

# Otolaryngology 2019: Comparison of postoperative resolution of Epiphora and complications between Endoscopic Dacrocystorhinostomy with and without stenting in Chronic Dacryocystitis- Ahmed Hasan Ashfaq- Rawalpindi Medical University

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**Introduction:** The favored methodology for opening the incessantly tainted nasolacrimal sac is transnasal endoscopic. A silicone stent is set to keep up the patency of the sac however its job is getting disputable. Dacryocystorhinostomy (DCR) is the standard methodology for the treatment of essential procured nasolacrimal channel block (PANLDO). The rule of the medical procedure is to make an anastomosis between the lacrimal sac and nasal depression by evacuating the bone that isolates these two structures and sidestep the impeded nasolacrimal pipe of the downstream.

The first careful strategy was first presented in 1904 by Toti, at that point altered by Dupuy-Dutemps and Bourguet and characterized as transcutaneous or outside DCR (EX-DCR) which has become the conventional system and still a best quality level for the treatment of nasolacrimal channel block (NLDO) these days because of high achievement rate. Other than outer methodology, DCR can likewise be performed through the nasal depression and characterized as endonasal DCR (EN-DCR). Caldwell at first depicted EN-DCR in 1893 by direct review from the nostril all through the method; in any case, it was then dropped out of utilization because of trouble in representation and indeterminacy of careful life systems. The prevalence of EN-DCR didn't increment until the 1990s with the appearance of unbending fiberoptic endoscope utilized in practical sinus medical procedure, which make an incredible development in review the careful detail. The main clinical investigation of endoscopic DCR was distributed by McDonogh and Meiring in 1989. Go with the involution of the fine intranasal careful instruments and usage of retinal light channel as careful life structures direction, an ever increasing number of specialists revive their enthusiasm for EN-DCR and have created different methods of doing it, from mechanical with or without fueled gadget to laser-helped lacrimal medical procedure.

**Objective:** The motivation behind our investigation was to contrast endoscopic dacrocystorhinostomy and without stenting as far as the goal of epiphora and postoperative entanglements related with either technique.

**Methods:** This randomized clinical preliminary was directed in the ENT division blessed family medical clinic Rawalpindi from November 2015 to April 2018. A hundred patients with Chronic dacryocystitis were randomized into two gatherings. The stent bunch got endoscopic DCR with silicone intubation, while the non-stent bunch got endoscopic DCR without silicone intubation. The two gatherings were assessed at a subsequent visit at first, sixth and twelfth and 24<sup>th</sup> postoperative weeks for

anatomical accomplishment by patent ostium on water system and useful accomplishment by the free progression of color from ostium and postoperative goal of epiphora (utilizing Munk's score). Inconveniences like intranasal bonds, Canalicular stenosis, and Sac stenosis were additionally recorded. Information was entered and broke down utilizing SPSS 20. This is a review, nonrandomized, relative investigation directed at Ophthalmology Department of Far-Eastern Memorial Hospital, New Taipei City, Taiwan. Clinical records of all patients who experienced medical procedure for PANLDO from May 2011 to June 2017 were inspected.

The finding of PANLDO depended on the nearness of side effects with epiphora, clinical perception of fluorescein color vanishing test and archived block by lacrimal water system and examining. Prohibition standards included past DCR medical procedure, canalicular obstacle, intrinsic NLDO, past injury history of lacrimal entry framework, past light treatment covering nasal or periorbital district.

All patients were very much educated about the focal points and inconveniences of the EX-DCR and EN-DCR techniques; be that as it may, the kinds of the careful methodology were concluded by the specialist's judgment. All medical procedures were finished by single specialist (Pei-Yuan Su, M. D.) under broad sedation. About 1% lidocaine with 1:100,000 epinephrine was utilized for neighborhood penetration of entry point site of skin and nasal mucosa. Nasal pressing with cotton wipes doused with blend of 4% lidocaine and 1:100,000 epinephrine were embedded for intranasal vasoconstriction 20 min before the medical procedure.

**Results:** Both gatherings were analyzed for sexual orientation, goal of epiphora, nasal and visual bothering, patency of neo-ostium, postoperative synechia and granulations. Goal of epiphora was seen in 88.8% patients in the non-stent gathering and 82.6% patients in the stent bunch individually. Decrease in the size of ostium was noted more in the stent bunch because of postoperative synechia and granulation development. Advantages of the non-stent bunch are less patients uneasiness, less working time, cost-adequacy, less stenting related issues and less follow up visits.

**Conclusions:** It is reasoned that despite the fact that there is no huge distinction between the post-operation consequences of Endoscopic DCR with or without stenting regarding goal of epiphora however DCR without stenting ought to be the method of decision for constant dacryocystitis in view of different elements. The stenting should just be saved for chosen patients.