

Short Communication

Septoplasty: Study of Prognostic Factors of Success (About 250 Cases)

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Abstract

Background: Septoplasty is a common surgical procedure in ENT where the objective is essentially functional and which allows the correction of septal deviations responsible for discomfort and alterations of respiratory function.

INTRODUCTION

The aim of our work is to describe the epidemiological, clinical, diagnostic and therapeutic aspects, to evaluate the surgical result and its impact on the quality of life and to identify the prognostic factors for the success of septoplasty.

METHODS

It was a retrospective study including 250 patients operated on for a septoplasty collected over a 6-year-period from January 2013 to December 2018. The diagnosis was made on clinical and endoscopic criteria. The evaluation of our results was made using 2 tools: NOSE scale and the visual satisfaction scale.

RESULTS

In our series, there was a male predominance with a sex ratio of 1.4. The mean age of the patients was 32.7 years. The medical history was dominated by allergic rhinitis in 38.4% of cases. Nasal trauma was noted in 45.2% of cases. The average consultation time was 7 years. The functional symptomatology was dominated by the reason for consultation for all of our patients. A subjective quantification of respiratory discomfort by the NOSE score made it possible to divide them into 3 groups:

Group 1: Severe ON: 65.2% of cases.

Group 2: Moderate ON: 31.6% of cases.

Group 3: Mild ON: 3.2% of cases. Our analytical study of the epidemiological, clinical, paraclinical and therapeutic factors that may influence the functional results showed that: Severe or moderate overall discomfort, severe ON (NOSE scale > 50) or moderate (NOSE scale between 26 and 50), DS classified zone I, II, III according to the classification of Cottle, a quasi-obstructive deviation, a septal contact of the deviated part with the inferior turbinate and the practice of a CT of the facial mass were considered as a predictor of the success of septoplasty. Regarding the surgical technique: Endoscopic surgery was associated with better functional results for: Posterior septal deviations, posterior septal spurs, deviation of the ailerons at the level of the vomerine gutter. The placement of an X-ray film or a Silastic blade was correlated with a lower risk of postoperative complications. These factors should be considered before any indication for surgery.

CONCLUSION

Nasal obstruction has functional repercussions and a negative impact on the quality of life of patients often requiring the use of septoplasty.