



EMORY HEALTHCARE

*Surgical Technique:
Basic Principals and Current Concepts*

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Indications for ESS

- Chronic Sinusitis not responsive to maximal medical therapy
 - ✓ Polyps (obstructive)
- Mucoceles
- Silent Sinus Syndrome
- Complication of sinus disease
- Tumors
 - ✓ Nasal, sinus, and perisinus



Poor Indications for ESS

- Headache
 - ✓ 90-96% of patient self-diagnosed and primary care physician diagnosed “sinus headache” meet the IHS criteria for migraine headache
- Post-nasal drip
 - ✓ LPR most likely etiology
 - ✓ Wise SK, DelGaudio JM. AJR 2006.
- “Narrow Sinus openings”
- Cysts (non-obstructive)
 - ✓ Rarely symptomatic



“Sinus Headache” is Usually Migraine

- 96% of patients with a diagnosis of sinus headaches met the HIS criteria for migraine HA

Cady RK, Schreiber CP. Sinus headache or migraine? Considerations in making a differential diagnosis. *Neurology* 2002;58 (Suppl 6):S10-S14.

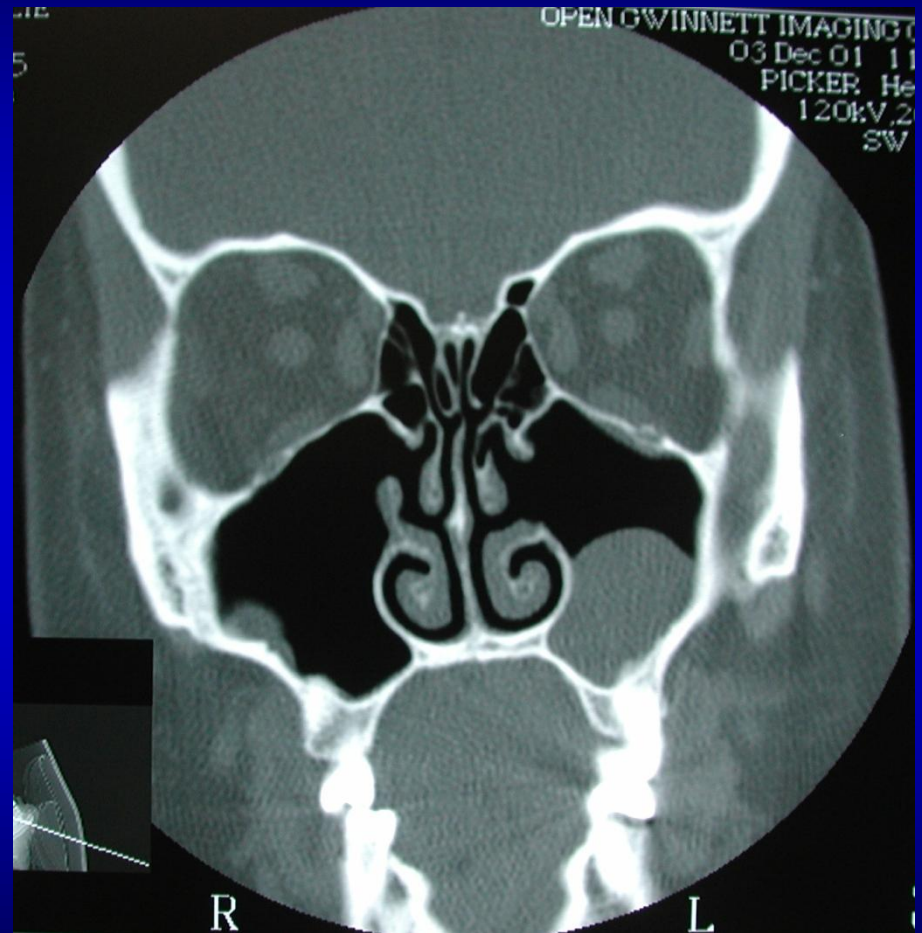
- 90% of 2524 patients with diagnosis of “sinus headache” met IHS criteria for migraine HA
 - ✓ Excluded those with sinus disease and previous diagnosis of migraine HA

Schreiber CP, et al. Physician diagnosed and patient self-described “Sinus Headache” is Predominately Migraine. *Arch Int Med.* 2004;164:1769-1772.

