

Poster Session

PS-001

SGP: 7771

Video-assisted resection of branchial cysts

Author(s): Flavia Pereira Fleming, Leonardo Guimarães Rangel

Keywords: congenital abnormalities, cysts, video-assisted surgery.

Traditional surgical techniques for branchial cyst resection yield unsatisfactory aesthetic results because of the size of the required incision. There is also higher associated morbidity due to excessive surgical manipulation. Video-assisted resection - a recent surgical technique - is minimally invasive, causes less morbidity, and has superior aesthetic results.

PS-002

SGP: 7806

Thrombosis of the internal jugular vein in the differential diagnosis of neck tumors

Author(s): Janaina Guidotti, Márcio Gomes Cunha, Fábica Carla Guidotti

Keywords: jugular veins, neck, venous thrombosis.

Thrombosis of the internal jugular vein is a serious vascular complication that may present as a nonspecific neck mass in the physical examination. This case report describes a patient in an emergency unit of a town in Sao Paulo state who presented pain and a mass of sudden onset in the right side of the neck; there were few inflammatory signs and no apparent triggering factor. The physical examination revealed a warm hard mass of imprecise contours that was painful upon palpation; the remaining otolaryngological examination was normal. Computed tomography revealed a thrombus in the right internal jugular vein. The differential diagnosis of neck masses includes congenital conditions, infections, primary neoplasms, and metastases. Thrombosis of the internal jugular vein is often unnoticed, which may result in delayed treatment.

PS-003

SGP: 7809

Clear cell sarcoma of the parotid region: case report

Author(s): Evandro Maccarini Manoel, Rafael Reiser, Fábio Brodskyn, Marcel das Neves Palumbo, Onivaldo Cervantes, Márcio Abrahão, Marcello Franco

Keywords: clear cell, head and neck neoplasms, local, neoplasm recurrence, parotid region, sarcoma.

Clear Cell Sarcoma (CCS), also known as Malignant Melanoma of Soft Parts, is an aggressive tumor that is rarely found in the head and neck. **Case Report:** A 43 year-old white female patient presented only progressive swelling of the right parotid area. Computed Tomography (FIG. 1) revealed a contrast-enhanced 5-cm heterogeneous mass on the right parotid area. The patient first treated by superficial parotidectomy; the initial diagnosis was a peripheral nerve sheath malignant neoplasm that was positive for the S-100 protein in the immunohistochemical evaluation (FIG. 2). An international expert was asked to assess the case and suggested metastatic malignant melanoma as a diagnosis. The final diagnosis, however, was reached by applying the FISH cytogenetic test (FIG. 3). Eight months later, local and regional recurrence was detected. The patient underwent radical right neck dissection. Following surgery, external radiotherapy was applied (total dose - 6600 cGy). Six months after the second procedure there were no signs or symptoms of local or regional recurrence. **Discussion:** Despite similarities with melanoma, these are different types of tumors. This is the fourth case reported in this area. The tumor has a high local and regional recurrence rate and its prognosis is considered poor. Surgery remains the best approach,

and adjuvant therapy has been questioned. **Conclusion:** This tumor may be misdiagnosed, usually with melanomas. These patients may benefit from neck dissection and adjuvant therapy.

PS-004

SGP: 7844

Occupational laryngopathy. What to Suspect? Submucosal Vocal Fold Cyst

Author(s): Fábio Silva Alves, Carlos Eduardo Monteiro Zappellini, Luana Gonçalves Oliveira, Luciana Campoy Basile, Ari de Paula e Silva, José Maria Moraes de Rezende

Keywords: disease, laryngeal mucosa, larynx.

Benign diseases of the larynx that are associated with specific professional activities have been reported for many years. Difficulties in establishing a medical-legal link between structural abnormalities and phono-articulatory effort have raised issues that were only clarified as knowledge about the physiology of voice emission and its intricate intervening factors developed. The vocal fold cyst is an epithelium-lined structure the content of which is separate from the medium within which it is immersed. It is an abnormal development of the superficial part of the lamina propria under the epithelium but outside the voice muscle. It may be unilateral and is classified according to its site; it is usually found in the superficial submucosal layer. SLM, a white single female patient aged 31 years, a teacher in Salvador, Bahia, complained of dysphonia within the last year. She had taught in an basic education private school for the past 10 years. One year ago she presented spasmodic coughing and constant dysphonia which worsened periodically. The patient did not smoke, there was no alcohol or drug abuse, and she did not use medication on a continuous basis. She practiced aerobic sports - running and swimming. After 3 months of medical treatment and speech therapy the patient reported a significant improvement of voice quality; the vocal fold cyst was slightly smaller. We may state that submucosal vocal fold cysts may be a manifestation of work-related laryngeal disease, and should be checked regularly by voice professionals.

PS-005

SGP: 7849

Carcinoma ex pleomorphic adenoma of minor salivary glands in the parapharyngeal space

Author(s): Vinicius Belchior Lima, André Alencar Araripe Nunes, Marcos Rabelo de Freitas, Sebastião Diógenes Pinheiro, João Paulo Catunda Bastos

Keywords: adenoma, carcinoma, minor, oropharynx, pleomorphic, salivary glands.

Background: Carcinoma ex pleomorphic adenoma (CXPA) is a rare aggressive neoplasm that develops from a primary or recurrent pleomorphic adenoma. The CXPA comprises 11.7% of salivary gland malignancies. Tumors of the parapharyngeal space are rare, comprising about 0.5% of head and neck tumors. Minor salivary gland tumors account for 6% to 22% of all salivary gland neoplasms; about 82% of these are malignant. **Case Report:** A female patient aged 80 years presented dysphagia for solid foods only, a mildly sore throat, and a foreign body sensation in the throat for 6 months. The physical examination revealed bilateral grade I tonsils and a submucosal smooth fibroelastic non-pulsatile mass adhered to deep planes behind the palatopharyngeal arc to the right. Computed tomography of the neck revealed a hypodense mass to the right in the parapharyngeal space that contrasted heterogeneously; it extending medially to the oropharynx and inferiorly to the ipsilateral pyriform sinus. Transoral excision biopsy was carried out for pathology, which showed a malignant infiltrating complex

(mixed) with pseudoglandular or squamous carcinomatous transformation. Its likely origin was glandular, and it resembled carcinoma ex mixed tumor. Immunohistochemistry was done to assess AE1/AE3, Vimentin, p63, and PS100; it suggested carcinoma with adenocarcinomatous differentiation - ex pleomorphic adenoma. **Discussion:** A comprehensive review of the literature revealed few case reports of tumors arising from carcinoma ex pleomorphic adenoma of minor salivary glands; the parapharyngeal space is an unusual location.

PS-006

SGP: 7850

Elongated Styloid Process. What to Investigate? A Case Report of the Eagle syndrome

Author(s): Fábio Silva Alves, Luana Gonçalves Oliveira, Carlos Eduardo Monteiro Zappellini, Luciana Campoy Basile, Ana Cecília Macedo, Carlos Eduardo Maibashi, José Maria Moraes de Rezende

Keywords: palatine tonsil, swallowing disorders, toothache.

The styloid process is a thin projection of bone originating from the temporal bone medial and anterior to the styloid foramen; it connects through the styloid ligament to the inferior horn of the hyoid bone. Elongation of the styloid process, or calcification of the styloid or stylomandibular ligament, was first described by Eagle in 1937, who considered it rare. Eagle's syndrome is characterized by the presence of symptoms, the most common of which are the most common symptoms are neck and craniofacial pain, which are not pathognomonic, and may therefore intersect with those of several oropharyngeal and maxillofacial diseases. A white male patient aged 61 years, with high blood pressure, complained of diffuse pain over the left mandibular area that extended to the left lower alveolar ridge. Computed tomography (Figs. 1 and 2) showed an elongated left styloid process extending below the mandibular angle. The patient had undergone tonsillectomy 35 before and reported headaches during the past 5 years, which limited neck movements towards the right. Eagle's syndrome or the Carotid Artery Syndrome were proposed as diagnoses based on the clinical findings and X-rays. A conservative approach was adopted because of the patient's age and good response to medical therapy. The diagnosis of Eagle's syndrome is clinical and radiographic.

PS-007

SGP: 7875

Pleomorphic adenoma of the lateral pharyngeal space: Two representative cases

Author(s): Emanuel Capistrano Costa Junior, Luiz Henrique Carboni de Souza, Mariane Sayuri Yui, Guilherme Pietrucci Buzatto, Henrique Augusto Cantareira Sabino, Renata Maria Soares Malago, Rodrigo Lacerda Nogueira

Keywords: adenoma, head and neck neoplasms, pleomorphic, salivary gland neoplasms.

Introduction: The lateral pharyngeal space is an area between the mandible and the palatine tonsil; it may be the site of several benign and malignant neoplasms. We describe two cases of patients with tumors located in the lateral pharyngeal space. **Case report:** A male patient aged 29 years presented with tonsil asymmetry and a hardened neck mass. CT and MRI showed a tumor in the masticator space from the rhinopharynx to the nasopharynx. FNA biopsy suggested pleomorphic adenoma, which was confirmed by pathology after surgical excision. A male patient aged 32 years presented with a bulging mass on the left mandibular angle that had developed within the past four months. CT showed a tumor in the space between the pharynx and the mandible. FNA biopsy suggested pleomorphic adenoma, which was confirmed by pathology after surgery. **Discussion:** Lateral pharyngeal space tumors are benign in about 80% of cases. They can be classified by site as pre- or post-styloid. Pre-styloid tumors are mostly benign and of salivary gland origin; most - especially pleomorphic adenomas - arise from the parotid gland. Post-styloid tumors may be of vascular or neurogenic origin. The signs and symptoms of lateral pharyngeal space tumors are limited because these tumors are located deep in the neck. Imaging is important to establish a differential diagnosis in these disorders. **Conclusion:** Lateral pharyngeal space tumors are usually diagnosed at an advanced stage; physicians should bear this in mind to diagnose these tumors early.

PS-008

SGP: 7878

Sentinel node biopsy in larynx cancer: a new perspective

Author(s): Guilherme Machado de Carvalho, Carlos Takahiro Chone, Agrício Nubiato Crespo, Vanessa Gonçalves Silva, Celso Dario Ramos, Elba Etchebere, Albina Altemani, Leandro L. Freitas, Flávio Mignonne Gripp, Hugo F. Kohler

Keywords: carcinoma, laryngeal neoplasms, neck dissection, recurrence, sentinel lymph node biopsy, squamous cell.

Management of the clinically and radiologically negative neck in patients with early head and neck squamous cell carcinoma (HNSCC) remains controversial. Although about 30% of patients harbor occult disease in the neck, most patients undergo elective neck dissection, with no benefit.¹ As in several other solid tumors, sentinel lymph node biopsy (SLN) is emerging as a potentially useful method for staging lymphatic metastasis in HNSCC.^{2,3} It has been shown that sentinel node status predicts the presence of metastasis in other nodes within the nodal basin.⁴ Multiple validation studies have reported over 95% sentinel node detection rates and 95% negative predictive values for negative sentinel nodes in HNSCC.⁵ **Objective:** To evaluate the accuracy of this method in laryngeal squamous cell carcinoma and to compare the neck status after SNB followed by elective neck dissection (END) and SNB alone. **Subjects:** Patients with SCC of larynx without neck metastases. **Results:** SNB in larynx cancer had a 100% negative predictive value, a 100% accuracy rate and a 0% recurrence rate. It is important to note that no randomized study with a sufficiently large sample size and power has been published; preliminary studies offer new perspectives in head and neck cancer.

PS-009

SGP: 7887

Nasal endoscopy: its role in the Brazilian unified health system (SUS)

Author(s): Juliana Frozoni Lemes, Paula Ribeiro Lopes, Ivan Puleo Uvo, Carolina Cozzi Machado, Mayra Martinelli, Fernando Veiga Angelico Junior, Priscila Bogar Rapoport

Keywords: hospital, medical examination, medical staff, nose.

Endoscopes have revolutionized medical practice in various sectors. In otolaryngology, endoscopy provides more accurate diagnoses and novel therapeutic approaches. Nasal endoscopy is a quick and inexpensive diagnostic method for the Brazilian public health system. Our purpose was to evaluate the true importance of nasal endoscopy in the diagnosis of otorhinolaryngologic diseases in primary and secondary care services, and to compare the original medical diagnoses with those of endoscopy. A retrospective study was made of 162 nasal endoscopies which were carried out from July 1st to August 7th 2008. The agreement rate was 59%, which suggests good primary and secondary care with appropriate diagnostic hypotheses. There was a 41% disagreement rate, which may reflect short and ineffective care in a few primary and secondary services and poorly trained healthcare professionals. Notwithstanding the difficulties in professional training for Brazilian physicians in general - because of poor structures or excessive demand in the public health system - careful endoscopy may benefit patients, as the degree of discomfort is minimal in adults and controllable in children.

PS-010

SGP: 7888

Cervical trauma by stab wound with Brown-Sequard Syndrome: the miracle of life

Author(s): Marcos Antonio Nemetz, Gabrielle Cordeiro de Oliveira, Ana Beduschi Nemetz, Luiza Dadan Perini, Maria Gabriela Ortiz de Noronha

Keywords: brown-sequard syndrome, neck injuries, penetrating, spinal cord injuries, wounds.

Penetrating neck injuries present in unique and challenging forms; neurological, visceral and great vessels damage may ensue. Reports of stab wounds that result in spinal cord injuries are rare in the medical literature. Given their rarity, we report a case of trauma that transfixed the neck, and progressed with minimal neurological damage. This highlights an unusual situation in which the patient miraculously survived such a severe assault.

Partial thyroidectomy in a pregnant patient with Graves' disease

Author(s): Filipe Hailton Alves Aguiar, Célia Maria Novaes Pereira, Daniel Teixeira Gomes, Leandro Teixeira Gomes, Lara Mariana França

Keywords: graves disease, pregnant patient, thyroidectomy.

Objectives: To describe the treatment of a pregnant patient with severe Graves' Disease from the beginning of pregnancy, worsening by 29 weeks and threatening the life of the mother and fetus. **Methods:** A pregnant patient was monitored to control Graves' disease. Thyroid and gestational ultrasound were carried out. Laboratory tests comprised plasma thyrotropin (TSH), total thyroxine (T₄), free thyroxine (free T₄), triiodothyronine (T₃), ANTI-TPO, TRAB, TGO, TGP, blood urea nitrogen, creatine, and blood glucose every 15 days. Medication for thyroid disease was monitored by laboratory testing; the patient did not respond to therapy and the fetus developed poorly. Partial thyroidectomy was done at 29 weeks gestation as an emergency measure. The patient developed a thyroid storm postoperatively (as expected), which was treated promptly and effectively with no consequences for mother and child. Delivery took place seven weeks after surgery; there were no complications and the child was healthy, with normal laboratory tests. **Results:** Ultrasonography - the thyroid is diffusely increased (LOD = 4.4 x 1.8 x 2.0 cm and LE = 4.3 x 1.9 x 2.1 cm) with no cysts or nodules, T₃ = 327ng/dl, T₄ = 11.4 mg / dl, TSH = < 0.03 McUI / ml, ANTI-TPO = 179UI/ml, TRAB = 268.9%. **Conclusion:** Although antithyroid hormone therapy is the first choice in the treatment of Basedow's disease; this applied to pregnant patients with Graves' disease. If the patient does not respond, surgical measures may be required (partial or total thyroidectomy) to avoid risk to the patient's and fetus's life.

Head and Neck Sarcomas

Author(s): Giuliano Molina de Melo, Ricardo Antenor de Souza e Souza, André Lacerda Cavalcante, Betina Mameri Pereira, Fernando José Gatto Ribeiro de Oliveira, Francisco Pierozzi D'Urso

Keywords: sarcoma, leiomyosarcoma, rhabdomyosarcoma.

Head and Neck Sarcomas (HNS) are a heterogeneous group of neoplasms. These are rare tumors and comprise only 1% of head and neck (HN) cancers. We present three rare cases of sarcoma. 1. AEL, male, aged 66 years, presented dysphonia and had a biopsy two years ago: Rhabdomyosarcoma. Underwent pharyngolaryngectomy without neck dissection. Pathology diagnosed a polypoid rhabdomyosarcoma with areas of necrosis. 2. AFMB, female, aged 60 years, presented nasal block for a year and a progressively growing nodule in the right nasal cavity. Biopsy: spindle cell neoplasm with marked atypia. A radical right maxillectomy was performed. Immunohistochemistry confirmed high-grade leiomyosarcoma with extensive myxoid involvement. Radiotherapy was indicated. 3. MLAM, female, aged 77 years, presented a tumor in left nasal cavity that developed within the past 2 years. Biopsy showed angiosarcoma. Neoadjuvant radiotherapy was carried. Maxillectomy was performed without exenteration, together with ethmoidectomy, nasal septum resection, tracheostomy, and skin graft reconstruction. Pathology: angiosarcoma. Surgery is considered the main treatment for most of adult HNS; radiotherapy, chemotherapy may be added. Rhabdomyosarcomas are the least common among mesenchymal tumors. They are found almost exclusively in male adults. Myxoid leiomyosarcoma has a high prevalence in the uterus. It often presents as fusiform tumor cells with typical smooth muscle differentiation. So far only two cases have been reported in HN. Angiosarcomas are the most common histological subtype of HNS. Proper treatment consists of surgery with free margins, to which radiotherapy and chemotherapy may be added.

Hemangiopericytoma as a head and neck neoplasm involving the vallecula in an adult male patient: case report

Author(s): Fábio de Azevedo Caparroz, Barbara Greggio, Marcel Palumbo, Onivaldo Cervantes, Fernando Walder

Keywords: hemangiopericytoma, mandible, oropharyngeal neoplasms, oropharynx, tongue.

