

## **CHRONIC REACTIVATED OTOMASTOIDITIS COMPLICATED WITH PERIPHERAL VESTIBULAR SYNDROME – CASE REPORT –**

**GEACAR Radu, STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINAROSIE Razvan**

***Abstract:** Chronic otomastoiditis is inflammation of the mastoid bone that is at least 3 months old. Definitive treatment of this pathology is strictly surgical, mastoidectomy must of course be accompanied by intravenous antibiotic treatment.*

*The patient, aged 42 years, was admitted for vertigo that started 5 hours ago, on movement, during the day, accompanied by occipital pressure, vomiting, and sensation of left ear inflated, without changes on otomicroscopic examination. The patient is unable to maintain a sitting position or orthostatism and also has nystagmus both in sitting and supine position. The history shows repeated episodes of otitis media treated with antibiotics.*

*The evolution of the patient was not favorable under infusible treatment, nystagmus and vestibular ataxia are maintained. Surgery was decided for the left mastoid inflammatory focus, modified radical left mastoidectomy, wall down was performed.*

*The local evolution and the acute vestibular syndrome were favorable 24 hours postoperatively, spontaneous nystagmus decreased in amplitude and frequency.*

*Mastoidectomy is the treatment of choice in this pathology and cannot be replaced by singular drug treatment.*

## **EXTENDED OTOMASTOID CHOLESTEATOMA AS A RESULT OF CHRONIC SUPPURATIVE OTITIS MEDIA – A CASE REPORT–**

**MIHALCEA Catalin, STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINAROSIE Razvan**

***Abstract:** Cholesteatoma contains keratin debris and is defined as an epidermal cyst located in the middle ear. This pathology is approached exclusively surgically. The objective is to eradicate the infection and obtain a safe and dry cavity. The surgical approach is multiple, depending on the extent of the cholesteatoma lesions and the presence or absence of its complications. [1],[3]*

*The realization of this work uses a case study of a 48-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 preliminary tonal audiogram objectifies a moderate mixed hypoacusis in the right 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 complications.*

**Keywords:** *cholesteatoma; white tumor (pearly tumor); cavity*

## **MANAGEMENT OF VOCAL FOLD PAPILOMA – A CASE REPORT–**

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**Abstract:** *Laryngeal papillomatosis is a benign epithelial tumor of viral cause. The Human Papilloma Virus (HPV) is incriminated, which currently has over 60 strains, the most frequently involved in laryngeal pathology being strains 6 and 11.*

*A 36-year-old male patient presented to our clinic in January 2022 for dysphonia that had started about 2 months ago and did not improve under medical treatment.*

*From the moment of the first consultation until the surgical intervention, the patient takes two doses of Gardasil 9.*

*Suspended microlaryngoscopy and excision of the tumor for histopathological examination are performed.*

*There are certain studies that affirm the presence of a benefit of the vaccine even in patients already infected with certain strains. Taking these studies into account and given the fact that between the 2 surgeries the patient received 2 doses of the Gardasil 9 anti-HPV vaccine, we can assume that the benefit of the vaccination is evident in his case as well.*

**Keywords:** *laryngeal papillomatosis, HPV, Gardasil 9, dysphonia*

## **RAPID-GROWING GLOTTIC TUMOR WITH ANTERIOR COMMISSURE INVOLVEMENT –A CASE REPORT–**

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**Abstract:** *Glottic cancer represents the most common localization of laryngeal cancer. Early glottic cancer (localized at the vocal cords level and/or anterior/posterior commissure) is a highly curable disease with considerable local control rates, regardless of treatment type. The*

*reason behind this successful outcome is probably the patients' tendency to present early at the hospital due to hoarseness, the main symptom in this localization. Nevertheless, some patients don't respond as favorably as the majority, and some factors implied in tumor prognosis were identified and described in the literature.*