Preventable Complications

Poor Indications for Surgery

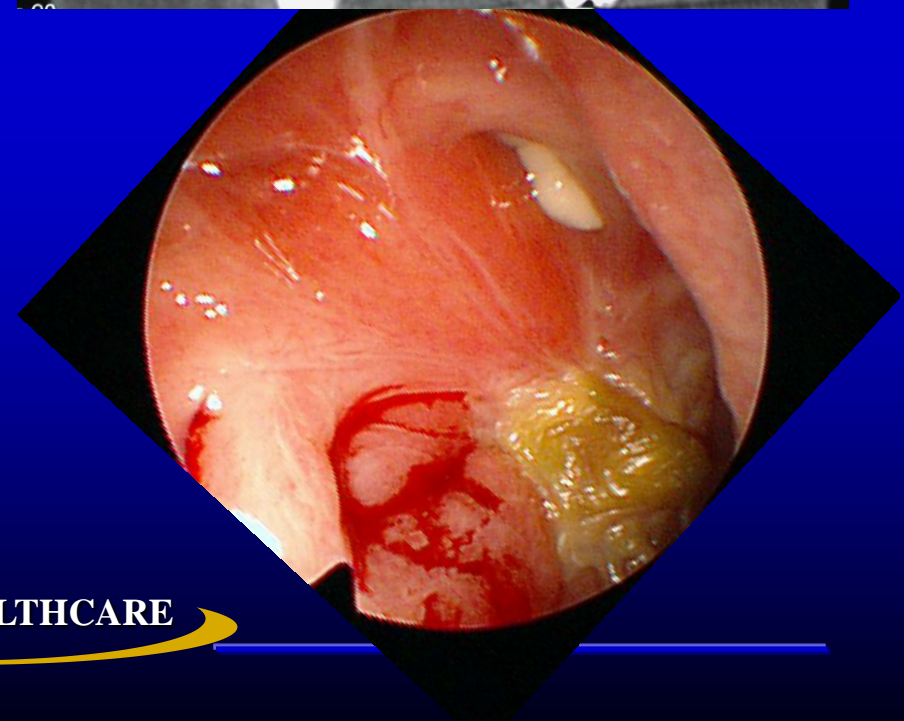
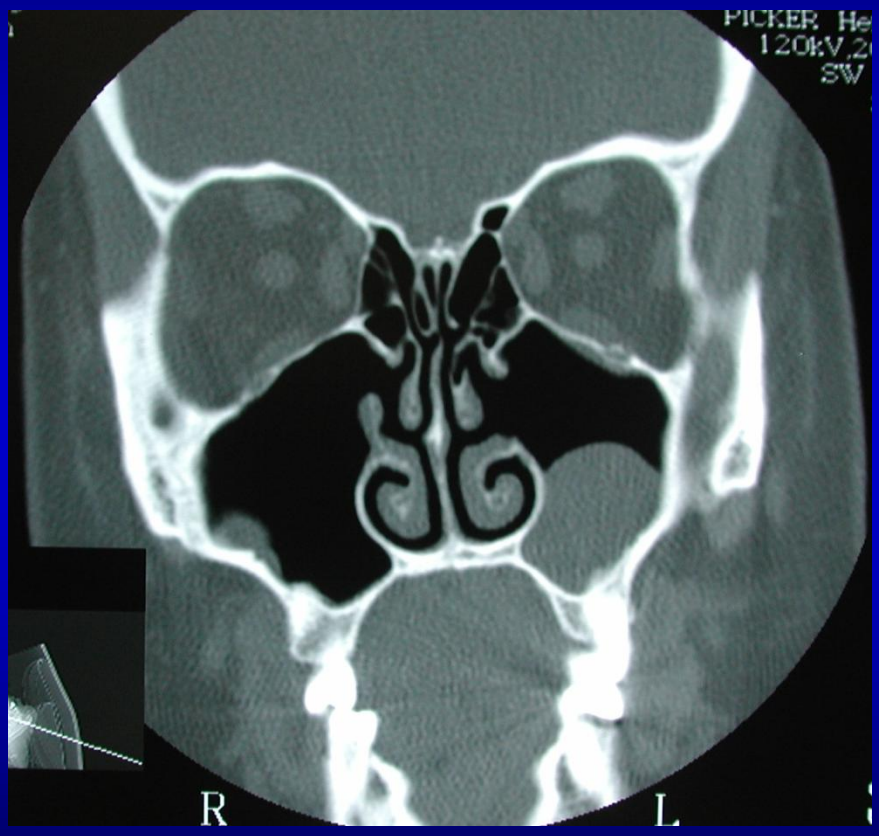
- Patient with left sided temporal pain
- No better after maxillary antrostomy and mucus retention cyst decompression