Hemangiopericytoma is a rare head and neck tumor usually located in the sinonasal cavity. Stout and Murray coined the term "hemangiopericytoma" in 1942 and found that there were insufficient gross features unique to this tumor for it to be recognized clinically. The treatment of choice in any site is ample surgical excision. The surgical approach presented here is a good choice for tumors located in the posterior oropharynx, and yielded good results in our study. We describe a case of a head and neck hemangiopericytoma involving the right vallecula in a young male patient initially manifested dysphonia, to show how the clinical presentation of this tumor is variable.

Retropharyngeal lymphangioma - case report

Author(s): Brunno Fernando Correia Muniz de Resende, Maycon Waihrich Leal Giaretton, Eduardo Campara de Oliveira, Bibiana Callegaro Fortes, Fabrício Scapini

Keywords: airway obstruction, cystic, lymphangioma, lymphangioma.

Introduction: Lymphangiomas are congenital lymphatic system malformations that form cysts; they are found most frequently in the head and neck. The diagnosis is made based on clinical and imaging studies. The incidence is one in four thousand live births. **Clinical Case:** a male patient aged 2 years presented respiratory obstruction from the first month of life. A CT scan revealed a cystic lesion in the retropharyngeal space that suggested lymphangioma. Partial resection of the lesion was carried out because it extended laterally around the internal carotid artery and vein jugular vein. Symptoms regressed completely and the patient is being monitored. **Discussion:** Surgery and sclerotherapy are the eligible options for treating lymphangiomas; surgical resection may be curative, but difficult access and inclusion of vital structures can compromise this method. Partial resection of the lesion may be indicated for symptom relief. Sclerotherapy is gaining in popularity, although its mechanism of action is not fully understood. **Conclusion:** The retropharyngeal lymphangioma is an extremely rare presentation of this disease - six case reports have been published. The choice of therapy is therefore difficult. In the present case, partial resection was effective to relieve symptoms.

Cervicofacial actinomycosis in a patient with prior radiotherapy

Author(s): Carlos Roberto Ballin, Luis Carlos Sava, Cristiano Roberto Nakagawa, Rodolfo Cardoso Toledo Filho, Vinicius Tomadon Bortoli

Keywords: actinobacteria, actinomycosis, actinomycosis, cervicofacial, radiotherapy.

Actinomycosis is a rare infection usually found in male patients; it is distributed worldwide. The causative agent is a Gram positive anaerobe, *Actinomyces* sp (mainly *A. israelii*), which are commensals in the human oral cavity but become pathogenic when mucosal injury paves the way for tissue invasion. Typically abscesses, fistulas and fibrosis may form. The cervicofacial region is the main site. Poor oral hygiene, immunosuppression, malnutrition, and prior radiotherapy are some of the predisposing factors. We present a case of a male patient aged 46 years that presented with a right neck mass that progressively increased, and signs of infection. There was a history of squamous cell carcinoma in the tongue base, which was treated by glossectomy and several radiotherapy sessions. Puncture of the cervical lesion indicated actinomycosis. Despite adequate treatment, the patient died. The case draws attention to the severity of this infection, possibly compounded by prior radiotherapy.

PS-016**SGP: 7945****Angiosarcoma of the thyroid: a challenging diagnosis**

Author(s): Marcos Antonio Nemetz, Alessandra Kraus, Ana Beduschi Nemetz, Maria Gabriela Ortiz de Noronha, Andressa Caroline Carneiro Pinheiro

Keywords: hemangiosarcoma, immunohistochemistry, pathology, thyroid neoplasms.

Angiosarcoma is an aggressive primary tumor of the thyroid. Most patients with angiosarcomas live in mountain regions; the disease is uncommon in other parts of the world. A diagnosis of vascular disease in the thyroid is very controversial; the final diagnosis is made only by immunohistochemistry. Reports of this disease are rare in the medical literature. We present a case of angiosarcoma of the thyroid in a patient not from a mountain region.

PS-017**SGP: 7946****Differential diagnosis of upper airway obstruction in a patient with Parkinson's disease**

Author(s): Antônio Luis de Lima Carvalho, Eleonora de Castro Bottura Neves, Samanta Dall'Agnese, Carolina de Andrade Ferreira Vieira, Romualdo Suzano Louzeiro Tiago

Keywords: deglutition disorders, dysphonia, dyspnea, parkinson disease, tracheostomy.

The aim is to present a case report of a patient with Parkinson's disease who manifested dyspnea, stridor, and absent bilateral vocal fold mobility; an urgent tracheostomy was required. **Case report:** a female patient aged 76 years had a history of Parkinson's disease diagnosed in 1998 and Alzheimer's disease diagnosed in 2006. In January 2010, the patient presented sudden stridor and was brought to a medical center. Ten days later, the stridor worsened rapidly and the patient was brought to the emergency room; fibrolaryngoscopy showed vocal fold immobility in the paramedian position. An urgent tracheostomy was carried out because of acute obstructive respiratory failure. Two days later, fibronasopharyngolaryngoscopy again showed bilateral vocal fold immobility in the paramedian position during inspiration and expiration. There was vocal fold mobility (maximum adduction and abduction) when evoking the cough reflex. **Final comments:** vocal cords immobility in the paramedian position may occur at later stages of Parkinson's disease and Multiple System Atrophy, which may require tracheostomy to relieve upper airway obstruction symptoms. ENT specialists should be aware of this condition when making the differential diagnosis of airway obstruction. This type of obstruction is due to hypertonic intrinsic laryngeal muscles.

PS-018**SGP: 7951****Forestier's disease: a case report**

Author(s): Luiz Augusto Miranda Sanglard, José Felipe Bigolin Filho, Ludimila de Oliveira Cardoso, Amadeu Luis Alcantara Ribeiro, Monik Assis Espindula, Rafael Fernandes Goulart dos Santos, Miguel Eduardo Guimaraes Macedo, Agenor Alves de Souza Junior

Keywords: deglutition disorders, diffuse idiopathic skeletal, hyperostosis, hyperostosis.

Introduction: Forestier's disease, or diffuse idiopathic hyperostosis, is a non-inflammatory ossifying osteopathy of spinal ligaments, usually in the neck and thorax. **Case Report:** A male patient aged 62 years presented with progressive dysphagia for solid foods and hoarseness within the past year. There was a history of pneumonia treated in an outpatient clinic three months before. There was no odynophagia, dyspnea, smoking, or alcohol abuse. The patient was adequately treated for arterial hypertension with atenolol (50 mg/day) and hydrochlorothiazide (25mg/day). Oroscopy and rhinoscopy were normal. Flexible endoscopy showed a bulge in the posterior wall of the pharynx and salivary stasis in the pyriform sinus bilaterally. Upper digestive endoscopy was normal. A thoracocervical CT scan showed extensive hyperostosis and osteophytosis of C5 and C6 vertebrae. A barium esophagogram demonstrated narrowing of the esophagus at the level of C5 and C6. Forestier's disease was diagnosed. **Discussion:** Forestier's disease affects mostly men after the fifth decade (2:1). Most patients are asymptomatic; dysphagia is the main complaint in symptomatic patients. The diagnosis is based on clinical and radiological criteria - osteogenesis with bone fusion of at least four contiguous vertebrae and absence of inflammation.

Risk factors are being male, age over 50 years, obesity, diabetes mellitus, dyslipidemia, and hyperuricemia. **Conclusion:** It is important to be aware of this diagnosis in cases of progressive dysphagia, especially in males above 50 years; esophageal cancer should be considered in the differential diagnosis.

PS-019**SGP: 7952****Association HIV/bilateral Warthin's tumor**

Author(s): Marcos Antonio Nemetz, Luiza Dadan Perini, Ana Beduschi Nemetz, Fabiane Miura Ogg de Salles, Gabrielle Cordeiro de Oliveira

Keywords: cystadenoma, HIV, papillary, salivary glands.

Warthin's tumor or Papillary Lymphomatous Cystadenoma, is a benign epithelial tumor originating from salivary gland tissue; it generally presents on one side only. Studies have noted its still poorly understood association with the human immunodeficiency virus. As there are few papers correlating these entities, we report a case of bilateral Warthin tumor in a patient with the human immunodeficiency virus.

PS-020**SGP: 7953****Bilateral carotid body paraganglioma: a case report**

Author(s): Marcos Antonio Nemetz, Maria Gabriela Ortiz de Noronha, Ana Beduschi Nemetz, Andressa Caroline Carneiro Pinheiro, Fabiane Miura Ogg de Salles

Keywords: carotid body tumor, head and neck neoplasms, paraganglioma.

Carotid body tumors are rare but comprise most of the head and neck paragangliomas. These are benign slowly growing tumors usually affects individuals aged between 50 and 70 years. Bilateral lesions occur in 2-10% of cases. The authors present a case of a bilateral carotid body paraganglioma in a young patient; uncommon aspects of this disease are presented. The classical approach as suggested in the literature is shown to be successful.

PS-021**SGP: 7963****Dyspnea and dysphagia in association with cervical hyperlordosis: case report**

Author(s): Therezita M. Peixoto Patury Galvão Castro, Chrislainny Costa da Silva Pinheiro, Júlia Vanessa de Mendonca Uchôa, Morgana Barbosa Duarte, Nyanne Nancy de Castro Vieira da Costa, Raphael Lins Mota

Keywords: deglutition disorders, dyspnea, lordosis.

The authors report a case of progressive dyspnea and dysphagia in a male patient aged 88 years. Symptoms were due to compression of the cervical spine pushing the pharynx toward the larynx. Videolaryngoscopy showed a large bulge in the posterior wall of the hypopharynx, which was confirmed in a CT scan. Cervical hyperlordosis is a rare condition resulting from altered posture; it often causes many negative effects on the patient's life. The initial treatment was done in an emergency setting to restore airways and adequate nutrition

PS-022**SGP: 7967****Carotid body tumor - case report**

Author(s): Carlos Roberto Ballin, Cristiano Roberto Nakagawa, Marcela Schmidt Braz de Oliveira, Guilherme Eduardo Wambier, Hugo Vinicius Vasselai, Súrya Toledo Guérios

Keywords: carotid body tumor, extra-adrenal, paraganglioma, paraganglioma

Carotid body tumors are rare, consisting of a benign slowly growing hyper-vascular mass that develops from paraganglionic cells of the carotid body. **Case report:** A patient aged 43 years presented a pulsatile mass in the left cervical region within the past year; it was diagnosed as a carotid body tumor based on CT angiography and a MRI angiogram. **Discussion:** Paragangliomas are classified into three groups (Shamblin classification); the tumor in this patient could be included in group III, which consists of larger tumors involving the internal and external carotid arteries. These tumors generally require resection and interposition of an arterial graft.

PS-023

SGP: 7968

Prevalence of benign vocal fold abnormalities in patients referred for laryngeal microsurgery

Author(s): Thais Yuri Hashimoto, Grazzia Guglielmino Cruz

Keywords: larynx, microsurgery, vocal cords.

Introduction: Dysphonia is a common complaint in ENT patients; many vocal fold abnormalities are referred to otorhinolaryngologists for laryngeal microsurgery. **Objective:** To describe the profile - gender, age, and the prevalence of benign vocal fold abnormalities - of patients referred for microsurgery of the larynx. **Methods:** A retrospective non-randomized study consisted of analyzing the reports of laryngeal microsurgeries from November 2008 to May 2011 in an otorhinolaryngology hospital. **Results:** In 73 laryngeal microsurgeries, 39 patients had polyps (53%), 14 patients had retention cysts (19%), 11 patients had papillomas (15%), 4 patients had leukoplakia (5%), 3 patients had Reinke's edema (4%), and 2 patients had minor structural lining abnormalities (3%); 60% were male and 40% were female. The most frequent age group was between 31 and 40 years - 32% of patients. **Conclusion:** The most frequent vocal fold abnormality in patients referred for laryngeal microsurgery was the vocal fold polyp. The highest prevalence was in male patients, and the most frequent age group was from 31 to 40 years.

PS-024

SGP: 7972

Preserving teeth involved by dentigerous cysts: it is possible!

Author(s): Guilherme Machado de Carvalho, Leopoldo Nizam Pfeilsticker, Eliane M. Ingrid Amstalden, Reinaldo J. Gusmão

Keywords: dentigerous cyst, tissue preservation, tooth, tooth diseases, young adult.

Dentigerous cysts are the most common maxillo-mandibular bone lesions in children, therapy may be mutilating. We report a young patient with a large cyst of unusually aggressive behavior in which the treatment preserved the teeth.

PS-025

SGP: 7982

Tenotomy with a high frequency scalpel in bilateral vocal cord paralysis: a high complexity and low cost procedure

Author(s): Marcos Antonio Nemetz, Gabrielle Cordeiro de Oliveira, Ana Beduschi Nemetz, Alessandra Kraus, Fabiane Miura Ogg de Salles

Keywords: tenotomy, vocal cord paralysis, vocal cords.

Vocal cord paralysis, although uncommon, affects the quality of life by compromising laryngeal functions respiration, phonation, and protection of the upper airways. Its etiology is closely related with trauma, mostly from nerve injury during thyroidectomy. We report three cases of post-thyroidectomy bilateral vocal cord paralysis successfully corrected by tenotomy with a high frequency scalpel: an effective and safe alternative.

PS-026

SGP: 7994

Use of embolization in head and neck diseases

Author(s): Marcos Antonio Nemetz, Leandro José Hass, Ana Beduschi Nemetz, Andressa Caroline Carneiro Pinheiro, Luiza Dadan Perini

Keywords: embolization, hemangioma, therapeutic, vascular malformations.

Hemangiomas and vascular malformations of the head and neck are challenging to treat. The treatment of choice is surgical removal; however, embolization is promising. Embolization is based on reducing the blood supply to tumors, arteriovenous malformations, and events such as epistaxis. The decision between surgery or interventional radiology is based on the experience of professionals. We present 3 cases of head and neck diseases treated by embolization only.

PS-027

SGP: 8021

Eagle's Syndrome - a Case Report

Author(s): Flavia Pereira Fleming, Leonardo Guimarães Rangel.

Keywords: facial pain, neck pain, tonsillectomy.

Eagle's Syndrome was described by Walt W. Eagle in 1937; it is defined by the presence of throat pain and an elongated styloid process or calcification of the stylohyoid ligament. The best treatment is surgical resection of the excess calcification in the styloid process or ligament.

PS-028

SGP: 8031

Periodontal abscess and Ludwig's angina

Author(s): Fábio Silva Alves, Carlos Eduardo Monteiro Zappellini, Hardynn Wesley Saunders Tavares, Ana Cecília Macedo, Flávio Mignone Gripp, Rodrigo Ubiratan Franco Teixeira, José Maria Moraes de Rezende.

Keywords: ludwig's angina, periodontal abscess, respiratory insufficiency.

Introduction: Ludwig's angina is cellulitis that often originates from odontogenic infection; although uncommon, it may be life-threatening because of the risk of upper airway obstruction. 1,2,3 Successful treatment is based on an early diagnosis, use of adequate parenteral antibiotics, airway protection, and surgical drainage of the infection. **Case report:** a female patient aged 75 years presented with Ludwig's angina. Therapy consisted of ceftriaxone and clindamicin, and surgical drainage. The patient progressed favorably and was discharged from hospital. **Discussion:** Upper airway management is a priority and tracheostomy may have an important role. The authors present a case of Ludwig's angina and a brief review of the literature.

PS-029

SGP: 8035

Myofibroblastic inflammatory tumor of the larynx

Author(s): Daniela Yasbek Monteiro, Helder Ikuo Shibasaki, Mariana Wilberger Furtado de Almeida, Ricardo Arthur Hubner, Ana Gabriela Gonçalves Torisan

Keywords: dysphonia, head and neck neoplasms, immunohistochemistry, laryngeal neoplasms, vocal cords.

Introduction: The inflammatory myofibroblastic tumor (IMT) is a rare entity that generally affects the lungs but may also occur in other sites. It is extremely rare in the larynx; about 22 cases have been published, 1,3,4 mostly involving the vocal cords (80%). 1 **Case report:** A male patient aged 68 years presented dysphonia for one year. Videolaryngoscopy showed a vegetative lesion on the anterior third portion of the right vocal cord and irregular contours on the left vocal cord mucous membrane. The lesion was removed by laryngoscopy. Voice improved after this procedure. Pathology described an ulcerous invasive inflammatory myofibroblastic tumor. The immunohistochemistry was negative for the AE1, AE3 and CK34 antibodies. The patient has not had any voice-related complaints for 6 months after the procedure and videolaryngoscopies have been normal. **Discussion:** Patients with chronic dysphonia and macroscopy and histology of laryngeal tumors suggesting malignancy must be tested by immunohistochemical methods to investigate IMT. Unnecessary procedures may thereby be avoided due to an erroneous diagnosis of cancer. Moreover, the prognosis of laryngeal IMT is more optimistic.

PS-031

SGP: 8050

A rare case of chronic stridor and dysphonia in an adult

Author(s): Flavio Maria Nobre Othon Sidou, David Weber Sampaio Sousa, João Aragão Ximenes, André Alencar Ararape Nunes, Sebastião Diógenes Pinheiro

Keywords: dysphonia, dyspnea, foreign bodies, larynx.

Dysphonia and stridor are relatively frequent chronic symptoms in otolaryngology. This report describes a rare case of chronic stridor and dysphonia in an adult and briefly discusses the main differential diagnoses.

Recurrent pneumonia by bronchial foreign body: a case report

Author(s): Flavia Araujo Barroso Pereira, Maria Isabel dos Santos Beiler, Deborah Franco Abrahão, Walter Sedlacek Machado, Jair de Carvalho e Castro

Keywords: bronchi, foreign bodies, pneumonia.

