities, with a slight upper hand for the endoscope in particular cases. We highlight in this study the advantages and disadvantages of the use of the nasal endoscope to correct nasal septal deviation. **Conclusion** Although mainly used in sinus surgery, the endoscope has also found its way in nasal septal surgery as it facilitates accurate identifi cation of the pathology due to better illumination, improved accessibility to remote areas and magnifi cation. It allows precise resection of the pathological areas without the need of an extended dissection. Endoscopic septoplasty is associated with a signifi cant reduction in the patient's morbidity in the postoperative period due to limited extent of fl ap dissection and limited manipulation and resection of the septal framework. However, the endoscope has its own limitations which include loss of binocular vision and the need for frequent cleaning. The NOSE scale also correlates well with the postoperative results of the study.

Keywords: endoscopic septoplasty, NOSE scale, septal deviation, traditional septoplasty