*We present the case of a 72-year-old patient with progressively worsened hoarseness that debuted one year ago. Using video-assisted endoscopy and neck CT, a localized laryngeal tumor was identified, occupying 1/3 anterior region of both vocal cords and anterior commissure. Three weeks after the first presentation, when the patient was scheduled for surgical intervention to take a biopsy and make a definitive diagnosis, the tumor size was remarkably increased. Through this study, we want to emphasize the importance of early glottic cancer treatment, as only slight delays can significantly impact the outcome. At the same time, we point out the anterior commissure involvement as an essential factor involved in prognostic.*

**Keywords:** *laryngeal cancer, glottic cancer, prognostic, size*

## **SPHENOIDAL SINUSITIS WITH DIPLOPIA – A CASE REPORT –**

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**Abstract:** *Sphenoidal sinusitis is a rare pathology, difficult to diagnose in the initial stage due to the lack of specificity of the symptoms. This pathology can have severe complications due to the anatomical location of the sinus and its proximity to important structures. Delaying the diagnosis and implicitly the treatment can have irreversible consequences, such as damage of cranial nerves, meningitis, brain abscess, or cavernous sinus thrombosis. One form of presentation can be with visual symptoms such as diplopia.*

*Fungal rhinosinusitis plays an important role in this pathology, and has a variable clinical evolution, from indolent forms to potentially fatal ones. Although fungal sphenoid sinusitis is rare and is usually seen in immunocompromised individuals, sometimes it can appear without associated pathology.*

*Once the visual disturbance has occurred, the treatment should be instituted immediately to increase the rate of symptoms remission.*

**Keywords:** *sphenoidal sinusitis, fungal sphenoid sinusitis, diplopia*

## **SQUAMOUS CELL CARCINOMA OF THE VOCAL FOLDS – CASE REPORT –**

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**Abstract:** *Squamous cell carcinoma is the most common type of laryngeal cancer and accounts for approximately 95% of all malignant tumors at this level. It is characterized by an increased*

*frequency in men compared to women and the association between smoking and chronic alcohol consumption.*

*However, not all smokers and chronic alcohol consumers develop laryngeal cancer, so the inter-individual variation must be considered [1].*

*A 62-year-old man presented to our clinic for permanent dysphonia and periods of intermittent aphonia, which started approximately 8 months ago, did not improve under medical treatment and progressively worsened.*

*A suspended microlaryngoscopy was performed, excision of the tumor, and histopathological examination – results: squamous carcinoma.*

**Keywords:** *squamous cell carcinoma, vocal cords, smoking, NBI endoscopy*

## **SURGICAL TREATMENT EFFICIENCY IN REINTERVENTION FOR CHRONIC RECCURENT OTOMASTOIDITIS – A CASE REPORT –**

**ANTONESCU Malina, STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINAROSIE Razvan**

**Abstract:** *Chronic suppurative otomastoiditis can be treated surgically by total mastoidectomy or partial mastoidectomy, depending on criteria related to the extent and severity of the lesions and the presence of complications.*

*This paper will analyze a case study of a 27-year-old patient with chronic suppurative right otomastoiditis with an acute episode, with a history of right mastoidectomy eight years ago in another ENT department.*

*For both classic radical mastoidectomy and modified radical mastoidectomy, exact knowledge of loco-regional anatomical elements, indications, and contraindications for each surgical technique and operative times is imperative.*

*An accurate understanding of the anatomy of the middle ear, indications, and surgical steps avoids postoperative complications, with the successful removal of all pathological lesions.*

**Keywords:** *otorrhea, otomastoiditis, tympanic cavity, suppurative*

## **SURGICAL TREATMENT IN OTOMASTOIDITIS COMPLICATED WITH RIGHT PERIPHERAL FACIAL PARESIS – A CASE REPORT –**

**ANTONESCU Malina , STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINAROSIE Razvan**

**Abstract:** *The mastoidectomy constitutes the surgical intervention through which a single tympanoatico- mastoid cavity is formed, by removing the posterior wall of the duct and the external wall of the attic.*