Bronchoaspiration of foreign bodies is a worldwide health issue and may be an emergency. In this case report, the patient (49 years) sought the emergency room of the HMSA, presenting cough, dyspnea, and fever after an episode of choking on a chicken bone 2 months ago. A CT scan revealed a hyperdense image in the right bronchial tree; the image suggested bronchiectasis and a lung abscess to the right. A thoracic surgeon and an otolaryngologist evaluated and admitted the patient for surgery, which consisted of thoracotomy, pulmonary decortication, placement of a water seal drain, and foreign body removal by bronchoscopy. **Objective:** To report a case of recurrent pneumonia by a tracheobronchial foreign body. **Conclusion:** Foreign bodies are frequently observed in otolaryngological practice; these cases may require emergency care. An early diagnosis is crucial for relieving the symptoms and avoiding serious complications and fatalities.

Evaluation of lymphatic metastasis in thyroid cancer with sentinel node biopsy

Author(s): Fernando Canola Alliegro, Carlos Takahiro Chone, Celso Dario Ramos, Denise Zantut Wittmann, Patricia Sabino Mattos, Rodrigo de Mendonça Vaz

Keywords: carcinoma, papillary, sentinel lymph node biopsy, thyroid gland.

Objective: To evaluate sentinel lymph node biopsy in papillary thyroid cancer with ultrasound guided ^{99m}Tc-phytate lymphoscintigraphy and gamma probe. **Methods:** Patients with a positive cytology (by ultrasound guided puncture) for papillary carcinoma and no enlarged neck lymph nodes were included. The subjects underwent total thyroidectomy after investigating for SLN by ultrasound-guided radiotracer injection. **Results:** Eight patients, 7 female aged from 25 to 72 years (mean 50.3) and one male aged 56 years were included. Drainage was done in 100% of patients with static lymphoscintigraphy. Two patients had anomalous drainage. One patient had a sentinel node at contralateral level III and one had a sentinel lymph node at ipsilateral level IIB; one patient had drainage to the contralateral level IV. Total thyroidectomy was carried out initially; after gamma probe testing identified 2 to 14 sentinel nodes (mean 5.63 per patient), these were removed. Sentinel lymph node were identified by lymphoscintigraphy and gamma probe in all patients (100% identification rate). Two patients had SLN metastasis (25%), one in level VI (dissected) and one in contralateral levels VI and III contralateral (dissected). There were no lymph node metastases beyond SLNs. **Conclusion:** Investigation of SLN in papillary thyroid carcinoma makes it possible to detect lymph node metastases in CPBDT. The SLN technique is applicable in CPBDT. SLN investigation identifies unusual cervical drainage.

Primary Hodgkin's lymphoma of the palate - a rare entity

Author(s): Graziela de Oliveira Semenzati, Thalita Azevedo Fracalossi, Roberto Tunes, Adriana Yuki Cavalcanti Mello, Emanuel Celice Castilho, Maria Aparecida Custódio Domingues

Keywords: hodgekin disease, lymphoma, palate.

Objective: To describe a case of primary Hodgkin's lymphoma of the palate (CHL). **Case report:** CCLO, a white stay-at-home female patient aged 43 years, was seen at an emergency room in a University Hospital with pain upon swallowing and right nasal obstruction. The physical examination showed a 0.5 cm ulcer on the right hard palate, covered by a yellowish discharge. There was a white mass in nasopharynx as seen on posterior rhinoscopy. A biopsy of both areas found no malignancy in the nasopharynx; fibroepithelial inflammatory hyperplasia was reported the palate. There were no fungi, and AFB and Ziehl-Neelsen and Gomori stains were negative. The patient progressed to ulceration of the palate (Fig. 1). A second biopsy of the palate

showed a lymphoid infiltrate with atypical cells; immunohistochemistry was CD30 and fascin positive (Figs. 2 and 3) in atypical cells associated with CD45 negativity. The conclusion was classical primary Hodgkin's lymphoma of the palate. **Discussion and Conclusion:** Non-Hodgkin's lymphoma in the oral cavity comprises about 2% of this tumor type; however, Hodgkin's lymphoma is uncommon in this site. The CHL usually presents as a lymph node lymphoma. Whitt et al. (2007) found only seven published primary cases in the palate, which were similar to the findings mentioned above. This report adds a description of this rare presentation in an immunocompetent patient, with rapid clinical progression.

Agnesis of the sub-mandibular gland

Author(s): Luciana Giro Campoy Basile, José Maria Moraes de Rezende, Luana Gonçalves Oliveira, Carlos Eduardo Monteiro Zappellini, Hardynn Wesley Saunders Rocha Tavares, Ana Cecília de Macedo Cavalcante, Fábio Alves Silva

Keywords: sub-mandibular gland, sub-mandibular gland diseases, xerostomy.

The salivary glands comprise two groups: major salivary glands (parotid, sub-mandibular and sub-lingual), and minor salivary glands. Saliva protects the oral cavity; it has immune and bactericidal functions, facilitates/promotes taste, and controls calcium and phosphorus in teeth. Morphologically or functionally abnormal salivary glands affect the flow of saliva and homeostasis of the oral cavity. Major salivary gland agnesis/aplasia is a rare condition that may involve one or several glands (unilateral or bilateral). **Discussion:** aplasia of salivary glands is a rare condition, in which the usual finding is absence of the sub-mandibular gland. Patients may be asymptomatic or present varying degrees of xerostomia (subjective feeling of dry mouth); dentition may be abnormal and it may be difficult to swallow and chew. Aplasia/hypoplasia may be accompanied by other branchial arch malformations, such as mandibulofacial dysostosis (Treacher Collins Syndrome), facial hemiatrophy and/or hereditary ploidysplasia. **Conclusion:** Among the non-neoplastic diseases of the salivary glands, salivary gland agnesis/aplasia is a rare developmental disorder; the diagnosis is based on the history and physical examination, and specific supplementary tests.

Solitary fibrous tumor of the larynx

Author(s): Márcio Eduardo Broliato, Marina Zottis de Deus Vieira, Eduardo de Andrade Atkinson, Chenia Blessmann Garcia, Geraldo Druck Sant'Anna

Keywords: laryngeal neoplasms, larynx, pleural, solitary fibrous tumor, solitary fibrous tumors.

Introduction: The solitary fibrous tumor (SFT) is an uncommon neoplasm that is generally found in the pleura; only eight cases of laryngeal involvement have been reported. This neoplasm was first described in 1931. It is considered a spectrum of the hemangiopericytoma/solitary fibrous tumor group. It is benign and of slow growth. **Case Presentation:** A male patient aged 64 years, an ex-smoker, presented with symptoms for 7 months. Contrast cervical CT showed an expanding tumor in larynx; rigid telelaryngoscopy showed a rounded and smooth tumor in the pyriform sinus and left aryepiglottic fold. Biopsy findings suggested a solitary fibrous tumor, which was confirmed by immunohistochemistry. Tracheostomy was done during an episode of respiratory dysfunction. Supraglottic partial laryngectomy was carried out as the treatment. **Discussion:** This case shows disease with chronic symptoms located mostly in the supraglottic larynx. Telelaryngoscopy showed a submucosal smooth rounded, well-defined solid tumor measuring about 1 to 5 cm. Contrast computed tomography is important for the diagnosis and evaluation. The most common histological feature is a "patternless pattern" of mesenchymal origin. Immunohistochemistry is important to confirm the diagnosis. Treatment consists of complete removal. **Final Comments:** This disease is exceptionally rare in the larynx; it requires conservative management and follow-up. This case report is the ninth such case reported in the literature.

PS-039

SGP: 8085

Blastomycosis in the upper airways

Author(s): Luzia Gross Lague, Hamilton Leal Moreira Ferro, Naize Giacobbo de Lima, Marcela Cristina Weber Pasa, Aline Gaiotto Maluta, Ricardo Kunde Minuzzi

Keywords: agribusiness, agricultural zones, rural population.

South-American blastomycosis is a systemic infection that affects mainly the lower respiratory tract; it is caused by a thermodynamophilic fungus - *Paracoccidioides brasiliensis*. It is commonly found in rural areas of Latin America. The lungs may be affected by inhaling spores; this is the primary path for acquiring this disease. The chronic form is most common; it affects rural workers aged above the fourth decade of life, and there is a high prevalence in males. Patients have a protracted history in which symptoms may last for over four months. The most common lesions may be found in the pharyngeal mucosa. A male patient aged 27 years, from a rural area, presented with a raised, warty, red-with-white-spots lesion in the mouth. Antibiotics and anti-inflammatory drugs had been used for a month without improvement. A biopsy, laboratory tests, and serology for blastomycosis were undertaken. The CBC showed eosinophilia, the ESR was 87 mm, and the biopsy was positive for blastomycosis. The patient was treated with ketoconazole for 6 months and follow-up was done by controlling the ESR. After six months, the ESR was 13 mm; mouth lesions had regressed within 30 days of starting therapy. Given a high incidence of fungal infection due to blastomycosis in rural workers, this disease should be taken into account in the differential diagnosis of warty lesions in the mouth. Moreover, manifestations of blastomycosis in the oral mucosa may mimic squamous cell carcinoma - a diagnostic pitfall that otolaryngologists should consider.

PS-040

SGP: 8087

Clinical aspects and videolaringscopic diagnosis in dysphonic children

Author(s): Regina Helena Garcia Martins, Elaine Lara Mendes Tavares, Renata Mizusaki Iyomasa, Thalita Azevedo Fracalossi, Bruno Marcos Zeponi Fernandes de Mello

Keywords: child, diagnosis, voice disorders.

Introduction: child dysphonias occur in 11% of children. Nodules, cysts, papillomatosis, sulcus, and laryngeal palsy are common causes. These conditions require distinct treatments. **Objectives:** To analyze clinical aspects and laryngeal diagnoses in dysphonic children. **Methods:** 379 children aged 4-18 years with symptoms of dysphonia, seen at a university hospital, were included. All children underwent videolaringscopy (rigid or flexible endoscopy) to reach a diagnosis. **Results:** 379 children (141 girls and 238 boys) were included. Voice abuse was reported in 187 children (50.8%), nasosinus symptoms in 135, and reflux in 15. The main laryngeal diagnoses were: Nodules (n-239; 63.06%), cysts (n-56, 14.77%), functional dysphonia (n- 17; 4.48); nodule/cyst (n-12, 3.16%), etc. **Conclusions:** voice symptoms were more frequent in children aged 7 to 12 years, mostly among boys, and were chronic in most cases. Nodules and cysts were the most common laryngeal lesions.

PS-041

SGP: 8091

Surgical treatment of congenital laryngeal malformations

Author(s): José Antonio Pinto, Elcio Izumi Mizoguchi, Thiago Branco Sônego, Rodrigo Prestes dos Reis, Regina Helena Noronha Gonçalves, Fábio Caracho Batista

Keywords: congenital abnormalities, larynx, laser therapy, respiratory sounds.

Introduction: Laryngeal congenital malformations are the most common cause of stridor in newborns; disease patterns may vary depending on the obstruction site. We reported laryngomalacia, stenosis, laryngeal cysts, laryngocele, hemangioma, and lymphangioma. **Objective:** To report and evaluate the cases undergoing surgery for laryngeal congenital malformations. **Material and method:** A retrospective study of charts of patients with laryngeal congenital malformations requiring surgery, from January 1984 to April 2011. **Results:** 33 patients were selected, 17 (51.5%) were female and 16 (48.5%) were male. The conditions that were found: 20 cases of laryngeal stenosis (60.6%), of which 1 was supraglottic stenosis, 4 were stenosis

glottic, 8 were glottic plus subglottic stenosis, and 6 were subglottic stenosis; 1 laryngocele case (3%); 8 laryngomalacia cases (24.4%); 2 laryngeal cyst cases (6%); 1 hemangioma case (3%); and 1 lymphangioma case (3%). Cold scalpel or CO2 laser laryngeal microsurgery and/or an external approach were carried out. **Conclusion:** The occurrence of stridor is not unusual; its presence and etiology should always be investigated. Successful treatment depends on the indication and surgical technique.

PS-042

SGP: 8093

Tonsillar metastasis of malignant melanoma

Author(s): Graziella de Oliveira Semenzati, Regina Helena Garcia Martins, Bruno Marcos Zeponi Mello, Renato Oliveira Martins, Luis Eduardo da Silva Moz

Keywords: melanoma, neoplasm metastasis, palatine tonsil.

Introduction: Malignant melanoma is a skin cancer originating from melanocytes. It is an aggressive lesion of insidious growth, and is difficult to visualize. It is a serious disease because of its high metastatic potential to other organs. The literature suggests a possibility of lymphatic spreading to regional lymph nodes and hematogenic dissemination to the skin, subcutaneous tissue, lungs, liver, and brain. **Case Study:** I.M.B., aged 89 years, seen at an emergency unit, presented pain and swallowing difficulties for solid foods, fever, and lesions in both tonsils; the symptoms developed within 8 days. The ENT examination showed tonsils covered with a fibrinous exudate and a dark lesion in the upper pole. Clindamycin was prescribed and the patient was asked to return 7 days. At this the patient was asymptomatic, but the tonsillar lesions had darkened. A biopsy was done and the diagnosis was metastatic malignant melanoma. Additional dermatological investigation showed amputation of the distal phalanx of the right hand. Pathology had diagnosed acral lentiginous melanoma measuring 4.65 mm, free surgical margins and no perineural or lymph node invasion. The stage was T4bN0M0. **Comments:** Melanomas are aggressive tumors and distant metastases are frequent, although rare in the mucosa. It is rare for the tonsils to harbor metastatic melanomas; less than 30 cases have been described. Such metastases often arise late. In the present case, the lesion arose within 18 months. **Conclusion:** Metastases of melanoma are rare in the tonsils. A complete examination and multidisciplinary assessment are needed

PS-043

SGP: 8095

Angiolipoma of the Hypopharynx

Author(s): Stênio Marques de Camargo, Oscar Loiola de Alencar Neto, Érika Pérez Iglesias, José Speck Filho, Daylson José Alecrim da Silva Castro

Keywords: angiolipoma, hypopharynx, pharyngeal neoplasms.

The angiolipomas are benign neoplasms considered as histological variant of lipomas; they comprise 6 to 17% of lipomas. These tumors are unusual in the head and neck; just over 20 cases have been published. This case report describes a female patient aged 72 years, with nonspecific symptoms of the pharynx. Imaging studies showed a lesion with fat density and a significant blood supply. The tumor was resected surgically; pathology exam the diagnosis of angiolipoma.

PS-044

SGP: 8098

Maximum phonation time and calculation of the s/z ratio in a large child population

Author(s): Regina Helena Garcia Martins, Elaine Lara Mendes Tavares, Alcione G. Brasolotto, Renato de Oliveira Martins, Adriana Bueno Benito Pessin

Keywords: child, voice, voice disorders.

Introduction: The normative values of Maximum Phonation Time in children vary among authors; it is important to gather such values in a large child population to record representative results. **Objectives:** to measure the values of the Maximum Phonation Time and also the s/z ratio in 1,660 children without voice symptoms. **Case series and methods:** the Maximum Phonation Time and s/z ratio were recorded in 1,660 children aged from 4 to 12, without voice symptoms, by measuring a sustained /a/ vowel emission and the fricatives /s/ and /z/. **Results:** average values and the standard deviation of Maximum Phonation Times in children of different age groups

were: 4 to 6 years - 6.09 ± 1.95 (males - 5.97 ± 1.90 ; females - 6.21 ± 1.98), 7 to 9 years - 7.94 ± 2.00 (males - 8.07 ± 2.01 , females - 7.79 ± 1.98) and 10-12 years - 8.98 ± 2.19 (males - 9.05 ± 2.35 ; females - 8.92 ± 2.02). The overall average was 7.78 ± 2.31 in males, and 7.64 ± 2.19 in females. The s/z ratio was close to 1 in most children; it was over 1.2 in 133 children and under 0.8 in 220 children. **Conclusion:** the MPT values and the s/z ratio were recorded in 1,660 children without voice symptoms, and may be used as normal values in further studies.

PS-045

SGP: 8100

Deep neck infection by streptococcus bovis: a case report

Author(s): Camila Izaac Alfredo, Helder Ikuo Shibasaki, Rael Lucas Matimoto, Mariana Wilbergur Furtado de Almeida, Luiz Sérgio Raposo

Keywords: abscess, neck, streptococcus bovis.

Deep neck infections are serious diseases of bacterial etiology that affect the neck spaces; the complication rate is high if untreated. These include upper airway obstruction, pleural and pericardial effusion, skin necrosis, and mediastinitis. The common etiologic agents are a mixed flora; the most common are *Streptococcus viridans*, *Staphylococcus aureus*, and *Staphylococcus epidermidis*. *Streptococcus bovis* is described in literature as a common cause of bacteremia and endocarditis; it is also associated with gastrointestinal malignancy. It is an uncommon agent in superficial and deep neck infections. We report a case of deep neck infection caused by *Streptococcus bovis* with an unfavorable early development and a protracted progression resulting in wound dehiscence after surgical drainage.

PS-046

SGP: 8102

Sudden Dysphonia - superior sulcus tumor of lung and its differential diagnosis

Author(s): David Greco Varela, André Vital Nazianzeno, Amanda Canário Andrade Azevedo, Lorena Pinheiro Figueiredo, Fabiola Moreira Magalhães, Nilvano Alves Andrade

Keywords: dysphonia, lung neoplasms, vocal cord paralysis.

Introduction: Superior sulcus tumor of the lung is a presentation of lung cancer in 5% of lung tumors. Uncommon clinical presentations are rare and may go unnoticed; an example is sudden dysphonia. Injuries of sensory fibers causes upper aerodigestive symptoms and swallowing difficulties, coughing, aspiration, choking, hoarseness, and dysphagia. The recurrent laryngeal nerve (RLN) on the left side emerges at a lower level compared to the right side; it courses towards the chest along the aortic arch anterolaterally, turns under and behind the arc near the ligamentum arteriosum, passes behind the main bronchus and upwards towards the tracheoesophageal groove, and enters the larynx at the cricothyroid articulation. **Objective:** To review the differential diagnosis of vocal cord paralysis, based on a clinical case of superior sulcus tumors of the lung. **Case report:** A female patient aged 37 years arrived at the ENT emergency unit presenting dysphonia that had started 5 days before. Laryngoscopy showed left vocal cord abduction paralysis in the middle portion. There was a history of weight loss and chronic cough syncope. A laryngoscopy done 6 months before was normal. **Discussion:** The etiology of vocal fold paralysis may be classified according to the vagus nerve injury. The most common etiology of diagnosed cases is idiopathic cause, followed by neoplastic compression of the lung, thyroid, esophagus, mediastinal lymph nodes, surgical trauma, and external trauma.

