

Summary and conclusion

Nasal obstruction is a very common complaint, which may be caused by various causes, and one of the most important causes is septal deviation.

Many techniques have been described to correct these septal deviations since the middle of nineteenth century. There have been several modifications since its inception.

The application of endoscopic techniques to correct septal deformities was initially described by **(Stammberger, 1991)**. Since that time, many authors began to use an endoscope in correction of septal deviations.

The aim of our study was to compare efficacy of endoscopic septoplasty with traditional septoplasty in treating cases having septal deviations. In our study, 30 cases complaining mainly of nasal obstruction due to significant septal deviations were selected. They were divided into two groups:

Group A: 15 patients underwent endoscopic septoplasty.

Group B: 15 patients underwent traditional septoplasty.

Each patient was subjected to a preoperative assessment protocol that included a thorough history taking, nasal endoscopic examination and CT scan of the nose and paranasal sinuses.

Postoperatively, all patients were viewed in the outpatient clinic, three times weekly during the first week then once weekly for the next three weeks then every 2 weeks for 2 months. They were subjected to an assessment protocol similar to the preoperative one.

In our study, we didn't find any significant difference in the preoperative results between both groups as regards age, sex, duration, side of nasal obstruction, number of patients having associated symptoms, types of septal deformities and the preoperative values of the means of the subjective and objective assessment. So, the preoperative circumstances were similar between both groups, consequently any expected difference in the postoperative results would depend mainly on the surgical technique used in each group.

Results of our study showed that 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 the disadvantages of the use of the nasal endoscope to correct nasal septal deviation.