Complications

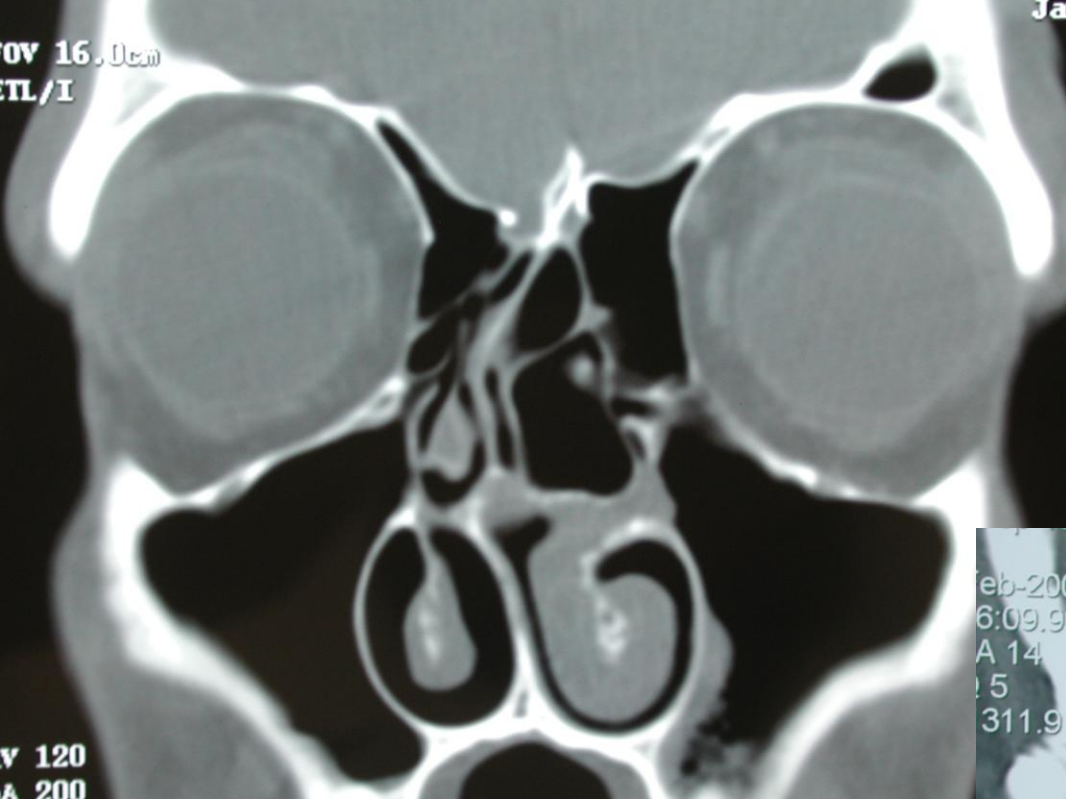
Poor patient and
procedure choice





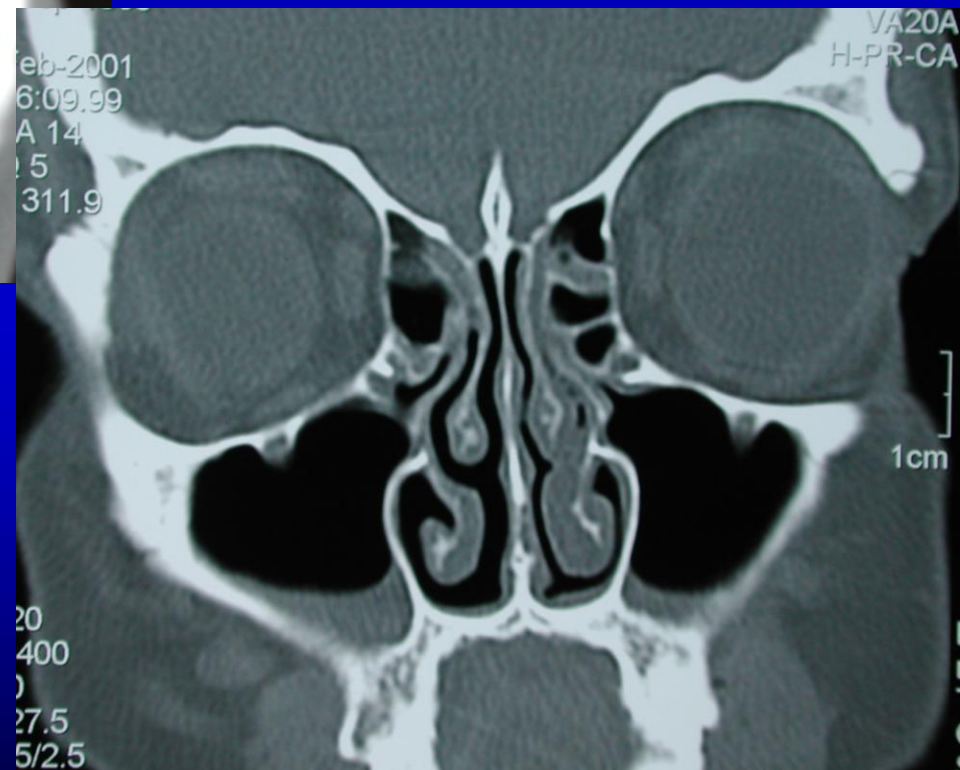
Appropriate surgical planning CT Scan

- Recognize Anatomy Preoperatively
 - ✓ Degree of surgery
 - ✓ Anatomic variations
 - ✓ Identify danger areas
 - ✓ Reduce surprises