PS-047

SGP: 8114

Pleomorphic adenoma of the minor salivary gland

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani De Almeida Brito, Marina Bandoli De Oliveira Tinoco, Saulo Bandoli De Oliveira Tinoco

Keywords: adenoma, adenoma, minor, pleomorphic, salivary glands.

Pleomorphic adenoma, or benign mixed tumor, is the most common type of benign salivary gland neoplasms. They comprise about 90% of all cases of benign salivary gland tumors and 50% of all neoplasms originating from the

major and minor salivary glands. The parotid gland is the most commonly affected - about 80% to 90% - followed by minor salivary glands of the palate. This condition may occur at any age but it is prevalent from ages 40 and 60 years, with a predilection for females. These tumors arise as smooth, painless, slowly growing tumors not fixed to adjacent tissue; their volume may increase rapidly, which is considered presumptive evidence of malignant transformation. This abstract describes a case of pleomorphic adenoma of minor salivary glands.

PS-048

SGP: 8123

Foreign body in the trachea

Author(s): Paulo Tinoco, Wellington Luiz Rodrigues Magalhães, Bruno Bonani de Almeida Brito, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: foreign-body reaction, airway obstruction, trachea.

Foreign bodies in airways are an important cause of morbidity and mortality among children and young individuals in Brazil. Foreign body aspiration is also the leading cause of accidental death in children under 3 years. Following aspiration of foreign material, a child may have a persistent cough, wheezing, vomiting, difficult breathing, pallor, cyanosis, or brief episodes of apnea. Clinical findings depend on the type, size and location of foreign body. The treatment of choice for foreign bodies in children is the endoscopic removal.

PS-049

SGP: 8155

Mandibular reconstruction with the aid of a biomodel.

Author(s): Frederico Santos Keim, José Carlos Martins Junior

Keywords: jaw, jaw fixation techniques, microsurgery.

Objective: Reconstructing the mandible and oral cavity is a challenge for surgeons. Management involves surgical reconstruction and/or prosthetic rehabilitation. **Case Report:** A male patient aged 67 years had undergone a right hemimandibulectomy for the treatment of a carcinoma some 15 years ago, without reconstruction. Further surgery was done 18 months ago for resecting a second tumor in the left mandible; in this case a mandibulectomy of the body and the central arch of the jaw were done. The surgeon chose to place a 2.4 mm plate attached to the remaining ramus of the mandible bilaterally without grafting. On clinical examination showed that mandibular excursion was impossible, intense salivation, jaw positioned at its maximum aperture, and skin exposure of the reconstruction plate on the right. **Results:** The surgical approach consisted of microvascular fibula reconstruction and fixation of a locking plate; prototyping was used in selecting and modeling the plate before surgery. **Conclusion:** We describe a case of mandibular microsurgical reconstruction based on a rapid prototyping technique to plan for reconstruction plate selection and graft size.

PS-050

SGP: 8165

Obese women: voice characteristics and phonation measures.

Author(s): Fernando Machado de Mesquita, Débora Cardoso Rossi, Florence Nunes Brandão, João Paulo de Andrade de Maria

Keywords: obesity, respiration, voice, voice quality.

Introduction: Obesity is associated with health disorders such as respiratory and orofacial motricity conditions. **Objective:** to describe voice characteristics and phonation measures in a group of grade III obese women. **Methods:** The sample comprised two groups, a study group (EG) consisting of 30 grade III obesity female subjects aged 25 to 45 years, who were candidates for bariatric surgery, and a control group (CG) selected by pairing with women of similar age, without sings or symptoms of voice disorders and a body mass index (BMI) within normal limits. **Results:** the results of perceptual evaluation in most of the GE group was: middle pitch for treble, inadequate loudness strong or weak), varying resonance without balance, and GRBASI scale with overall grade (G) equal to zero. The results

of acoustic analysis in most subjects for all speech samples in the GC were: mean f0 below 204Hz. All PMD values in the GC were higher than those in the GE. A comparison of GE with the CG was statistically significant for age, weight and BMI, the average acoustic intensity, and the TMF. **Conclusion:** Grade III obesity women had as voice characteristics: average treble pitch, inappropriate loudness, and resonance not balanced. Acoustics in this group showed a fundamental frequency with a higher tendency and a decreased maximum phonation time.

PS-051

SGP: 8168

Obese women: phonatory measures and fundamental frequency before and after surgery

Author(s): Fernando Machado de Mesquita, Débora Cardoso Rossi, Florence Nunes Brandão, João Paulo de Andrade de Maria

Keywords: obesity, respiration, voice, voice quality.

Introduction: morbid obesity is associated with respiratory and orofacial health disorders. **Objective:** To describe phonatory measures and the fundamental frequency in grade III obesity female individuals before and after bariatric surgery. **Method:** Ten grade III obesity subjects seen at a public health clinic of the Unified Health System (SUS) in Belo Horizonte were selected. Measures of voice were made preoperatively in acoustic booths and compared with similarly standardized measures at the first and third postoperative months of bariatric surgery. **Results:** a comparison of pre- and postoperative measures recorded: five subjects had increased / s / MPT after one month and six had decreased / s / MPT after three months. Nine had values below 19.7 at the three time points: in / z / four decreased after one month; four decreased after three months; in / a / four decreased after one and three months. Seven increased in the vowel / i / within one month, and the result was similar after three months. The fundamental frequency had similar results after one month; the majority had increases after three months. **Conclusion:** The MPT for / s / and / z / was below adequate values at the three time points. The vowels / a / and / i / had times below adequate values. The fundamental frequency was above average in all three time points. Variations correlated with individual weight loss, altered eating habits, and psychological changes after bariatric surgery.

PS-052

SGP: 8172

Complications of jet ventilation in microsurgery of the larynx: two case reports

Author(s): José Antônio Pinto, Fabio Caracho Batista, Henrique Wambier, Renata Coutinho Ribeiro, Regina Helena N. Gonçalves, Thiago Branco Sonego

Keywords: high-frequency jet ventilation, larynx, microsurgery, pneumothorax.

Introduction: microsurgery of the larynx is a procedure in which surgeons and anesthesiologists most compete for airway use. The patient is ventilated through a cannula attached to a transmitter jet. Periods of apnea are interspersed with high-flow ventilation, enabling surgical manipulation. Among the complications of using this device are gastric distension, tracheal injury, aspiration of secretions into the lower airways, and pneumothorax. **Objective:** we report two cases of complications in children undergoing laryngeal microsurgery. A male subject with laryngeal papillomatosis and a female subject with laryngeal stenosis developed pneumothorax as a complication of jet ventilation. **Discussion:** barotrauma is related to several factors, including the volume of gas supplied, pressures greater than 30-50 psi, and inspiratory time, which may result in respiratory stasis and pulmonary hyperventilation. Controlling the airway pressure only does not eliminate the risk of developing pneumothorax. **Conclusion:** otolaryngologists and anesthesiologists should be vigilant and equipped to deal with these complications.

PS-053

SGP: 8174

Lymphoepithelioma of the nasopharynx: a case report and review of the literature

Author(s): Miguel Leal Andrade Neto, Fernanda Martins de Andrade, Epifanio José Pereira Filho, Loren de Brito Nunes, Pedro Simas Moraes Sarmento, Aknar Freire de Carvalho Calabrich

Keywords: carcinoma, epstein-barr virus infections, nasopharynx, squamous cell.

Introduction: Neoplasms of various origins may develop in the nasopharynx. When undifferentiated, non-keratinizing carcinomas (which comprise the majority of nasopharyngeal carcinomas) are often infiltrated by lymphocytes, and are named lymphoepitheliomas. **Case Report:** J.S.N., a female patient aged 44 years, reported bilateral nasal block for over 6 months and episodes of nasal bleeding. The examination revealed an enlarged cervical lymph node and an extensive tumor in the nasopharynx that obstructed almost all of the airway. She was referred for biopsy; immunohistochemistry confirmed a diagnosis of lymphoepithelioma associated with the Epstein-Barr virus. **Discussion:** The nasopharyngeal carcinoma is histopathologically divided into three categories: keratinizing squamous cell carcinoma, non-keratinizing carcinoma, and undifferentiated carcinoma. Population studies show that initial staging and histology are important prognostic factors. Symptoms of patients with lymphoepithelioma depend on the tumor site and direction of its expansion. In most cases, the initial sign is an asymptomatic neck tumor. The mainstay of treatment for nasopharyngeal carcinoma is radiotherapy. The main cause of treatment failure is a late diagnosis, because symptoms are nonspecific. **Conclusion:** Lymphocytic infiltration in tumor tissue is the main histological feature of lymphoepitheliomas. Symptoms are similar to those in other diseases of this anatomical site; complaints are nonspecific. When this diagnosis is suspected, interventions should not be postponed because of the risk of reducing the chances of curing this treatable tumor.

PS-054

SGP: 8190

Human syngamosis as a rare cause of dry cough

Author(s): Janaina Oliveira Bentivi Pulcherio, Eduardo Machado Oliveira da Silva, Daniela Pereira Rezende, Patrícia Bittencourt Barcia Barbeira, Marcos Aurélio Baptista de Oliveira

Keywords: cough, helminths, parasites.

Introduction: Cough is symptom in many diseases, and may be a diagnostic challenge. Upper airway chronic parasitism is a rare cause of dry cough. **Report:** A female patient aged 41 years presented with chronic dry cough and a history of using several medications. Endoscopy revealed a "Y" shaped worm which was identified as a *Mammomonogamus* (*Syngamus*) laryngeus couple. **Comments:** *Syngamus laryngeus* is a nematode that infects the upper respiratory tract of buffaloes, cattle, goats and birds; it may parasitize humans accidentally. The diagnosis of human syngamosis is made by finding worm extruded through coughing or removed by endoscopy. The only efficient treatment is the removal of worms. **Final Comments:** An endoscopic exam is easy to perform and is essential for the diagnosis of otolaryngological diseases that cause chronic dry cough, especially those caused by uncommon entities.

PS-055

SGP: 8198

Bilateral glossopharyngeal paralysis after tonsillectomy

Author(s): Débora Cipriani Dias, Viviane Feller Martha, Denise Rotta Rutkay Pereira, David Tesser Neto, Sérgio Kalil Moussalle

Keywords: glossopharyngeal nerve, paralysis, tonsillectomy.

Introduction: Postoperative neural lesions following tonsillectomy are not often reported in the literature and appear rare. Our Unit monitored a case of bilateral posttonsillectomy glossopharyngeal paralysis. **Case Report:** A child aged 5 years was referred to our emergency room because of severe

dysphagia 10 days after adenotonsillectomy. Bilateral neural lesion caused by an electrocautery was identified as the cause of this postoperative complication. The child recovered after a few months. **Discussion:** Because the glossopharyngeal nerve courses close to the tonsillar fossa, direct nerve injury is the most plausible explanation for glossopharyngeal nerve paralysis as a complication of tonsillectomy. **Conclusion:** Although glossopharyngeal nerve paralysis is a rare complication of tonsillectomy, patients must be aware of its possibility.

PS-056

SGP: 8202

Leiomyosarcoma of the larynx induced by radiotherapy

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vânia Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: larynx, leiomyosarcoma, radiotherapy.

Leiomyosarcoma of the larynx is a rare and extremely aggressive form of cancer. So far about 50 cases have been described in the head and neck literature. This abstract describe a case of leiomyosarcoma of the larynx after radiotherapy for the treatment of this malignancy.

PS-057

SGP: 8204

Squamous cell carcinoma of vocal folds: a case report

Author(s): Hamilton Leal Moreira Ferro, Aline Gaiotto Maluta, Luzia Gross Lague, Marcela Cristina Weber Pasa, Naize Giacobbo de Lima, Ricardo Kunde Minuzzi

Keywords: carcinoma, dysphonia, glottis, squamous cell.

The majority of laryngeal cancers are of epithelial origin - the squamous cell carcinoma type. About two thirds of these tumors arise from the glottis. This disease affects mostly male smokers. The purpose of this study was to report a case of squamous cell carcinoma of vocal folds diagnosed early. A male patient aged 62 years, a smoker, visited the ENT clinic complaining of dysphonia without cough or a sore throat. Laryngoscopy revealed a tumor in the anterior third of the right vocal fold and no other abnormalities. A biopsy revealed invasive moderately differentiated squamous cell carcinoma. The patient was referred to radiotherapy and improved after 4 months of treatment; post-therapy control examinations showed no signs of a vocal cord tumor. Videolaryngoscopy was done 9 months and 1 year 4 months after, showing mobile vocal folds with preserved edges and no signs of tumors. Recognizing this condition, and early clinical examinations, may result in high cure rates with low morbidity in squamous cell carcinoma with unilateral vocal fold involvement.

PS-059

SGP: 8216

Surgery combined with type A botulinum toxin for the treatment of vocal process granulomas

Author(s): José Antonio Pinto, Thiago Branco Sonego, Rodrigo Prestes dos Reis, Henrique Wambier, Elcio Izumi Mizoguchi

Keywords: botulinum toxins, granuloma, laryngeal, larynx, microsurgery.

Vocal process granulomas are rare benign lesions of the posterior glottis, and may cause a wide range of symptoms. There is no consensus in the treatment of this disease because of its multifactorial etiology, making it a major challenge. **Aim:** To report our experience in the treatment of vocal process granulomas by laryngeal microsurgery associated with application of botulinum toxin. **Materials and Methods:** A retrospective study evaluated the results of patients treated with laryngeal microsurgery and application of botulinum toxin, from 1995 to 2010, at our unit. **Results:** Five male patients were evaluated. All had laryngopharyngeal reflux; one had a history of intubation and three reported voice abuse. Two cases relapsed after the initial treatment, and subsequently improvement with adjuvant therapy. Three cases responded to the initial treatment; in two of them adjuvant therapy

was maintained during the postoperative period. **Conclusion:** Combined treatment involving laryngeal microsurgery and application of botulinum toxin was effective in symptomatic cases where medical therapy fails.

PS-060

SGP: 8243

Laryngocele

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flavia Rodrigues Ferreira, Vânia Lúcia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: airway obstruction, disease, larynx.

Laryngocele is a rare disease of the larynx and is characterized by abnormal dilation of the saccule in Morgani's ventricle. The pathogenesis is controversial; congenital and acquired factors may be considered in the formation of laryngocele. It may be classified as internal and external. Laryngocele is more common in men, and symptoms vary according to its size; it is asymptomatic in most cases. Intralaryngeal pressure facilitates dilation of the saccule. The diagnosis is made by the clinical history, physical examination, and radiological imaging; computed tomography is the method of choice for the diagnosis. Treatment consists of surgical removal.

PS-061

SGP: 8245

Bilateral vocal cord palsy in adduction after thyroidectomy

Author(s): Edmara Laura Campiolo, Carolina Vianna Gerber, Fernanda Zeni da Rosa, Fernando Arruda Ramos, Gustavo Philippi de Los Santos, Lina Ana Medeiros Hirsch

Keywords: cordotomy, thyroidectomy, vocal cords.

To report a case of bilateral vocal cord palsy in adduction due to recurrent laryngeal nerve injury as a rare complication of total thyroidectomy. It is a frequent cause of hoarseness and is associated with severe respiratory disorders due to the closure of the glottis. V.L.S.R.S., aged 37 years, in 2002 underwent total thyroidectomy. After surgery, the patient presented hoarseness, dyspnea and dysphagia; hoarseness and dyspnea worsened five months after surgery. These symptoms persisted for eight years resulting in a decrease of work activities. In 2010 the patient visited the Otolaryngology Department and was referred to the Head & Neck Surgery Unit for treatment of the paralysis. The surgical technique was posterior cordotomy of the right vocal fold; the patient remained with a tracheostomy for 15 days and progressed favorably. Bilateral paralysis in the median position causes significant breathing disorders, which decreases the quality of life of patients. Emergency tracheostomy may be indicated before definitive surgery, as the risk of apnea is high.

PS-062

SGP: 8274

Inflammatory pseudotumor of hypopharynx: a case report

Author(s): Luiz Henrique Carboni Souza, Rodrigo Lacerda Nogueira, Emanuel Capistrano Costa Junior, Renata Maria Soares Malago, Mariane Sayuri Yui, Guilherme Pietrucci Buzatto, Carolina Sponchiado Miura

Keywords: granuloma, hypopharynx, plasma cell, prednisolone.

Inflammatory pseudotumor is a soft tissue tumor of unknown etiology that mimics malignant disease although it is clinically, radiographically, and histologically benign. This disease is rare in the head and neck, and even rarer in the hypopharynx. Several treatments have been proposed; the emphasis has been on systemic steroids, with encouraging results. We report a case of a female patient aged 36 years, with clinical and radiological findings of a tumor in the hypopharynx that was suggestive of undetermined pleomorphic adenoma in the aspiration biopsy. However, another biopsy led to a diagnosis of inflammatory pseudotumor of the hypopharynx. The proposed treatment and results are discussed by comparing neck MRI scans before and after treatment.

Eagle's syndrome: two case reports

Author(s): Monik Assis Espindula, Rafael Fernandes Goulart dos Santos, José Felipe Bigolin Filho, Amadeu Luís Alcântara Ribeiro, Luiz Augusto Miranda Sanglard, Ludimila de Oliveira Cardoso, Thiago de Oliveira Barros, Wilson Benini Guércio

Keywords: deglutition disorders, facial pain, neck pain.

