

APPROACH TO BILATERAL TINNITUS MANAGEMENT.

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Abstract: *As a relatively common disorder, tinnitus represents the appearance of an auditory perception in the absence of auditory stimulation of the cochlea (up to 10-15 % people are affected from some grade of atypical perception) [1]. It is usually described as a ringing, clicking, hiss, roaring or buzzing sound [2]. Although the majority of these patients experience hearing loss, almost 10% of them do not present changes in hearing sensitivity on the evaluation of standard audiometry [1].*

Keywords: *tinnitus, hearing loss, atypical perception, standard audiometry.*

CERVICOTOMY FOR SOLITARY LATEROCERVICAL LIPOMA – CASE PRESENTATION–

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Abstract: *Cervical lipoma is a benign tumor made of adipose tissue, of soft consistency and with slow growth, usually asymptomatic.*

A male patient, 34 years old, with no previous pathological history in the field of ENT, presented to our clinic for a slightly painful, right lateral cervical swelling, which appeared approximately 2 months ago, with a progressive increase in size, unimproved under medical treatment, for investigations and specialized treatment. The excision of the right laterocervical tumor formation and the satellite adenopathy is performed.

At the one-month postoperative check-up, a soft, fine scar is found, without swelling at the right laterocervical level, without spontaneous pain, or when palpating the area.

The result of the histopathological examination is that of a lipoma for the main piece and a lymph node for the secondary pieces.

The purpose of this article is to differentiate solitary cervical lipoma from Madelung disease..

Keywords: *cervical lipoma, Madelung's disease, cyst.*

CHOLESTEATOMA OF THE MIDDLE EAR – CASE REPORT –

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Abstract: *Cholesteatoma is a benign tumor, white in color (“pearly tumor”), composed of keratinous*

detritus originating from epithelial desquamation. It can be considered an inflammatory pseudotumor with the capacity for invasion, bone lysis, and destruction at the level of the middle ear cavity and hyperplastic desquamation potential on the surface [1].

A 53-year-old male patient presented to our clinic for intermittent otorrhea and otalgia of the left ear that began approximately 3 years ago and progressive hearing loss that began approximately 4 years ago, unimproved under treatment and progressively worsening. A modified radical antromastoidectomy was performed, excision of the tumor, and histopathological examination – results: cholesteatoma..

INTERDEPENDENCE BETWEEN TINNITUS AND SUDDEN ONSET DEAFNESS

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***Abstract:** The correlation between tinnitus and sudden onset deafness is not causal but rather occur together and both may be precipitated or caused by acute noise trauma or another cochlear pathologies. Many patient with tinnitus also have a hearing loss, but many of them are unaware of it and postpone its correct diagnosis until it progressively worsens. This pathology usually occurs in patients with no history of ear disease.*

***Keywords:** tinnitus, sudden onset deafness, acute noise trauma, cochlear pathologies*

NASOSINUSAL ENDOSCOPIC SURGERY FOR SINONASAL INVERTED PAPILLOMA – A CASE REPORT–

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***Abstract:** Inverted papilloma is a benign tumor, having a unique histological appearance and arising from the membranes lining the nose and paranasal sinuses. It is well known for its aggressive nature, the tendency to recurrence, and malignization to squamous cell carcinoma. A 66-year-old male patient, known with a stroke in 2019 and hypertension presented to our ENT department for right nasal obstruction and headache for one year. Video-nasofibrosocopy revealed a solitary, irregular, lobulated, polypoid mass, located in the right nasal cavity, attached to the lateral wall. Nasal and paranasal sinuses CT scan reveals a solid, polypoid mass in the right nasal cavity, extended superiorly, to the middle nasal meatus and anterior ethmoidal cells, enlarging the ostiummeatal complex. The presumptive diagnosis of sinonasal inverted papilloma is established. The patient was submitted to nasosinusal endoscopic surgery with the complete excision of the tumor.*

Depending on the extension of the tumor, the surgeon will choose between nasosinus endoscopic surgery and an external approach. The main aim of the surgical treatment is to remove the tumor completely in order to reduce recurrence risks.

Keywords: *inverted papilloma, benign tumor, recurrence, malignancy*

RECURRENT UNILATERAL CHOANAL ATRESIA AFTER RADIOTHERAPY FOR NASOPHARYNGEAL CARCINOMA –A CASE REPORT–

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Abstract: *The nasopharyngeal cancer treatment of choice is radiotherapy, which determines locoregional severe side effects. Choanal atresia/stenosis is a rare complication of radiation therapy, which appears secondary to the detrimental impact of radiation on the nasal mucosa, increasing the risk of fibrosis. Usually is managed with endoscopic video-assisted endoscopic surgical recanalization using different techniques.*

We present the case of a 46-year-old male patient with a medical history of undifferentiated nasopharyngeal carcinoma treated with radiotherapy and polychemotherapy who showed symptoms suggestive of unilateral choanal atresia. The diagnosis was confirmed by endoscopic examination combined with a CT scan of the nasopharynx. The chosen treatment was video-endoscopic permeabilization with the aid of a powered microdebrider. The patient required revision surgery four months after for restenosis.