Obstructive Inflammatory disease

V 120
A 200

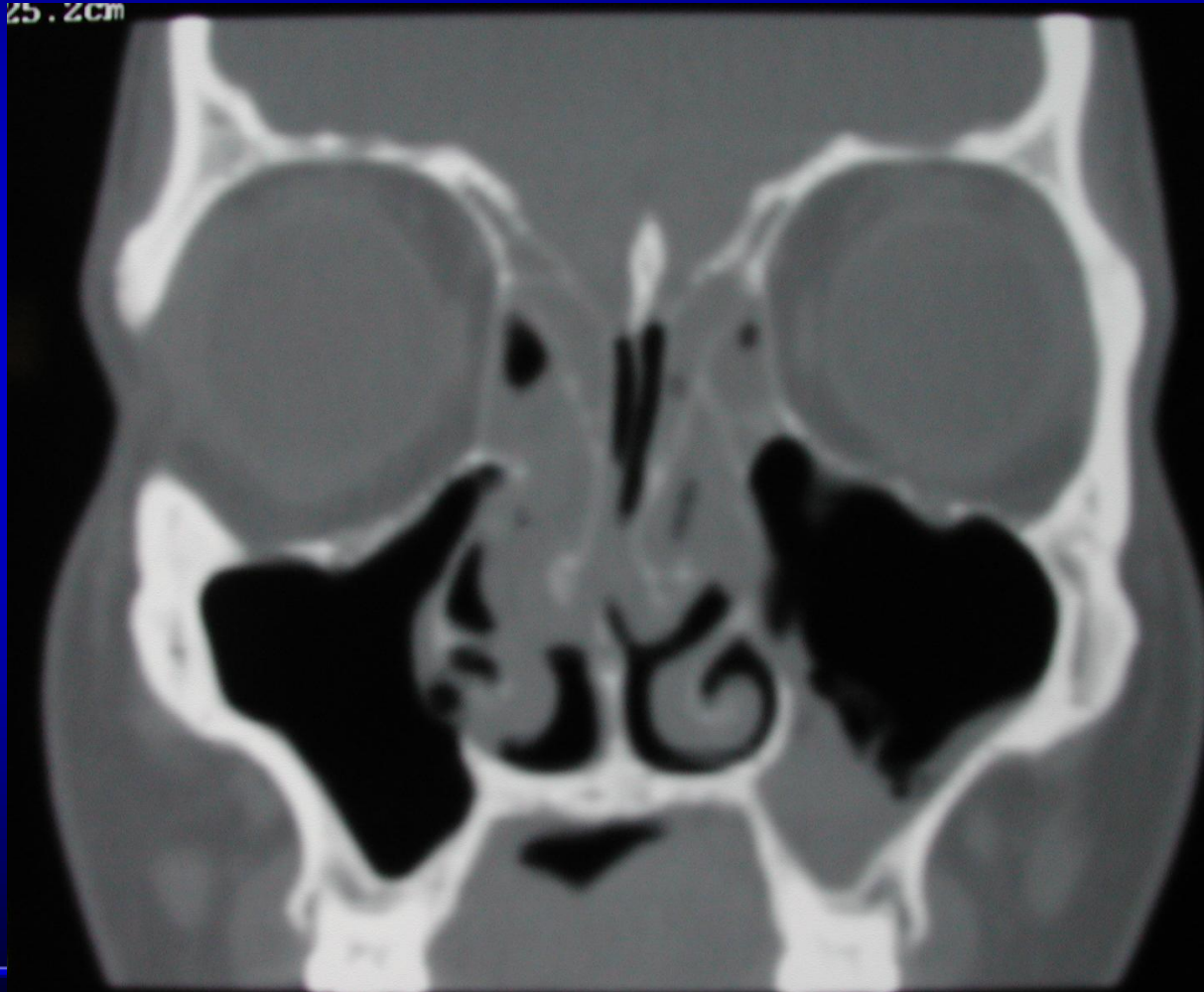


uTailor procedure to the