Eagle Syndrome is a rare disease that was first described in 1937. Its symptoms include cervical pain, otalgia, foreign body sensation in the throat. Due to its nonspecific symptoms it is rarely diagnosed. The main treatment is surgery.

Squamous cell carcinoma on the dorsum of the tongue in a non-alcoholic and non-smoking patient

Author(s): Miguel Bonfitto, Jesiel Ballerini, Rodrigo Gonçalves Dias, Deise Mara Lima da Costa

Keywords: carcinoma, squamous cell, tongue diseases, tongue neoplasms.

Background: Although malignant tumors of the mouth are associated with smoking and alcohol abuse in about 90% of patients, other risk factors are important and should be valued by physicians. HPV infection and sun exposure alone may be associated with neoplasms; other factors are chronic oral trauma, family predisposition, HIV infection, cytomegalovirus, HTLV, Epstein-Barr virus, and others. **Goals:** To raise awareness about the importance of less prevalent risk factors for carcinoma of the tongue by reporting the case of a patient without major risk factors and with this disease. **Materials and methods:** The study monitored a female patient aged 74 years with squamous cell carcinoma on the dorsum of the tongue, admitted by into the Otorhinolaryngology Unit. There was a history of sun exposure and HPV infection on the lip; the patient did not smoke or consume alcohol. There were initial lesions on the lower lip and a progressive neoplastic exophytic lesion on the dorsum of the tongue; the patient had multiple metastases, and eventually died. **Model:** case report. **Conclusions:** The importance of lesser risk factors in the development of oral cancers should not be underestimated. Factors that are often overlooked include sun exposure, infections (HPV, among others), oral hygiene habits, certain types of food, and the patient's genetic predisposition.

Benign vocal fold lesions: surgical experience of the Department of Otorhinolaryngology, Santa Casa de Misericórdia da Bahia.

Author(s): David Greco Varela, Amanda Canário Andrade Azevedo, Lorena Pinheiro Figueiredo, Fabiola Moreira Magalhães, André Vital Nazianzeno, Nilvano Alves Andrade

Keywords: cysts, papilloma, polyps, vocal cords.

Introduction: Vocal fold polyps are benign lesions resulting from irritation and speech trauma. Laryngeal papillomas are the most common benign tumors of the larynx, and are caused by the human papilloma virus (HPV). Vocal fold cysts may derive from epidermal or mucous retention. Vocal fold nodules are associated with voice trauma in children and adults. **Objective:** To analyze the profile of benign tumors operated at a reference center in the State of Bahia. **Methods:** The study included cases identified by videolaryngoscopy as benign, and which were referred to surgery due to complaints of poor voice quality and/or dyspnea. **Results:** There were 62 surgical cases. Lesions and their frequencies were as follows: polyps (30.6%), papilloma (22.5%), cysts (19.4%), and other lesions (27.4%). **Discussion:** An awareness of the frequency of benign vocal fold tumors in a given geographical environment improves training of residents by underlining specific aspects of these lesions. A higher frequency of lesions defined as polyps (30.6%) and laryngeal papillomas (22.5%) has been observed in other studies. Medical residents should participate in all steps of the diagnosis and treatment of injuries initially considered benign.

Papillary carcinoma in a thyroglossal duct cyst: Case report

Author(s): Aden Luigi Castro Testi, Marcos Ribeiro de Magalhães, Henrique Pedro Magoga Filho, Noelle Kistemarcker do Nascimento Bueno, Renato Cardoso Guimarães, Priscila Yukie Aquinaga, Amanda Feliciano da Silva

Keywords: Carcinoma; Thyroid Gland; Thyroglossal Cyst.

Introduction: Thyroglossal duct cysts result from defective thyroglossal duct closure in embryogenesis. Non-odontogenic cysts are the most common neck cysts. It is thought that 7% of the world population has remnants of this duct. **Objective:** To describe a case of an adult patient with pathology diagnosis of papillary carcinoma in a thyroglossal duct cyst. **Discussion:** Total thyroidectomy was done in this case, concurring with the work of Falvo et al, 2006 and Steck et al, 2007. These authors reported that carcinoma in the thyroid gland was not rare, and discussed the hypothesis that intracystic tumors were metastases from occult thyroid carcinomas. **Conclusion:** Although rare, thyroglossal duct cysts may become malignant. Thus, it is essential to send surgical specimens to pathology. Thyroidectomy in association with this condition remains controversial; further scientific evidence is needed to support or reject this option.

Challenges in paranasal sinus rhabdomyosarcomas: a case report and review of the literature.

Author(s): Jéssica Guimarães Gomes Silva, Augusto Cesar Lima, Larissa Salomão Pereira, Nicolau Tavares Boechem, Alexandra Torres Cordeiro Lopes de Souza

Keywords: adolescent, alveolar, head and neck neoplasms, rhabdomyosarcoma.

The rhabdomyosarcoma is a rare malignant neoplasm originating from primitive mesenchymal cells; it is more common in the head and neck of pediatric patients. There have been advances in diagnosing advanced stages of the disease - where the treatment is limited and the prognosis is poor in most cases, especially if the sinuses are involved. This study reports a case of a paranasal rhabdomyosarcoma in a young patient, who was treated at an Otolaryngology and Neurology Unit. A review of the existing literature is also made. **Case Report:** A male patient aged 18 years reported nasal block, epistaxis, and anosmia for six months, and rapidly progressive proptosis and ipsilateral amaurosis. The CT scan of paranasal sinuses showed an expanding lesion in the maxillo-ethmoidal region and the left nasal cavity extending to the ipsilateral orbit. Incisional biopsy was performed by videoendoscopy. Histopathology showed a malignant neoplasm of round cells infiltrating bone, soft tissue and the respiratory mucosa, with areas of necrosis. A diagnosis of rhabdomyosarcoma was confirmed by immunohistochemistry. Within the same month the patient presented retro-orbital pain and deforming facial asymmetry, and was referred to a reference unit for multimodal therapy, chemotherapy and radiotherapy. **Conclusion:** Head and neck RMS presents in most cases with nonspecific symptoms, which delays the diagnosis and treatment, resulting in a worse outcome. This particularly applies to the alveolar subtype, which has a worse survival profile and a higher propensity to metastasize. The individualized multimodal therapy, including surgical resection, radiotherapy and chemotherapy, should always be of choice so that the patient's survival rate may be increased.

Miliary tuberculosis with laryngeal manifestations

Author(s): Renan Augusto Felipe, Vinicius Ribas Fonseca, Antonio Celso Nassif Filho, Diego Augusto de Brito Malucelli, Eliza Mendes de Araújo

Keywords: dysphonia, laryngoscopy, larynx, tuberculosis.

Laryngeal tuberculosis is one of the most common granulomatous disease of the larynx, but comprises less than 1% of cases of extrapulmonary tuberculosis. The most frequent symptom is dysphonia, followed by odynophagia, dysphagia, cough, hemoptysis, and dyspnea. Laryngoscopy shows nodular or exophytic lesions, ulceration, hyperemia, edema and, monorchiditis. The aim of this study was to report a clinical case of a patient with dysphagia,

fever, weight loss, and an enlarged submandibular lymph node. Laryngeal tuberculosis was diagnosed. The patient responded well to the treatment for tuberculosis (RIPE).

PS-069

SGP: 8341

Non-Hodgkin's lymphoma in the base of tongue

Author(s): Janaina Oliveira Bentivi Pulcherio, Eduardo Machado Oliveira da Silva, Daniela Pereira Rezende, Patrícia Tramontano Fraiha, Marcos Aurélio Baptista de Oliveira

Keywords: lymphoma, non-hodgkin, oropharyngeal neoplasms, tonsillar neoplasms.

Introduction: Lymphoma is the third most common type among oral cancers. Involvement of Waldeyer's ring by non-Hodgkin's lymphoma is not uncommon but its incidence on the tongue is rare. There is little published data on the features, statistics, and classification of lymphomas in this site. **Report:** A male patient aged 69 years presented with a foreign-body sensation in his throat for the past two months and no other symptoms. Endoscopy revealed a nodule-like lesion on the base of the tongue. Biopsy and immunohistochemistry revealed diffuse large B-cell lymphoma. Bone marrow aspiration, serologies, and image exams were normal. The patient was referred for oncological monitoring. **Discussion:** Diffuse large B-cell lymphoma is typical of elderly individuals, particular males. There are few signals and symptoms. The diagnosis is made by biopsy. Imaging studies are important to assess disease extension and possible complications. The disease usually responds well to chemotherapy and radiotherapy. The prognosis depends on the tumor stage, malignant cell type, and response to treatment. **Final comments:** Lymphomas should be considered in the differential diagnosis of oral lesions.

PS-070

SGP: 8351

Hemilaryngeal paralysis by compression of the left recurrent laryngeal nerve secondary to aortic aneurysm

Author(s): Daniella Cintra Martins, Marco Antonio Ferraz De Barros Baptista, Leonardo Haddad, Priscila Bogar Rapoport

Keywords: aortic aneurysm, vocal cord paralysis, voice disorders.

The aortic aneurysm is an uncommon cause of recurrent laryngeal nerve palsy. We report the case of a patient aged 77 years referred from an ENT outpatient clinic, who complained of dysphonia for 8 months. Telemetry-goscopy revealed paralysis of the left hemilarynx; cervical and thoracic CT scan showed an aortic arch aneurysm. The purpose of this report was to review the literature on the etiology, symptoms, diagnosis, and treatment of this type of vocal cord paralysis.

PS-071

SGP: 8352

Laryngeal abscess in the arytenoid: case report

Author(s): Tatiana Carneiro Da Cunha Almeida, Artur Grinfeld, Abrahão Grinfeld, Paulo Sérgio Perazzo, Francisco José Motta Barros De Oliveira Filho, Mirella Melo Metidieri, Larissa Roberta Souza Campos

Keywords: abscess, arytenoid cartilage, laryngeal diseases.

Introduction: Laryngeal abscesses may be considered rare today because of increased wide-spectrum antibiotic use. The most frequent site of laryngeal abscesses is the supraglottic periepiglottic area; these abscesses are extremely unusual in other sites. (1,2,3,4) Furthermore, these patients may present to otolaryngologists with other common complaints such as dysphonia, pain, dysphagia, foreign body sensation in the throat, or other occasional findings that do not require therapy. (1,2) **Case report:** A female patient aged 71, diagnosed as diabetic and hypertensive, complained of a severe sore throat within the past 24 hours. The otorhinolaryngological evaluation diagnosed infectious pharyngitis. After 24 hours, the symptoms worsened and the patient developed fever and dysphonia. Videopharyngolaryngoscopy (rigid endoscope) revealed severe hypertrophy and hyperemia of left arytenoid. Subsequent videopharyngolaryngoscopies noted drainage of pus from the

left arytenoid. Five days after starting on lincomycin, the symptoms regressed, and cefaclor was started and prescribed for ten days; the symptoms disappeared 30 days later. **Discussion:** Laryngeal abscesses should be taken into account in the differential diagnosis of severe cases of common laryngitis. In most cases, medical treatment is sufficient; surgery may be needed, in particular to rule out tumors or other anatomical abnormalities of the larynx. (1,5,6,7)

PS-072

SGP: 8356

A rare case of Apex Orbital Syndrome caused by diffuse large B-cell lymphoma

Author(s): Juliana Lana Milane, Larissa Fernandez Correia Brandão, Marcus Miranda Lessa, Álvaro Muiños de Andrade, Clara Mônica Figueredo de Lima, Hélio Andrade Lessa

Keywords: diffuse, large b-cell, lymphoma, ophthalmoplegia, orbit.

The orbital apex syndrome is characterized by ophthalmoplegia, ptosis and loss of visual acuity. Most cases are inflammatory. **Objective:** To report a rare case of orbital apex syndrome caused by diffuse large B-cell lymphoma. **Report:** MADP, a female patient aged 33 years, presented nasal block, otalgia, and retroorbital pain within the past 2 months. The patient developed ptosis, swelling of the right eyelid, and ipsilateral diplopia, proptosis, and amaurosis. The physical examination showed ptosis, proptosis and ophthalmoplegia to the right. Edema in the right middle meatus was visualized on nasal endoscopy. A CT scan revealed material of soft tissue density in the maxillary sinus and the anterior and posterior ethmoid to the right. A diagnosis of Orbital Apex Syndrome as a complication of sinusitis was suggested. The patient was treated with intravenous antibiotics and endoscopic sinus surgery. The result of histopathological analysis was chronic inflammatory process. The patient developed pain and paresthesia in the right portion of the face in addition to trismus, chemosis and a granulomatous lesion on the soft palate. A second CT scan revealed opacification of the maxillary, ethmoid and sphenoid sinuses, the mastoid cavity, the orbit and other spaces such as the masticator space. A second biopsy revealed diffuse large B-cell lymphoma. The patient was started on chemotherapy, but died five months later. **Conclusion:** A poor prognosis in the Orbital Apex Syndrome requires prompt diagnosis and treatment; furthermore, malignancies should also be taken into account in the differential diagnosis when this syndrome is present.

PS-073

SGP: 8359

Salivary duct carcinoma of a minor salivary gland: case report

Author(s): Manuella Silva Martins, Otavio Marambaia, Milena Magalhães de Sousa, Lilian Lacerda Leal, José Franklin Gomes Dantas

Keywords: carcinoma, ductal, salivary ducts, salivary gland neoplasms.

Introduction: salivary duct carcinoma (SDC) is an uncommon malignancy of salivary glands. Several reviews of salivary gland neoplasms have demonstrated the rarity of this tumor. It usually affects major salivary glands, particularly the parotid glands, in 80% of cases. Involvement of minor salivary glands is less frequent; the presentation is usually insidious. This study reports a case of SDC of a minor salivary gland in a female patient. **Discussion:** SDC is a high grade adenocarcinoma of salivary glands that is histologically indistinguishable from ductal carcinoma of the breast. Kleinsasser et al described this neoplasm in 1968, but there are few series in the literature. The incidence of SDC ranges from 6% to 10% of all parotid gland cancers; it is, however, difficult to establish the true occurrence, as this tumor may be associated with other malignancies. SDC is histologically characterized by ductal involvement with several forms of growth, namely: solid, papillary, cribriform, and comedonecrosis. **Conclusion:** SDC is a rare neoplasm of the salivary glands; it is even more unusual in minor salivary glands. Although it was described in 1968 few studies of this disease have been published.

Squamous cell carcinoma of the head and neck

Author(s): Luzia Gross Lague, Hamilton Leal Moreira Ferro, Naize Giacobbo de Lima, Marcela Cristina Weber Pasa, Aline Gaiotto Maluta, Ricardo Kunde Minuzzi

Keywords: biopsy, head and neck neoplasms, recurrence.

Introduction: Squamous cell carcinoma of the head and neck is one of the five most common cancers in the world, ranking fifth in cancer mortality, including the oral cavity, pharynx and larynx. **Objective:** To report a case of multicentric squamous cell carcinoma of the head and neck with a follow-up period of over five years, and tumor recurrence. **Case Report:** MLZ, a female patient aged 62 years, presented dysphonia and phlegmon in the anterior cervical region in use of antibiotics without improvement six years ago. The patient smoked but did not drink alcohol. Neck and thoracic CT scans showed inflammation in the neck and a tumor invading the anterior commissure and the elastic cone. A biopsy diagnosed squamous cell carcinoma. Radiotherapy and hormone replacement therapy for thyroid hypofunction were indicated. In the fifth year the patient developed a lesion on the dorsum of the tongue. Surgery was done and a diagnosis of squamous cell carcinoma was made. The patient was monitored. **Discussion:** Squamous cell carcinoma affects mainly men and is related to smoking, alcoholism, avitaminosis, syphilis, and HPV. The routine follow-up is monthly in the first year, quarterly in the second year, then biannual and annual after the third and fifth year. Early detection of recurrence is extremely important for less aggressive treatment. Radiotherapy elevated the incidence of hypothyroidism. **Final Comments:** squamous cell carcinoma is a public health problem because patients seek medical help only at more advanced stages of the disease, when the survival rate is low.

Correlation between laryngeal carcinoma and voice abuse in public school teachers in Curitiba/PR; results and review of the literature

Author(s): Eduardo Baptistella, Marcelo Charles Pereira, Diego Malucelli, Daniel Rispoli, Thanara Pruner da Silva, Renata Vecentin Becker, Daniela Dranka, Gustavo Bernardi

Keywords: carcinoma, dysphonia, larynx.

Introduction: Teachers use their voice as a working tool and are at a high risk of developing voice problems. The most common voice complaints in teachers are voice fatigue, voice loss, sore throat, and hoarseness. Voice problems often worsen with abusive use or misuse of voice, respiratory conditions, and smoking. Several studies have suggested a correlation between professional occupation and dysphonia, but few studies on the potential correlation between voice abuse in this class of workers and laryngeal carcinoma have been published. Carcinoma of the larynx is one of the most common head and neck carcinomas, comprising 25% of malignancies in these areas, and 2% of all malignant tumors. **Objective:** To analyze potential correlations between voice abuse and laryngeal carcinoma. **Materials and Method:** A retrospective study of 328 charts (January 2009 to January 2011) of public school teachers in Curitiba, who were teachers for at least 5 years, and who had voice complaints. **Results:** 104 patients were smokers for 2 years or more. Among those, 12 cases of leucoplasmia and 2 cases of squamous cell carcinoma of the larynx were found. There were no malignant or pre-malignant lesions among the 224 non-smoking teachers. **Conclusion:** There is no relationship between voice abuse and laryngeal carcinoma. However, this study concurs with other published papers in that smoking is a risk factor for this cancer.

