

البحث السابع:

عنوان البحث باللغة الانجليزية:

The use of a Tympanostomy Tube in Preventing Retraction Pockets After Canal Wall- Down Mastoidectomy: A 7-Year Experience in Fayoum Province, Egypt."

Abstract:

Objective: The objective of this study is to determine if tympanostomy tube (TT) insertion can decrease the formation of retraction pockets (RP) and consequently recurrence of cholesteatoma after canal wall reconstruction (CWR). **Design:** Retrospective comparative study. **Setting:** A tertiary care medical center. **Methods:** Medical records about patients having cholesteatoma was reviewed. Data included were patients' age, sex, pre- and postoperative audiograms, tympanograms, eustachian tube function tests, radiological findings, surgical procedure, and surgical results as regard recurrence, residual, retraction pocket (RP) and the use of tympanostomy tubes (TT). Patients were classified into group 1 in which TT was not used and group 2 in which TT was used. **Results:** 73 patients (77 ears) having cholesteatoma were included in the study. The no TT group was 43 ear with mean age 28.9 ± 10.4 years while the TT group was 34 ear with mean age 28.9 ± 10.4 years. The recurrence of RP was higher significantly in the no TT group (15 cases, 34.8%) than the TT group (4 cases, 11.7%) (P -value=0.03). In addition, 3 cases in the no TT group (7%) had recurrence of cholesteatoma in comparison to 0% in the TT group (P -value=0.03). 2 cases in the no TT group (4.7%) and 2 cases in TT group (5.9%) had otorrhea. 23.2% of the no TT group needed revision TT placement surgery. TT had an effect on hearing outcome as hearing improved in the TT group in 82.4% of cases in comparison to 58.1% of cases in the no TT group (P -value =0.02). Moreover, the postoperative air-bone gap in the TT group was better significantly than the no TT group (P -value=0.02). **Conclusion:** The use of tympanostomy tube simultaneously with CWD mastoidectomy with reconstruction is a significant technique that can prevent retraction pocket formation and recurrent cholesteatoma with better hearing outcome.