underlying disease
severity

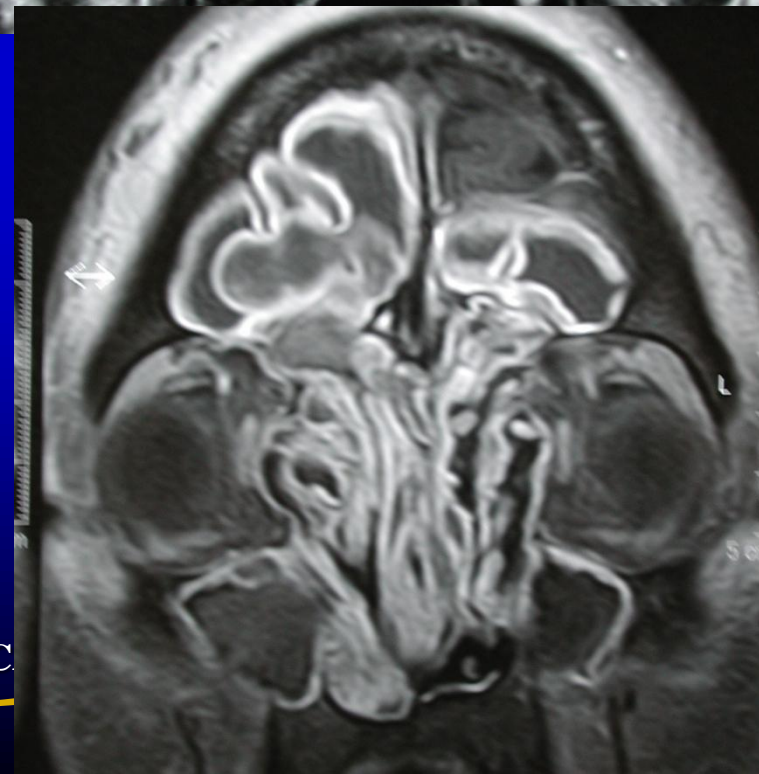
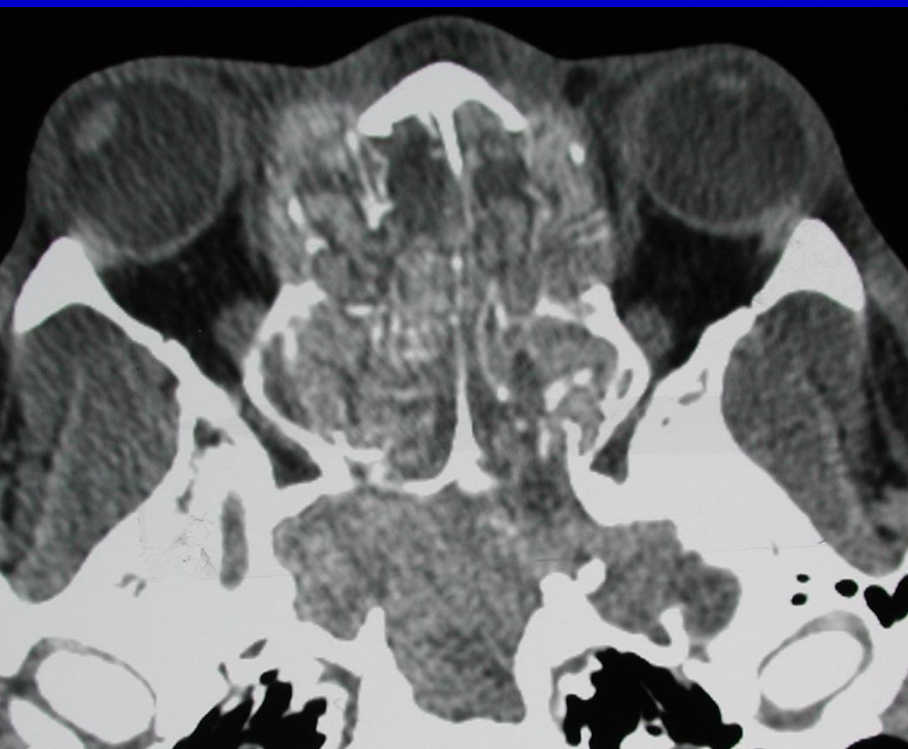