Surgical treatment of congenital anterior glottic stenosis: case report

Author(s): Rachel Catão de Lucena, Tarcísio Aguiar Linhares Filho, Ricardo Silva Chiabai Loureiro, Renato Tadao Ishie, Christian Wiikmann

Keywords: congenital abnormalities, laryngostenosis, vocal cords.

Congenital laryngeal stenosis is rare comprising less than 5% of all congenital laryngeal deformities. This malformation results from incomplete recanalization of the primitive larynx during the tenth week of embryogenesis. Treatment of laryngeal stenosis is important to provide a clear airway and good voice quality. The purpose of this report was to describe the surgical technique for anterior congenital glottic stenosis and to evaluate the outcome of the surgery. Surgical management of laryngeal stenosis is still a major challenge because of recurrence, which is an issue in the techniques described in the literature; there is no consensus on an optimal approach.

Laryngeal schwannoma: a case report

Author(s): Edson Junior De Melo Fernandes, Claudiney Candido Costa, Marina Neves Rebouças, Fabiano Santana Moura, Mikhael Romanholo El Cheikh

Keywords: laryngeal neoplasms, larynx, repertory: larynx and trachea section.

Introduction: Neurogenic tumors of the larynx are rare; there are few published cases. Schwannomas account for 0.1% of all benign tumors of the larynx. These are tumors of the sheaths of peripheral nerves, autonomic nerves, and cranial nerves. **Objective:** To report a case of a patient with laryngeal schwannoma seen at our unit. **Case report:** a female patient aged 20 years complained of progressive dyspnea for 1 year, dysphonia, dysphagia for solids, and a pharyngeal globus. Rigid laryngoscopy showed a supraglottic tumor obstructing about 90% of the lumen. The patient developed severe dyspnea, which required emergency tracheostomy. MRI showed an expanding lesion, with intense heterogeneous enhancement after administration of intravenous contrast, along the posterior wall of hypopharynx that occludes most of the lumen; it measured 2.8 cm and 2.2 cm, and suggested a neoplasm. Histopathology and immunohistochemistry led to the diagnosis of laryngeal schwannoma. The patient underwent open surgery for resection of the laryngeal tumor. There were no immediate postoperative complications. **Conclusion:** The diagnosis of laryngeal lesions may be difficult; often it is made only by pathology.

Clinical and functional aspects of laryngeal papillomatosis

Author(s): David Greco Varela, Tiago Barros da Rocha, Gentileza Santos Martins Neiva, Marília Pinheiro Vasconcelos, Nilvano Alves Andrade

Keywords: dysphonia, papilloma, vocal cords.

Introduction: Recurrent respiratory papillomatosis is a viral disease caused by the human papilloma virus (HPV); it is associated with airway lesions and is a benign neoplasm and a cause of dysphonia in adults and children. Its clinical course is variable; there may be spontaneous remission or progression to aggressive forms. **Aim:** To study functional abnormalities in patients with a clinical diagnosis of vocal cord papilloma. **Methods:** A cross-sectional study of 20 patients with laryngeal lesions, treated at the ENT Department of the Santa Izabel Hospital, during one year. A questionnaire was applied to evaluate clinical and functional aspects of the disease and videolaryngopharyngoscopy findings. Qualitative variables were expressed as simple and relative frequencies and were compared using the chi-square test and Fisher's exact test. **Results:** All patients presented with dysphonia as their first symptom; there was a higher prevalence of juvenile mixed lesions (41.7%), and adult forms (12.5%). Recurrence rates were higher in the juvenile form (up to five surgeries). The total VHI contained more moderate class in juvenile forms (41.7%), and moderate and severe classes in adult forms (both 37.5%). **Conclusions:** We concluded that more aggressive forms of vocal cord papillomatosis are proportional with the degree of dysphonia in patients.

Extensive vocal process granuloma due to laryngopharyngeal reflux.

Author(s): Ana Cláudia Ghiraldi Alves, Isabele Favoretto Cañas Peccini, Pedro Robson Boldorini, Fábio Tadeu Moura Lorenzetti

Keywords: granuloma, laryngoscopy, larynx, vocal cords.

Introduction: The pathogenesis of vocal process granulomas is mainly attributed to three predisposing factors: voice abuse, laryngopharyngeal reflux disease (LPR), and laryngeal intubation. It is idiopathic when these factors are not encountered. **Objective:** To report a case of a large laryngeal granuloma that progressed rapidly, its follow-up, and regression after treatment of laryngopharyngeal reflux. **Final Conclusion:** Surgical treatment of granulomas should be associated with the treatment of predisposing factors for success in cases with large lesions. Additionally, long-term follow-up is recommended, and constant monitoring of etiopathogenic factors.

Surgical lesions of the salivary glands - a retrospective study

Author(s): Nathália Fiori Devito, Rosilene De Melo Menezes, Claudio Trevisan Junior, Vivian Angerami Gonzalez, Fernanda B. Serra, Mariana Rufino de Sousa Barbosa

Keywords: adenoma, parotid gland, parotid neoplasms, pleomorphic, salivary gland neoplasms.

Introduction: Salivary glands are exocrine organs that produce secretions which have protective functions and are digestive lubricants. Salivary gland neoplasms account for about 2% to 6.5% of head and neck tumors.^{2,3} The low incidence of salivary gland tumors is a primary factor in determining a retrospective analysis - considering site of incidence, histology and treatment. **Objective:** To analyze a sample of salivary glands tumors at our unit. **Methods:** A retrospective analysis of registries of 99 patients (from 1996 to 2011) to investigate the histological type, most affected age group, gender, type of surgery, surgical complications, and follow-up. **Discussion:** The pleomorphic adenoma of the parotid gland was the most common benign tumor in salivary glands. The mucoepidermoid carcinoma was the most prevalent malignant tumor. The incidence was similar in both sexes, with a slight female predominance. The average age was 36.36 years among in all diseases. All patients underwent surgery; complications were as follows: paresis of the mandibular branch of the facial nerve, salivary fistula (in patients with parotids), and a case of total paralysis of the facial nerve (pre-existing). **Conclusion:** In our series, the surgical salivary gland diseases according to age, gender and histology are in agreement with the literature.

Plaut-Vincent's Angina: a case report

Author(s): Ralph Silveira Dibbern, Mirella Tabachi Vallorini, Paola Scotoni Levy, Raíssa Vargas Felici, Anna Milena Barreto Ferreira Fraga, Jane Maria Paulino, Marcela Estrela Tavares

Keywords: abortion, diagnosis, diagnosis, differential, therapeutic, tonsillitis.

The Plaut-Vincent angina is a deep, ulcerated sore characterized by unilateral painful dysphagia. It is associated with poor dental hygiene and care, and usually presents without fever; patients present malaise and extremely fetid halitosis. It is caused by a symbiosis between the fusiform *Fusobacterium plautvincenti* bacillus and the *Spirochaeta dentium spirillum*. Clinical findings are typical, and diagnosis may be confirmed by bacteriology, which shows the fuso-spirillar nature of the causal agent. Treatment consists of antibiotics, antiseptic mouth wash and dental care, and symptomatic medication. We report a case of a patient aged 28 years with a sore throat and an ulcerative-necrotic lesion to the right, ipsilateral to the symptoms, and rapid progression to dysphagia and severe prostration, but without fever. The diagnosis was confirmed by bacteriology and antibiotic treatment was effective; the lesions healed completely.

Immediate reconstruction after maxillectomy

Author(s): Frederico Santos Keim, Jose Carlos Martins Junior, Guilherme Henrique Wawginiak

Keywords: embolization, maxillofacial prosthesis implantation, reconstruction, therapeutic.

Introduction: Giant cell reparative granuloma is a rare benign bone lesion; it is currently considered a response to trauma and hemorrhage, and is not a true neoplasm.⁽¹⁾ It is more frequent in the mandible, but may also involve other facial bones such as the jaw, the orbit, and the skull base. Symptoms vary according to the site and aggressiveness of the lesion. The radiological differential diagnosis is made with fibro-osseous lesions of the face, which may or may not contain giant cells.⁽²⁾ **Case Report:** LCS, a patient aged 23 years, presented to the Maxillofacial Surgery Clinic of the Policlínico Blumenau-SC complaining of a tumor in the right maxilla, of slow growth, painless, and that bled spontaneously. A CT scan showed a large osteolytic lesion in the right maxilla near the floor of the orbit, which invaded the ipsilateral nasal cavity and spread posteriorly, and which had an abundant blood supply. Selective angiography was done followed by 02 sessions of embolization; material was sent to histopathology, which diagnosed a giant cell tumor. Surgery consisted of hemi-maxillectomy, placement of a previously constructed acrylic prosthesis, and reconstruction of the floor of the orbit using a titanium mesh. **Conclusion:** Arterial embolization prior to surgical resection of hypervascular lesions of the face proves to be advantageous by providing more safety, a lower risk of bleeding, and a shorter surgical time.

Sentinel Lymph Node biopsy in squamous cell carcinoma skin as a selective surgical treatment of a clinically negative neck (cN0) without elective neck dissection

Author(s): Priscila Leite da Silveira, Carlos Takahiro Chone, Agrício Nubiato Crespo, Elba Cristina Sá de Camargo Etchebehere, Aparecida Machado de Moraes, Albina Messias de Almeida Milani Altemani, Celso Darío Ramos, Renata Ferreira Magalhães

Keywords: carcinoma, head and neck neoplasms, neck dissection, sentinel lymph node biopsy, skin neoplasms, squamous cell.

Squamous cell carcinoma (SCC) of the skin disseminates mainly by the lymphatic system to neck lymph nodes; there is a controversy about how to best establish which patients have cervical lymph node metastases and which lymph nodes are affected. Elective neck dissection (ELEC) is indicated for these patients when the probability of metastases is high. Lack of a method to determine which patients have metastases makes it difficult not to undertake ELET in some cases if there is a risk that metastases may be present. Up to 80% of surgical specimens may be histopathologically negative. Moreover, surgery extending beyond the cervical primary tumor carries a higher morbidity. This study intended to use a detection and biopsy technique of sentinel lymph nodes (SLN) by lymphoscintigraphy and gamma probe in patients with SCC of the skin, and to prospectively and clinically evaluate the false negative rate, the accuracy of the method, and which patients need or not ELEC. A prospective clinical study was made of patients with SCC of the skin; all patients had necks that were clinically without enlarged lymph nodes (cN0). Patients had not been treated previously for SCC skin tumors, and there was a high risk of lymph node metastases. The investigation and sentinel node biopsy method has been investigated at other centers and appears promising in the treatment of the neck of patients with malignant melanoma, breast cancer, and oral and oropharyngeal SCC.

Adenoid Cystic Carcinoma: diagnosis and evolution

Author(s): Renata Prado Lemos, Alexandre Jorge Barros De Moraes, Aroldo Figueiredo De Souza Jr, Alessandro Tunes Barros, Davi Sandes Sobral, Milena De Moura Wanderley

Keywords: ethmoid sinus, maxillary sinus, paranasal sinuses.

The adenoid cystic carcinoma (ACC) was first described by Billroth in 1856. It is a malignant tumor that affects mostly the salivary glands, accounting for 10% of these and 1-4% of head and neck malignancies. This tumor grows slowly, but commonly invades neural structures, yields distant metastases, and has multiple recurrences. Females are more affected; the peak incidence is in the fifth decade. The most common symptoms are epistaxis, progressive nasal block, and facial pain, diplopia, abnormalities in cranial nerves and more rarely Horner's syndrome if invasion of the skull base is present. The standard treatment consists of radical surgery followed by radiotherapy. The aim of this study was to report a case of adenoid cystic carcinoma of the left maxillary sinus, ethmoid and sphenoid, also involving the ipsilateral orbital floor in a black woman aged 40 years.

PS-085

SGP: 8433

Papillomatosis and its extension: Case report

Author(s): Fernanda Madeiro Leite Viana, Rita de Cássia Soler, Viviane Nunes da Costa, Thais Dória Barbosa, Caroline Dib

Keywords: DNA probes, HPV, laryngeal neoplasms, larynx.

Introduction: The laryngeal papilloma is considered the most common benign tumor of the larynx, its etiology is correlated with human papillomavirus infections. It is divided into juvenile and adult forms. The adult form starts after the age of 20 years and is usually restricted to the larynx; its recurrence rate is low. The juvenile form disseminates throughout the upper respiratory tract; it is classified as papillomatosis with recurrences. Both have a tendency to progress regardless of the treatment, and may behave as pre-malignant disease. **Objective:** To describe a case of laryngeal papillomatosis extending to the adenoid, tonsils and nasal cavity in a child aged 6 years. **Case:** A male patient aged 6 years was brought to the Otorhinolaryngology Department of the Hospital Nossa Senhora de Lourdes, São Paulo, and complained of rhinorrhea, sneezing, nasal itching and progressive dysphonia starting 5 months ago. Treatment for rhinitis had been prescribed at another hospital, but the child did not improve. Nasofibrolaryngoscopy revealed a papillary lesion extending to the glottis and involving the adenoid and nasal cavity. Combined surgery was carried out: laryngeal microsurgery and endoscopic surgery with endonasal visualization of lesions in the right nasal cavity, adenoid and hypopharynx. The lesions were resected and the patient was followed-up postoperatively. **Conclusion:** Juvenile laryngeal papillomatosis may progress rapidly and disseminate aggressively. Several treatments have been proposed in addition to surgical resection. Intranasal injection of cidofovir has been studied, but its dose in children is still controversial. The goal of treatment is to increase the time between relapses, regardless of the form.

PS-086

SGP: 8455

IgG4-related sclerosing disease (IgG4RSD) and rare manifestations in the head and neck

Author(s): Renata Mizusaki Iyomasa, Thalita Azevedo Fracalossi, Maria Aparecida Custódio Domingues, Melissa Lissae Fugimori, José Vicente Tagliarini, Thais Santos de Oliveira, Emanuel Celice Castilho, Juliana Carneiro Mello, Graziela Semenzatti

Keywords: immunoglobulin g, parotid gland, submandibular gland, submandibular gland diseases.

Introduction: IgG4RSD is a systemic disease characterized by numerous IgG4 positive plasma cells and infiltration of T lymphocytes in various organs. It rarely affects salivary glands, and may present as two distinct morphological versions: Chronic Sclerosing Sialoadenitis (CSS) and Rosai-Dorfman disease (RDD). Lymph node involvement is often present. Clinical findings may resemble those of a carcinoma; it is thus important to differentiate and be aware of this disease. **Objective:** To report the clinical and morphological findings of IgG4RSD in head and neck lymph nodes and salivary glands. **Methods:** Two female patients in their seventh decades of life manifested an insidious growth of salivary glands (left sub-mandibular and right parotid). The nodes were hard, fixed to deeper plane, and painless; ipsilateral cervical lymph nodes were palpable. The morphological features, however, were different: involvement of the parotid and lymph nodes was RDD, in which parenchyma was replaced by proliferation of histiocytes, a mixed lymphoplasmacytic inflammatory infiltrate, and emperipolesis; CSS was in the sub-

mandibular gland (Kuttner Tumor) with lymphoplasmacytic inflammation within lobes, formation of lymphoid follicles, germ centers, and expanded lobes separated by fibrosis with marked cell proliferation. Discussion and **Conclusion:** The differential diagnosis of salivary gland neoplasms makes it important to be aware of the manifestations of salivary IgG4RSD, because the prognoses for both are rather different. The IgG4RSD respond well to therapy with corticosteroids and should be approached in its own context.

PS-087

SGP: 8460

Total maxillectomy and orbital exenteration in a patient with squamous cell carcinoma of the maxillary sinus - Case Report

Author(s): Noelle Kistemarcker do Nascimento Bueno, Marcos Ribeiro Magalhães, Henrique Pedro Magoga Filho, Aden Luigi Castro Testi, Renato Cardoso Guimarães, Priscila Yukie Aquinaga, Amanda Feliciano da Silva

Keywords: carcinoma, maxilla, maxillary sinus neoplasms, squamous cell.

Introduction: Head and neck malignant tumors are rare, comprising about 3% of cancers in general; squamous cell carcinoma is the most common histologic type. **Objective:** To report the case of a patient who underwent radical maxillectomy with orbital exenteration for squamous cell carcinoma of the left maxillary sinus, and who was refractory to radiotherapy and chemotherapy. **Discussion:** Malignant tumors of the paranasal cavities are uncommon, and most otolaryngologists diagnose few cases in their careers. There is facial asymmetry in 40% to 60% of cases, bulging of the oral cavity, and tumor extension into the nasal cavity. The treatment of choice is surgical resection and pre- or postoperative radiotherapy. The difficulties in proposing adequate surgical treatment are due to the complexity of the anatomy, where lesion may be close to important structures, which may limit the surgical approach. Radiotherapy and chemotherapy are used as palliative options for inoperable lesions. In our case, after failure of chemotherapy and radiotherapy, maxillectomy with orbital exenteration (in which the floor was compromised) was carried out. **Conclusion:** Because of nonspecific symptoms - presenting as untreatable chronic sinusitis - paranasal sinus tumors should be suspected. A better multidisciplinary understanding involving several specialties has made complex procedures feasible, with lower mortality and morbidity, improved survival, and better quality of life.

PS-088

SGP: 8465

Foreign body of the nasopharynx - ballpoint tip after soft palate trauma

Author(s): Ludmila Morgado Santos, Danielle Candia Barra, Flávia Molina Ferreira, David Augusto Roderio, José Carlos Nardi

Keywords: nasopharynx, palate, radiography, soft.

Foreign bodies in the aerodigestive tract are a common problem in emergency rooms, especially in pediatric patients. Foreign bodies are rarely found in the nasopharynx. We report a patient who had a pen tip impacted in the nasopharynx after soft palate trauma. If this condition is suspected, imaging methods and prompt removal of the foreign body are mandatory to avoid potentially serious complications.

