

## **Sphincter pharyngoplasty and superiorly based pharyngeal flap video nasopharyngoscopic evaluation and phoniatric outcome**

**Ahmed Mahrous**  
El Minia University Hospital, Egypt

**Aim:** This article estimates two surgical techniques for correcting residual velopharyngeal insufficiency, namely superiorly based pharyngeal flap and sphincter pharyngoplasty.

**Material and Methods:** Videonasopharyngoscopy, multiviewvideofloroscopy and speech analysis withnasometry were the tools used to assess the final outcome of these two procedures. 72 patients (44were males and 28 were females) had post cleft repair velopharyngeal incompetence were studied. Their age at the time of surgery ranged from 3-8 years, mean was 5 years. Patients were classified according to the findings of the nasopharyngoscopy, videofloroscopy and nasometry into two groups. Group A included 40 patients and were subjected to superiorly based pharyngeal flap. Group B included 32 patients and were subjected to sphincter pharyngoplasty.

**Results:** The success rate in group A before revision was 80% and in group B was 81. 25%. Flap dehiscence represented 10% of the cases in group A and 12. 5% of the cases in group B. There was no marked difference between the results of both groups.

**Summary:** It has been suggested to vary the surgical approach to the velopharyngeal incompetence using the pharyngeal flap or the sphincter pharyngoplasty according to the relative contribution of the movements of the velum, lateral pharyngeal wall and the posterior pharyngeal wall.

ahmed\_mahrous63@yahoo.com