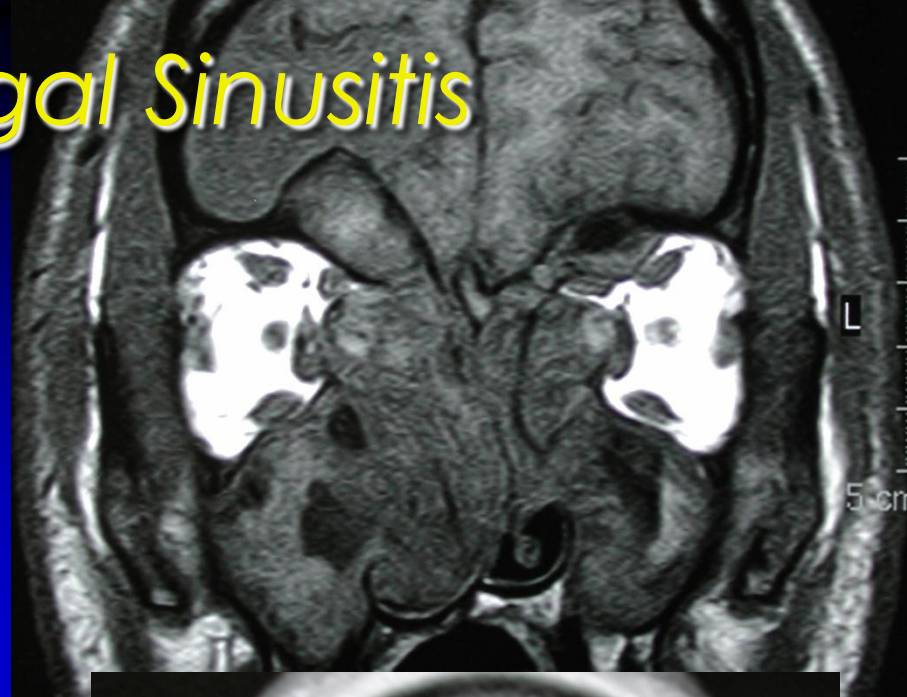
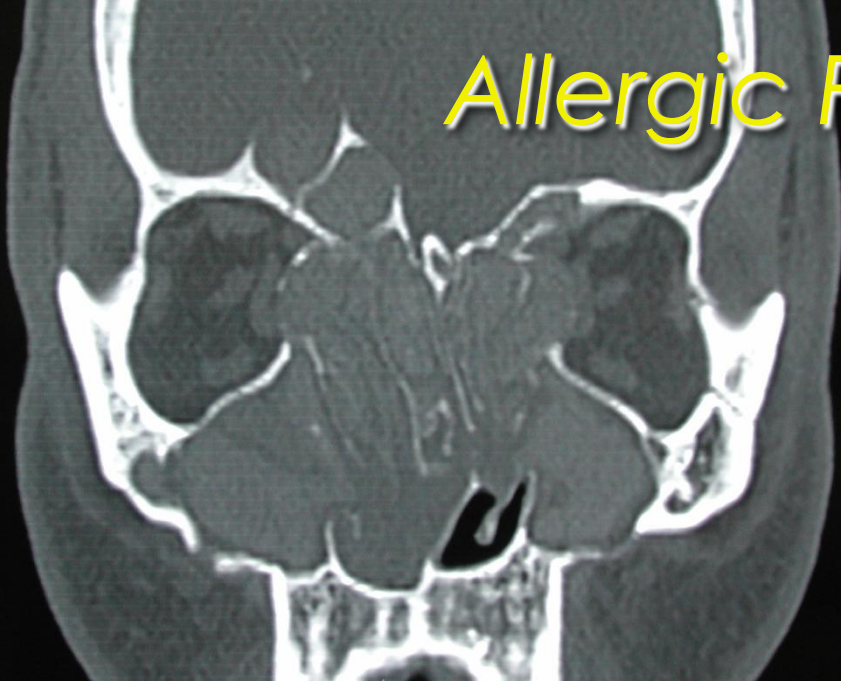