PS-089

SGP: 8476

Mediastinal Sarcoma

Author(s): Cristiano Roberto Nakagawa, Hugo Vinicius Vasselai, Sylvia de Figueiredo Jacomassi, Carlos Henrique Ballin, Guilherme Da Cunha Galvani

Keywords: mediastinal neoplasms, sarcoma, thyroiditis.

Sarcoma is a common malignancy in adults, but its presentation in the mediastinum is rare. It affects both sexes after the fourth decade of life. The clinical picture is evident due to compression of neighboring structures; the diagnosis should be made by CT scan and biopsy. MG, a female patient aged 53 years presented with complaints of dysphonia, dyspnea and sudden increase in neck volume within the past 10 days, and no history of co-morbidities. She had a fixed neck tumor of fibroelastic consistency in the thyroid area, right clavicular bulging, and no enlarged lymph nodes in the neck. The otolaryngology team was asked to intervene, as the site was

non-specific - thyroid topography, sudden onset, and rapid growth - which raised the possibility of anaplastic thyroid carcinoma or a thyroiditis with abscess. A CT scan showed an expanding heterogeneous tumor with calcifications, extending from the thyroid area to the anterior segment of the mediastinum, measuring 9x7 cm craniocaudally and laterally. TSH function was mildly suppressed. The free T4 was 2.31, the total T3 was 0.8. An X-ray revealed tracheal deviation to the left and pneumomediastinum. To rule out a neck abscess as urgently as possible, an ultrasound-guided puncture and blood culture were carried out; the puncture did not yield any secretions. A mediastinal biopsy confirmed a diagnosis of sarcoma of the mediastinum. As in the reported case, mediastinal sarcoma may compress anatomical structures (trachea, recurrent laryngeal nerve), thereby causing dyspnea, dysphonia, and cervical swelling. The diagnosis is made by CT scan and biopsy to establish the treatment.

PS-091

SGP: 8493

Tonsillar non-Hodgkin's lymphoma in a positive HIV patient: case report and review of the literature

Author(s): Vinicius Ribas Carvalho Duarte Fonseca, Diego Augusto Malucelli, Antônio Celso Nassif Filho, Yara Alves de Moraes do Amaral, Gisele Meire de Carvalho Oliveira, Sheila Lieb

Keywords: lymphoma, HIV, hyperplasia, non-hodgkin, palatine tonsil.

Introduction: Upper airway obstruction causes many symptoms, especially when the onset is sudden and the cause is tonsillar lymphoid tissue hyperplasia. Growth of this tissue requires investigating diseases such as Hodgkin's lymphoma, non-Hodgkin's lymphoma, NK cell lymphoma, and others. The association of HIV infection with tonsillar lymphoma has rarely been described in the literature; it also has no reliable triggering factor. We present a case of non-Hodgkin's tonsillar lymphoma associated with a positive serology for HIV 1 and 2. **Case report:** J.R. a female patient aged 30 years, a smoker, presenting odynophagia, dysphagia and dyspnea. The patient had fever, a 4 kg weight loss, enlarged tonsils bilaterally (grade IV), and enlarged lymph nodes to the right. The patient was anemic and anti-HIV 1 and 2 positive. She was hospitalized due to respiratory issues. A biopsy revealed low grade non-Hodgkin's lymphoma and the CT scan showed bilateral tonsillar hyperplasia with lymphoid features (90% obstruction), a 4 cm enlarged jugular-carotid group of lymph nodes, with increased contrast uptake. The patient is undergoing specific chemotherapy and the lymph nodes and tonsils have decreased in size. **Discussion:** The second most common malignancy in HIV/AIDS patients is non-Hodgkin's lymphoma, which can affect the tonsils. In suspected cases of tonsillar non-Hodgkin's lymphoma in HIV-positive patients, serological and biopsy are mandatory. Treatment consists of radiotherapy or chemotherapy. **Conclusion:** Considering the current high prevalence of HIV seropositivity, this disease should be taken into account in cases of acute or subacute tonsillar hyperplasia.

PS-092

SGP: 8496

Angiofibroma of the larynx

Author(s): Renata Farias de Santana, Renato Telles de Souza, Luiz Carlos Nadaf de Lima, Alexandre Herculano Ribera Marcião, Marcos Antônio Fernandes, Márcia dos Santos da Silva, Rafael Siqueira de Carvalho

Keywords: angiofibroma, deglutition disorders, larynx.

PS-093

SGP: 8498

Sudden dysphagia

Author(s): Gisela Andrea Yamashita, Marcelo Scapuccin, Gustavo Leão Castilho, Rodolfo Alexander Scalia

Keywords: Idegutition disorders, retropharyngeal abscess, weight loss.

The incidence of deep neck infections has decreased considerably since the advent of sophisticated diagnostic tools and antibiotics; nevertheless, these cases still occur and are a therapeutic dilemma for otolaryngologists. The treatment consists of antibiotics administered promptly; surgery is often necessary. The aim of this study was to report two cases of retropharyngeal abscess, and to present a brief review of the literature on the topic.

PS-094

SGP: 8505

World Voice Day: description of the results of videoendoscopy, auditory-acoustic assessments, and quality of life

Author(s): Sandra Maria Pela, Denilson Storck Fomin, Alessandra Cristina dos Santos Fornari, César Augusto Simões, Thais Maria Pastorelli Rodrigues, Leylaine Fernanda Carneiro De Robertis, Marco Antônio Thomas Caliman

Keywords: dysphonia, voice, voice disorders.

Introduction: Public campaigns have helped provide orientation for the care and prevention of voice disorders. **Objective:** The aim of this study was to report the results of laryngological exams, auditory-perceptual tests, and quality of life and voice evaluations. **Methods:** Screening protocols were applied for videoendoscopy, acoustic-perceptual tests, and quality of life assessments. The study included 16 individuals who sought treatment during the World Voice Day in a municipal hospital partnering with a private university. **Results:** There were 69% female subjects and 31% male subjects, aged between 21 and 81 years (mean 39 years). Of these, 75% had voice complaints and 24% had other types of complaints. 62.5% subjects complained auditory symptoms, and 50% had complaints related to proprioceptive issues. The main laryngeal findings (31%) were cysts, vocal fold paralysis and paresis, and interarytenoid edema. 44% of subjects had no lesions, and 25% were referred for further evaluation. In the acoustic-perceptual evaluation, 69% reported abnormalities. The scores on perception of quality of life related to voice were close to dysphonia reference values - 54% in the physical score, 18% in the social-emotional score, and 27% as the total score. **Conclusion:** Associating three types of evaluations proved to be practical in voice screening campaigns, possibly providing better orientation and improved referral for treatment.

PS-095

SGP: 8511

Is it reasonable to measure serum parathyroid hormone (PTH) preoperatively and immediately postoperatively to predict hypocalcemia in thyroidectomy patients?

Author(s): Juliana Rocha Veloso, Adriano Santana Fonseca, Augusto Fernandes Mendes, Nilvano Alves De Andrade

Keywords: hypocalcemia, parathyroid hormone, thyroidectomy.

Hypocalcemia secondary to hypoparathyroidism is a frequent complication following thyroidectomy; the estimated incidence ranges from 3 to 30%; current series have reported rates between 1-5%. Although usually transient, hypocalcemia remains the most common complication after this procedure. The half life of PTH is 2-5 minutes; gland injury results in a rapid decrease of serum PTH. This has led some authors to investigate the value of measuring PTH perioperatively in predicting hypocalcemia. Perioperative factors that precisely identify patients at risk of hypocalcemia are of great interest; patients may be discharged earlier, and calcium and vitamin D3 doses may be individualized. The aim of this study was to analyze serum PTH levels as a predictor of symptomatic hypocalcemia in patients after total thyroidectomy

PS-096

SGP: 8515

Laryngeal tuberculosis: a case report

Author(s): Francisco José Motta Barros de Oliveira Filho, Paulo Sérgio Lins Perazzo, Mirella Melo Metidieri, Tatiana Carneiro Cunha Almeida, Larissa Roberta Campos de Sousa, Daniela Pereira Ferraz, Hugo Fernandes Santos Rodrigues

Keywords: laryngeal, mycobacterium tuberculosis, tuberculosis, tuberculosis.

Tuberculosis is a chronic disease transmitted through the airways. In 1820, Bayle and Broussais reported the typical presentation of laryngeal mucosal tuberculosis. We stress the importance of making the differential diagnosis between laryngeal tuberculosis and laryngeal carcinoma; in both situations, the symptoms, site, risk factors such as smoking and alcoholism, and age of onset (between 40 and 60 years) are similar. We report a case of laryngeal tuberculosis in a postoperative period, which had a favorable outcome after the treatment recommended by the Ministry of Health.

PS-097

SGP: 8522

The thoracic region as an originating site of unilateral vocal fold paralysis

Author(s): Gabriel Antônio Oliveira Dias, Sandra Mara Andrade Guerra, Diogo Vasconcelos Silva, Sílvia Mara Tasso, Salete Maurícia Maríosa Rodrigues

Keywords: laryngeal diseases, vagus nerve, vocal cord paralysis.

Vocal fold paralysis may be classified as unilateral, bilateral, in abduction or adduction. The laryngeal innervation starts from the vagus nerve, and may be compromised by lung, esophageal, tracheal, and upper mediastinal malignancies. There may also be secondary involvement due to mediastinal metastases of breast or lung carcinomas, among others. We report a case of a male patient aged 58 years, born and raised in Pouso Alegre (MG), who was referred to us by an endocrinologist, and who complained of pain in the anterior portion of the neck; these symptoms had started 6 months ago, extended to the anterior thorax, and were associated with dysphonia, weight loss, and pain in the lumbar region and close to the right scapular area. The workup demonstrated unilateral right vocal cord paralysis because of metastasis in the mediastinum with no primary focus.

PS-098

SGP: 8526

Laryngeal involvement in rheumatic diseases

Author(s): Mariana Rocha Tetilla, Rafael Burihan Cahali, Bruno Oliveira Mendes

Keywords: autoimmune diseases, dysphonia, laryngeal diseases.

Rheumatic disease may cause systemic effects including abnormalities in aerodigestive blood vessels, serous and mucous membranes, and joints. It is therefore a diagnostic challenge for rheumatologists, otolaryngologists and general practitioners. Otorhinolaryngological symptoms are common early signs of undiagnosed poorly symptomatic or autoimmune disorders, which may require prompt and aggressive immunosuppressive treatment. We here describe one of these relations which are not always easily diagnosed by these specialists. The case is a female patient aged 38 years that manifested dysphonia, and that was associated with arthralgia. We also discuss the relationship between rheumatoid arthritis and laryngeal involvement.

PS-099

SGP: 8531

Laryngeal Paracoccidioidomycosis - South American Blastomycosis: Difficult to diagnose

Author(s): Daniela Taciro, Cristiane Sayuri Koza de Jesus, Edson Kioshi Taciro, Taciane Brinca Soares Saliture

Keywords: ablastomycosis, laryngeal diseases, paracoccidioidomycosis.

Granulomatous diseases that affect the larynx present complex symptoms and may be difficult to diagnose clinically. When diagnosed and treated early, the outcome is favorable and potential complications may be avoided. Often the first manifestation of these disorders is laryngeal; these findings must therefore be taken into account in the differential diagnosis inflammatory diseases and cancer. We report a patient who visited our unit with suspected malignancy; the patient had significant weight loss, odynophagia, dysphagia, and no other findings on the physical examination. The diagnosis was laryngeal blastomycosis, which was made by microscopic examination of fragments sent to pathology.

PS-100

SGP: 8533

Surgical approach of nasopharyngeal osteosarcoma in a pediatric patient

Author(s): Ana Amelia Soares Torres, Gilvani Azor De Oliveira E Cruz, Elise Zimmerman, Fabiano Bleggi Gavazzoni, Cristiane Schwarz Gelain, Ian Selonke

Keywords: le fort, operative, osteosarcoma, osteotomy, surgical procedures..

Removing nasal and skull base tumors is often challenging because of difficulties in creating adequate access to the operative site. Radical surgery of the head and neck is not always a first choice because of the central location

of lesions, the anatomic complexity, and proximity to vital structures. Several techniques have been described for removing head and neck tumors: the transoral approach, transpalatal approach, infratemporal lateral rhinotomy, degloving, and a transcochlear approach. Few studies have described an ideal surgical technique for resection of sinus osteosarcomas. We describe two techniques to treat a patient with a large chondroblastic osteosarcoma. The aim of this paper was to describe the two possible surgical approaches to treat an aggressive sinonasal tumor: the transpalatine technique and the Le Fort I osteotomy

PS-101

SGP: 8534

Glottal disorders in patients with voice complaints

Author(s): Fernanda Cristina Rodrigues Machado, Paulo Antônio Monteiro Camargo, Thais Helena Gonçalves, Mariele Bolzan Lovato, Gilson Rodrigues Valle, Bruno Di Marco Freitas Jorge Vieira, Larissa Guedes Pereira Rispoli, Neilor F. Bueno Mendes

Keywords: dysphonia, laryngoscopy, stroboscopy, vocal cords, voice.

Introduction: dysphonia occurs concomitantly with speech disorders and may compromise one's socialization skills. Most of the studies on the prevalence of laryngeal injuries have looked into specific groups of individuals, such as endolaryngeal surgery patients and professional voice users. Often times, patients not belonging to those groups report voice complaints as they are seen by their ENT physicians. **Objective:** To assess the prevalence of glottal alterations in patients with voice complaints from a heterogeneous group of individuals submitted to videostroboscopy and compare them in terms of gender and smoking. **Method and materials:** this is a retrospective clinical trial done through a review on videostroboscopy tests done between June 2010 and May 2011 on patients reporting voice complaints. **Results:** eighty-eight patients were included (56 females and 32 males); 26.79% of females and 65.62% of males had a history of smoking. Injuries were found on the vocal fold cover of 63.63% of the sampled patients, other glottal alterations associated with voice disorders in 34.09%, and only one patient had a normal test result. **Conclusion:** vocal fold nodes were the most prevalent lesion (13.64%), followed by Reinke's edema (11.36%), leukoplakia (11.36%), polyps (10.23%), and parallel glottal gap (9.09%). Nodes were also the most frequent lesion in female non-smokers, whereas Reinke's edema was the most prevalent among smokers. Polyps were the most frequently found lesions in male non-smokers, while leukoplakia and tumors were among the top findings in male smokers.

PS-102

SGP: 8555

Thyroid papillary carcinoma in branchial arch cyst - case report

Author(s): Pedro Ivo Machado Pires de Araújo, Luiz Augusto do Nascimento, André Luiz Queiroz, Vítor Yamashiro Rocha Soares, Rafaela Aquino Lopes, Gustavo Subtil Magalhães Freire

Keywords: branchial region, papillary carcinoma, thyroid neoplasms.

Malignant thyroid neoplasms may present themselves in the form of nodes in the neck. This paper discusses the case of a 37-year-old female patient diagnosed with branchial arch cyst through clinical examination and ultrasound imaging. The patient had the lesion surgically removed, and pathology tests pointed to a classical case of papillary carcinoma on the cyst wall. Neck Doppler and scintigraphy did not show signs of primary lesion on the thyroid. She is being followed up by the Head and Neck Surgery group at HUB - UnB.

PS-103

SGP: 8565

Laryngeal plasmacytoma

Author(s): Ana Amelia Soares Torres, Fabiano Bleggi Gavazzoni, Cristiane Schwarz Gelain, Rodrigo Guimaraes Pereira, Lauro Joao Lobo Alcantara

Keywords: laryngeal diseases, plasmacytoma, voice.

Plasmacytomas are plasma cell tumors that occur preferentially in the bone marrow. In four percent of the cases, however, soft tissue is involved in

what is called extramedullary plasmacytoma. Although rare, the majority of extramedullary plasmacytomas occur in the head and neck. The most frequently affected sites are paranasal sinuses, nasal cavity, pharynx, larynx and oral cavity. The disease manifests itself in the form of one or multiple smooth rosy tumors, at times of the polypoid, diffuse or ulcerated type. Symptoms caused by local growth are dysphonia, dysphagia and dyspnea. Distant metastases are an unusual finding. Diagnosis is done mainly through pathology tests. Patients require deep biopsy and lesion excision when possible, as these are submucosal tumors. Radiotherapy is the best treatment option. This paper aims to present a case of laryngeal extramedullary plasmacytoma and discuss the diagnostic and therapeutic approaches

PS-104

SGP: 8566

Laryngeal presentation of dermatomyositis

Author(s): Priscila Carvalho Miranda, Vitor Yamashiro Rocha Soares, Pedro Ivo Machado, Gustavo Subtil Magalhães Freire, Rafaela Aquino Fernandes Lopes, Daniel de Sousa Michels, Luciana Miwa Nita Watanabe

Keywords: autoimmune diseases, dermatomyositis, laryngeal diseases.

Introduction: The larynx can be affected in dermatomyositis (DM) and in that case patients usually report dysphagia, dysarthria and dysphonia. **Case report:** A 49-year-old male patient clinically diagnosed with dermatomyositis, presented aphonia, dysphagia and odynophagia while using steroids. He was admitted for pulse therapy with methylprednisolone. He went through a videolaryngoscopy on the 16th day of hospitalization, which showed a whitish area in the middle third and anterior portion of both vocal folds, resembling granuloma on the right, good glottal gap, and preserved intrinsic laryngeal muscles. He went through a fiberoptic swallowing endoscopy in 24th day of hospitalization: vocal folds were mobile, symmetrical, covered by fibrin; there was no evidence of granuloma as seen in the preliminary examination, complete glottic closure during phonation, numbness in arytenoids and aryepiglottic folds, moderate dysphagia for solids and severe for liquids. The patient showed improvement of dysphagia and odynophagia, but was still dysphonic. He was discharged on the 45th day of hospitalization, taking prednisone 120 mg / d and azathioprine 150 mg / d. **Discussion:** this paper looks into some important points concerning dermatomyositis and its laryngeal features. If there is injury of the cricopharyngeal muscle, patients can report oropharyngeal dysphagia. If the posterior cricoarytenoid muscle is affected, there may be adduction of the vocal folds with respiratory failure. **Closing Remarks:** In spite of laboratory tests and imaging, clinical examination reigns supreme in the diagnosis of this disease. There are no descriptions in the literature of laryngeal granulomatous lesions related to DM.