*This is classified into partial mastoidectomy and total mastoidectomy, with distinct operative indications*

*For this paper, data from the specialized literature were analyzed from multiple bibliographic sources, as well as a case study of a 33-year-old patient with chronic recurrent otomastoiditis complicated with right peripheral facial paresis.*

*In both cases, of total mastoidectomy and partial mastoidectomy, it is necessary to know the exact loco-regional anatomical elements, the indications, and contraindications for each surgical technique and the operative times.*

*With a history that began in the 18th century, mastoidectomy is the surgical intervention that creates a unique tympano-atico-mastoid cavity, which can be performed by various techniques with different operative indications.*

**Keywords:** *partial, total, otomastoiditis, antrum, mastoid cells*

## **THE IMPORTANCE OF ANATOMICAL VARIATIONS OF SIGMOID SINUS IN PERFORMING MASTOIDECTOMY – A CASE REPORT –**

**POPESCU Anda , STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINAROSIE Razvan**

**Abstract:** *The sigmoid sinus is an important venous structure located in the mastoid cell system. The variability of the sigmoid sinus and its anatomical relationships to other structures within the temporal bone, such as the external auditory canal, facial nerve, and jugular bulb, is very important when performing mastoidectomy, in order to avoid intraoperative complications or incidents.*

*A 23-year-old female patient, without significant personal pathological antecedents, was referred to our ENT department for recurrent left ear discharge and left hearing loss, both symptoms starting over 13 years ago, associated in the last 3 weeks with dizziness and headache. After clinical examination and paraclinical investigations, a presumptive diagnosis of chronic otitis media with cholesteatoma was established and surgery is decided – canal wall-up mastoidectomy. Because of the position of the sigmoid sinus and the inability to completely remove the cholesteatoma, we decided the conversion to an open technique mastoidectomy. Our case report highlights the importance of the variability of sigmoid sinus in choosing the type of mastoidectomy (canal wall-up/canal wall-down), as well as in performing it.*

**Keywords:** *sigmoid sinus, mastoidectomy, anatomical variations*

## THE SURGICAL MANAGEMENT OF SIGMOID SINUS IN ANTROMASTOIDECTOMY – CASE REPORT –

**GEACAR Radu , STEFANESCU Cristian Dragos, ZAINEA Viorel, IONITA Gabriela-Irina, VOIOSU Catalina, RUSESCU Andreea, HAINĂROSIE Razvan**

***Abstract:** Malignant nasopharyngeal tumors are a rare type of cancer that affects the upper part of the The surgical procedure known as antromastoidectomy aims to remove pathological bone lesions that are located at the level of the antrum and mastoid cell block.*

*The patient aged 64 years, was admitted with otic symptoms that started about 6 years ago, progressively worsened until admission, and mild bilateral hearing loss that was confirmed by a simple tone audiogram as mild-moderate bilateral transmission hearing loss. The patient also presents with a right ear otalgia episode which subsides with the use of classical analgesic medication. On otomicroscopic examination of the right ear, the auditory meatus is covered with purulent secretions that have been aspirated, the tympanic membrane shows a large quasi-perforation due to the lack of posterosuperior and posteroinferior quadrants. The patient underwent a computer tomography of the native temporal stanzas which revealed the diagnosis of bilateral otomastoiditis. Taking into account the more accentuated symptoms in the right ear, it was decided to perform a radical walldown antromastoidectomy, in the right ear, in order to eliminate the inflammatory-infectious focus.*

*The evolution of the patient was favorable under infusible treatment with antibiotics, analgesics and gastric protectors.*

*The aim of the surgery is to drain the collection from the mastoid block and thus avoid further extracranial or endocranial complications.*

*Temporal stance computed tomography and liminal tone audiogram are imperative investigations, which are mandatory to be performed preoperatively. The particularity of this case is the proximity of the sigmoid sinus and the large size of the sigmoid sinus, a feature that can also be seen preoperatively on CT.*