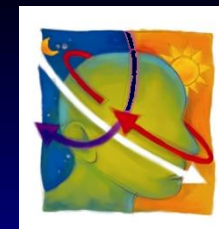
Polypoid Sinusitis

25 . 2cm

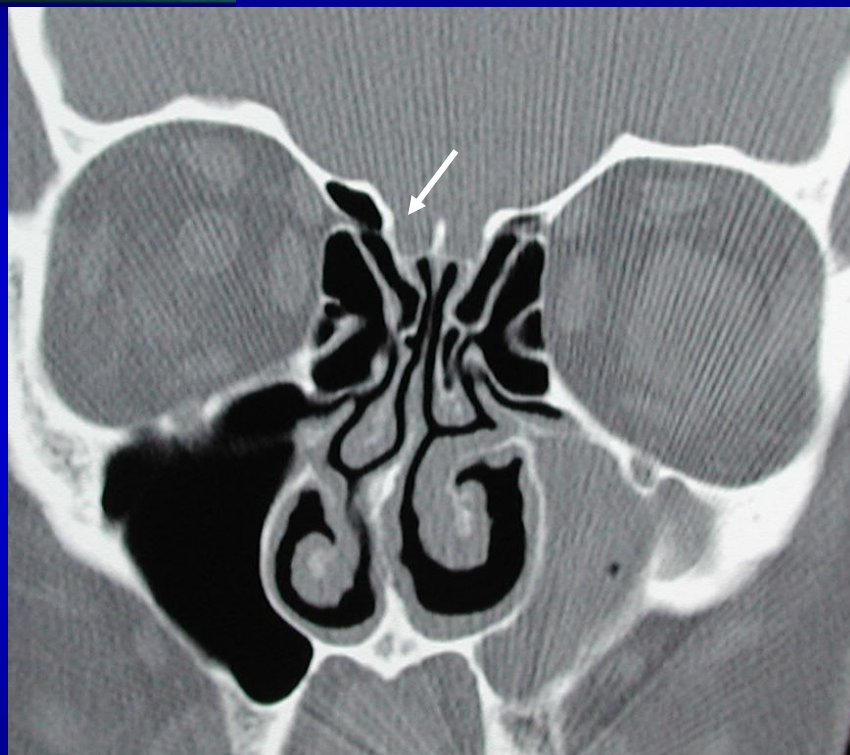


Allergic Fungal Sinusitis





Inappropriate Degree of Surgery



Pre-op



Pre-repair



Silent Sinus Syndrome

Current SSS literature

Late presentations of SSS

Clinically evident enophthalmos &
hypoglobus

Ipsilateral maxillary sinus disease

Increased orbital volume

“Enophthalmos” as part of diagnostic criteria
for SSS