Because this cancer affects younger patients, a reasonable quality of life is essential. Thus, this study aims to highlight rare but severe complications of radiotherapy, which have profound long-term undesired consequences on patients' well-being. These effects can be recognized and appropriately treated through a standardized follow-up, improving patient overall satisfaction. A proper postoperative follow-up after atresia repair is also crucial in restenosis prevention

Keywords: *nasopharyngeal carcinoma, radiotherapy, choanal stenosis, restenosis*

SLEEP APNEA AS FIRST MANIFESTATION OF HEAD AND NECK CANCER – A CASE REPORT–

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Abstract: *In recent years increased attention has been directed towards obstructive sleep apnea (OSA) syndrome due to its growing prevalence and preventable severe health consequences.*

In addition to its association with cardiovascular, neurologic, metabolic, and psychologic comorbidities, the controversial link between OSA and cancer has been brought to light by many researchers.

The locoregional changes in pharyngeal architecture determined by tumor or associated lymphadenopathy can result in obstruction of the upper airway during sleep. Some cases of head and neck cancer presenting as sleep apnea as the first symptom have been reported in the literature. At the same time, oxygen desaturation and sleep fragmentation accompanying OSA can increase cancer risk and promote cancer growth through free oxygen radicals and inflammation.

To highlight the bidirectional relationship between OSA and cancer and the importance of proper treatment, we present the case of a 69-year-old woman with OSA secondary to grade 4 tonsillar hypertrophy. After surgical removal of the tonsils, an oropharyngeal squamous cell carcinoma diagnosis has been made. Polysomnographic studies performed before and after surgery are evaluated, and some particular findings are noted and discussed.

Keywords: *obstructive sleep apnea, cancer, polysomnography, tonsillar hypertrophy*

THE CHOICE OF THE APPROPRIATE SURGICAL INTERVENTION TYPE IN CHRONIC SUPPURATIVE OTOMASTOIDITIS –A CASE REPORT–

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Abstract: *Chronic suppurative otomastoiditis represents the chronic inflammation of the mastoid cells and represents an extracranial complication of improperly treated chronic otitis media. Otomastoiditis can be treated surgically. Multiple surgical techniques for total or classic mastoidectomy and partial mastoidectomy are described. The choice of the type of surgical intervention must be made following clinical and paraclinical investigations and the presence or absence of complications. [1], [3]*

The realization of this work uses a case study of a 56-year-old patient who complains of otorrhea, otalgia, and hypoacusis that started a year ago. He presents himself for the first time for a consultation in our department. The pure tonal audiogram objectifies a moderate mixed hypoacusis in the left ear. He returns for admission with a CT imaging examination for specialized treatment.

Imaging documentation of the pathology along with the knowledge of the regional anatomy, indications, and contraindications for the available surgical techniques and, last but not least, operative times are needed in order to choose the appropriate surgical intervention for each patient.

The choice of the appropriate type of surgical intervention, depending on the particularities of each patient, the evolution of the disease, and a correctly performed intervention can lead to successful surgical treatment with the healing of all pathological lesions without facing relapse or the appearance of early or later complication..

Keywords: *otomastoiditis; cavity; suppurative*

THE ROLE OF NASAL SURGERY IN MULTIMODAL MANAGEMENT OF OBSTRUCTIVE SLEEP APNEA SYNDROME – A CASE REPORT–

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Abstract: *Obstructive sleep apnea is a multifactorial disease, that left untreated, results in important health consequences and low quality of life. Nasal obstruction and upper airway collapse are essential factors in sleep apnea occurrence. Even though nasal and endoscopic sinus surgery in OSA has been proven to improve patients' overall satisfaction, the objective improvement of polysomnographic parameters remains controversial.*

We present the case of a 30-year-old man who presented at our ENT department with bilateral nasal obstruction and mouth breathing secondary to chronic nasal sinusitis with polyposis.

The patient also complained about chronic rhinopathy and diurnal somnolence. Due to high clinical suspicion, a polysomnographic study was performed, revealing a severe obstructive sleep apnea syndrome. Confronted with multiple levels of obstruction (nasal obstruction, high neck circumference, high Mallampati score), we decided to start the patient treatment management with nasal permeabilization. The postoperative evolution was favorable with a decrease in subjective symptoms. Polysomnography will be scheduled in order to quantify the nasal permeabilization effects on overall objective sleep apnea measurements.

This study aims to highlight the importance of multimodal, personalized management of sleep apnea with a focus on nasal surgical permeabilization. Particular attention should be drawn to nasal breathing re-education after surgical removal of nasal obstruction, as most patients continue to breathe through mouth even after surgery, invalidating the objective results of the polysomnographic examination.

Keywords: *OSA, nasal surgery, polypoid rhinosinusitis, management*

THE ROLE OF NASOPHARYNGEAL ENDOSCOPIC EXAMINATION AND BIOPSY IN NASOPHARYNGEAL NEOPLASIA -A CASE REPORT-

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Abstract: *Malignant nasopharyngeal tumors are a rare type of cancer that affects the upper part of the pharynx. These tumors are some of the most difficult tumors to diagnose in the initial stages of the disease, due to their generally asymptomatic evolution. Common forms of presentation are-cervical adenopathy, nasal obstruction or epistaxis, unilateral serous otitis, and neurological symptoms. A patient presenting with these symptoms must make the clinician think*

about this pathology. The detection of nasopharyngeal carcinoma is based on clinical symptoms and physical examination, with the nasopharyngeal endoscopy being the gold standard, but a definitive diagnosis requires a tissue biopsy from the lesion.

Keywords: nasopharyngeal carcinoma, endoscopy, biopsy