PS-105

SGP: 8588

Adenoid cystic carcinoma

Author(s): Samara Noronha Cunha, Gisele Vieira Hennemann Koury, Joyce Oliveira de Lima, Larissa Magalhães Navarro, Lorena Gonçalves Rodrigues

Keywords: adenoid cystic, carcinoma, neoplasm metastasis, salivary glands.

Introduction: Adenoid cystic carcinoma is the most common glandular carcinoma, although it is a rare, slow growing locally aggressive tumor prone to expanding perineurally and hematogenously. **Case report:** a female 52-year-old patient came to our service complaining of headache and diplopia. The patient evolved to facial palsy, strabismus, tinnitus, otalgia and progressive hearing loss. Head MRI revealed a mass in the nasopharynx with invasion of the infratemporal fossa, intracranial extension, involvement of the pontine cistern to the right cerebellopontine angle, compressing the brain stem, the facial and vestibulocochlear nerve. She underwent radical surgery, radiotherapy and chemotherapy. The patient is now 2 years into follow-up; she is asymptomatic and without signs of tumor recurrence. **Discussion:** aside from the potential to invade adjacent tissues, adenoid cystic carcinomas are highly prone to recurrences and metastases. They commonly spread through perineural intracranial invasion. The symptoms depend on the location of the lesion and the patient usually has vague complaints. The initial symptoms in this case were diplopia and headache, with suspicion of CAC occurring after facial palsy. **Conclusion:** adenoid cystic carcinomas are highly invasive and, when diagnosed early in evolution, offer a better prognosis. In this case, the tumor was diagnosed at an advanced stage, partly because of the initial atypical symptoms.

PS-106

SGP: 8596

Nasopharynx plasmacytoma - a case report

Author(s): Shiro Tomita, Marise da Penha Costa Marques, Jaqueline Quintanilha de Moura, Fabiana Chagas da Cruz, Maria Helena de Magalhães Barbosa

Keywords: multiple myeloma, nasopharyngeal neoplasms, plasmacytoma.

Introduction: extramedullary plasmacytomas are rare tumors that most often present themselves in the head and neck, thus making it an important disease in the ENT practice. Hence, it's important to know the features and manifestations of this tumor. **Objective:** this paper reports on a case of nasopharynx plasmacytoma seen at our service. **Materials and method:** this paper describes the follow-up of a 62-year-old patient seen at the Hematology ward of Hospital Clementino Fraga Filho, diagnosed with multiple myeloma and with a history of neck plasmacytoma removed 12 years prior at another hospital. The patient presented a lobulated mass of great volume in the nasopharynx, predominantly in the left side extending into the medium fossae and compressing the brain stem, with total palsy of the 3rd left cranial nerve; oopsy revealed plasmacytoma. **Conclusion:** given their usual site of occurrence, extramedullary plasmacytomas are a relevant subject in ENT practice. Thus, it is important to know the manifestations of the disease and how to properly approach such cases.

PS-107

SGP: 8597

Oncocytic Papilloma: Case Report

Author(s): Tarcisio Aguiar Linhares Filho, Renato Tadao Ishie, Rachel Catão de Lucena, Flavia Goncalves de Oliveira Maestrali, Elder Yoshimitsu Goto

Keywords: inverted, maxillary sinus, papilloma, papilloma, papillomavirus infection, sinusitis.

Oncocytic Schneiderian papilloma is one of the three morphologically separate tumors that arise from the Schneiderian membrane (the others are fungi form papilloma and inverted papilloma). It is quite rare in our environment. This paper reports a case of Oncocytic Schneiderian papilloma arising from the left maxillary sinus and extending to the ipsilateral nasal region in an 85-year-old female patient.

PS-108

SGP: 8598

Anaplastic large cell non-hodgkin lymphoma of oral cavity: Case Report

Author(s): Otávio Pereira Lima Zanini, Gyl Henrique Albrecht Ramos, Luiz Henrique Schuch, Priscilla Miotto, Luiza Rodrigues Caffarate, Luiz Guilherme Patrial

Keywords: anaplastic, antigens, cd30, large-cell, lymphoma, oral manifestations.

We report an unusual case of anaplastic large cell lymphoma ALK negative null-type primarily manifested in the oral cavity. A 33 years old female patient presented with gingival hyperplasia initially treated as infectious that quickly evolved into erosive lesion in the left upper hemiarcade and left neck mass secondary to lymphadenopathy. The diagnosis was made by cervical lymph node biopsy, with typical histology, immunohistochemistry and clinical features of the patient. Apparently this is the first reported case of anaplastic large cell lymphoma ALK negative primarily manifested in the mouth that wasn't possible to identify the lineage of the tumor (null-type). The atypical presentation of this rare case encourages the study of this disease in the controversial scientific environment of nowadays.

PS-109

SGP: 8601

Giant Cell Tumor in association with Parathyroid Adenoma: A Case Report

Author(s): Heloisa Nardi Koerner, Rodrigo Miranda, Francisco Grocoske, Maria Theresa Costa Ramos de Oliveira, Carlos Roberto Ballin, Marcos Mocellin

Keywords: adenoma, giant cell tumor, giant cells, parathyroidectomy.

This is a case report of a patient with primary hyperparathyroidism caused by parathyroid adenoma and a giant cell tumor in the maxilla. The patient is being currently followed up at our outpatient ward; the tumor is discretely subsiding.

Lymphoepithelial carcinoma of the nasopharynx

Author(s): Joyce Oliveira de Lima, Raimundo Nonato Ribeiro de Oliveira Junior, Larissa Magalhães Navarro, Lorena Gonçalves Rodrigues, Alayde Vieira Wanderley

Keywords: carcinoma, metástase neoplásica, nasofaringe.

Nasopharyngeal carcinomas account for 2% of head and neck tumors. Clinical manifestations depend on tumor size and location. Distant metastases occur more commonly in bone, lungs, liver, neck ganglia. Diagnosis is based on clinical history, imaging, and pathology tests. Surgery plays a limited role; radiotherapy is the treatment of choice.

Organic intraorbital foreign body - Case report.

Author(s): Carlos Roberto Ballin, Luiz Carlos Sava, Carlos Augusto Seiji Maeda, Rodolfo Cardoso Toledo Filho, Vinicius Tomadon Bortoli

Keywords: eye foreign bodies, maxillofacial trauma, orbit, orbital fractures, wounds and injuries.

A high degree of suspicion in lesions of the eyelids and orbits is needed for the diagnosis of intraorbital foreign bodies. The clinical presentation is varied and diagnosis can be delayed until the time infectious complications and/or changes in vision set in, which can occur weeks or months after the trauma. This is a case of a patient with an initially undetected wooden intraorbital foreign body. A 32-year-old man presented with purulent discharge in the right eye, swelling in the right temporal region and trismus. He had a history of blunt injury (paintbrush with a wooden handle) 8 prior in the right periorbital region. The patient developed limitation in eye motion, diplopia, photophobia, pain and swelling in the right temporal region. CT and MRI of the orbits were nonspecific, showing only soft tissue swelling and edema of the right lateral rectus muscle. As symptoms worsened, he underwent exploratory surgery of the orbit, during which a fragment of wood measuring 32x5x5 mm was removed. The patient evolved well and symptoms subsided. The case indicates that periorbital trauma patients may require special attention as it concerns the existence of intraorbital foreign bodies, as imaging tests may fail to detect such fragments, particularly when they are made of organic materials such as wood.

Diagnosis and treatment of juvenile nasopharyngeal angiofibroma at a university hospital

Author(s): Anelise Abrahão Salge Prata, Viviane Maria Guerreiro da Fonseca, Eduardo Macoto Kosugi, Bruno Borges de Carvalho Barros, Leonardo Higa Nakao, José Arruda Mendes Neto, Luis Carlos Gregório

Keywords: angiofibroma, nasopharyngeal neoplasms, nasopharynx, recurrence, video-assisted surgery.

Introduction: Juvenile nasopharyngeal angiofibroma (JNA) is the most common benign tumor in the nasopharynx. Surgery is the treatment of choice, but high relapse rates are reported. **Objective:** To describe the characteristics of diagnosis and treatment of JNA at a teaching hospital. Type of study: retrospective cross-sectional study. **Method:** Revision of medical records of patients treated for JNA between January/2007 to October/2010. **Results:** the study found 11 patients who underwent surgery for JNA during this period. All males with a mean age of 15.18 years. Nasal obstruction was the initial symptom (54.55%), followed by epistaxis (45.45%). Andrews II was the most common type (54.55%). Preoperative embolization was performed in 45.45% of the patients and the most common approach was endoscopic-assisted mid-facial degloving in 72.73% of the cases. Intraoperative blood transfusion was offered in 72.73% of the cases, due to decreased hemoglobin averaging between 8.54 and 13.18 g/dL. Patients stayed at the ICU for an average of 2.78 days and were discharged from hospital after an average of 8.18 days after surgery. There were two cases of recurrence, or 18.18% of failure. **Conclusion:** according to our experience preoperative embolization and the use of the endoscope reduced the risk of relapse.

Rathke's pouch cyst in the sphenoid sinus - Case Report

Author(s): José Antonio Pinto, Thiago Branco Sonego, Pedro Paulo Vivacqua da Cunha Cintra, Henrique Wambier

Keywords: central nervous system cysts, paranasal sinus disease, paranasal sinuses.

Introduction: Rathke's pouch cysts are benign lesions usually located between the anterior and posterior lobe of the pituitary. They stem from a failure of obliteration of Rathke's pouch in the embryonic period. **Objective:** To present a case of Rathke's pouch cyst with intrauterine sphenoidal growth. **Method:** Case study of a patient with Rathke's pouch cyst in the sphenoid sinus with involvement of the third cranial nerve. **Conclusion:** Although rare, Rathke's pouch cysts should be considered in the differential diagnosis of lesions of the sphenoid sinus.

An emergency problem: battery in the nose

Author(s): Flavia Molina Ferreira, Danielle Candia Barra, David Augusto Rodero, Ludmila Morgado Santos, José Carlos Nardi, Vanessa Ramos Pires Dinarte

Keywords: batteries, foreign bodies, nasal septum, nose.

Introduction: foreign bodies in the nasal cavities are a common occurrence on ER ENT practice. Batteries account for a significant number of such cases, and call for urgent removal. This paper reports two cases of batteries found in the nasal cavities of children; both evolved to nasal septum perforation. **Case report:** 1- LVF, 8, has had a watch battery in his left nasal cavity for an unknown amount of time and has had epistaxis, fever, and local pain for two days. The foreign body was visualized along with dark secretion and a preserved septum. The FB was removed seven days later, but the patient had difficulty breathing, persistent dark crusts and a perforated septum. 2-FCV, 4, has had a toy battery in his left nasal cavity for 60 minutes, with the anode pointing to the septum. The patient evolved to local pain, dark rhinorrhea but had his septum preserved. The FB was removed and seven days later the patient's septum was perforated. **Discussion:** batteries are items commonly found in households and can be easily pushed into orifices such as the nose, ears, and mouth. Various injuries, including nasal septum perforation, may be produced as an outcome. The etiology of such injuries may be threefold: leakage of corrosive contents from the battery leading to direct damage; burns produced from exposure to direct current; necrosis by simple pressure. Some factors may increase severity, such as time between insertion and removal of the battery, use of saline solution, and anode pointing to the septum. **Conclusion:** batteries can be removed with relative ease, but cases like these have to be identified and resolved urgently so as to avoid complications. We hope to build awareness as to the relevance of this emergency issue among members of the medical community.

Bilateral nasolabial cyst: a case report

Author(s): Henrique Pedro Magoga Filho, José Jarjura Jorge Junior, Cassio Cal dini Crespo, Aden Luigi Castro Testi, Noelle Kistemarcker do Nascimento Bueno, Renato Cardoso Guimarães, Amanda Feliciano da Silva, Priscila Yukie Aquinaga

Keywords: maxillomandibular cysts, nasal obstruction, nonodontogenic cysts.

Introduction: nasolabial cysts are rare non-odontogenic cysts that develop in the lower region of the nasal ala; pathogenesis is still unknown. Bilateral cysts are extremely rare. **Objectives:** To describe the case of a male 38-year-old patient complaining of nasal obstruction and presenting a bulging on the floor of both nasal cavities for 10 years with clinical and topographic diagnosis of nasolabial cyst and surgical treatment. **Discussion:** maxillary cysts are divided into inflammatory and embryonic, and the latter is further subdivided into odontogenic and non-odontogenic. Nasolabial cysts are rare non-odontogenic cysts that develop in the upper lip laterally to the midline. Most are unilateral (90%) and a few are bilateral (10%). The female to male ratio for bilateral cysts is 5,5:1 while the ratio for unilateral cysts is 3,5:1. This

injury is more common in Blacks and occurs more frequently between the fourth and fifth decade of life. The diagnosis of nasolabial cyst is basically clinical. The case presented is a rare presentation of the disease, with bilateral involvement in a male. The patient underwent surgical removal of the cysts on January 2011. **Conclusion:** This report shows a case of nasolabial cysts confirmed by pathology tests with an unusual presentation, as it is a case of bilateral cysts in a male patient. The patient has been followed up for four months and is asymptomatic.

PS-120

SGP: 7813

Primary orbital non-Hodgkin's lymphoma

Author(s): Carlos Roberto Ballin, Guilherme Eduardo Wambier, Vinicius Tomadon Bortoli, Jaeder Carlos Pereira Neto, Guilherme Romano Busato Sachet, Cristiano Roberto Nakagawa

Keywords: diffuse, large b-cell, lymphoma, lymphoma, non-hodgkin's, orbit, orbital neoplasms.

Non-Hodgkin's lymphomas (NHL) comprise a group of malignancies originated from lymphoid tissue that rarely affect the adnexa of the eye (orbit, conjunctiva and eyelids). Two forms of orbital NHL can be clinically recognized: primary or secondarily metastatic from systemic disease. Primary orbital NHL is very rare and represents less than 1% of all NHL. This case is about a 70-year-old woman admitted with complaints of a swelling upper left eyelid. Tomography showed an expansive intraconal retrobulbar mass, suggestive of neoplastic process. Biopsy and immunohistochemistry revealed the diagnosis of non-Hodgkin lymphoma (diffuse large B-cell lymphoma). The case draws attention to the low frequency of primary orbital lymphoma, which can be difficult to diagnose particularly at the onset of the condition, with nonspecific manifestations.

PS-122

SGP: 7827

Pansinusal myiasis treated with double doses of Ivermectin

Author(s): Monik Assis Espindula, Rafael Fernandes Goulart dos Santos, Ama-deu Luís Alcântara Ribeiro, Ludimila de Oliveira Cardoso, Luiz Augusto Miranda Sanglard, José Felipe Bigolin Filho, Agenor Alves de Souza Junior, Wellerson Valério Esteves dos Reis, Aparecida Regina Brum, Camila Andrade da Rocha, Andre Dias Moreira e Silva, Miguel Eduardo Guimarães Macedo

Keywords: ivermectin, larvae, myiasis, sinusitis.

Human myiasis is a reality in rural areas of tropical countries. Nasal cavity involvement is rare. This paper presents the case of a patient with pansinusal larvae infestation treated effectively with Ivermectin.

PS-123

SGP: 7828

Brain Abscess due to Chronic Rhinosinusitis

Author(s): Filipe Hailton Alves Aguiar, Paulo Henrique Rodrigues Alves, Lara Mariana França, Bruna Obeica Vasconcellos, Renata Cristina Teixeira Coelho, Felipe Ladeira de Oliveira

Keywords: abscess, brain abscess, craniology, sinusitis.

Objective: this paper aims to elicit the difficulties in performing the clinical diagnosis of chronic rhinosinusitis in patients who may evolve to brain abscess. **Materials and methods:** Patient is DPS, an 18-year-old single black male. According to the patient's mother manifestations began when he was 10, in the form of intense headaches in the frontal area and vomiting. In June 2010 medical examination found mild right-side facial palsy. X-ray and MRI of the sinuses indicated poorly treated chronic rhinosinusitis now evolving to bilateral brain abscess. The abscess was drained on July 9, 2010 at HJF and pathology tests run on collected material showed the patient was bacteria-free. The patient was medicated with antibiotics, namely ceftriaxone 1g combined with metronidazole. Thirteen days later the patient still had hematoma and subcutaneous fluid in the frontal area. He was then referred to the infectology service, where vancomycin was prescribed for 4 to 6 weeks. After one month the patient's secretion and 7th nerve palsy improved and he was discharged. **Results:** the treatment of choice for brain abscess is clinical/surgical. Antibiotics should be used for longer - 4 to 6 weeks in this case - and length of therapy and drug must be picked in accordance with the chosen surgical approach. **Conclusion:** early diagnosis of rhinosinusitis is of paramount importance. When done at later stages after chronic disease

has set in, many are the possibilities of brain involvement. Craniotomy is usually the treatment of choice for brain abscesses, but it is essential that antibiotic therapy is offered to avoid pyogenic progression into the brain territory and further recurrences of the infectious process.

PS-124

SGP: 7830

Adenocarcinoma in the Maxillary Sinus- case report

Author(s): Bruna da Fonseca Tames Zambrana, Jorge Tames Zambrana, Ludimila de Oliveira Cardoso, Luciana de Paula Viana, Fábio da Fonseca Tames Zambrana, Fernanda Tames Zambrana Enomoto, Marli Ferreira da Silva, Ricardo da Fonseca Tames Zambrana

Keywords: adenocarcinoma, head and neck neoplasms, maxillary sinus neoplasms, neoplasms by histology type.

Case Report: the patient is a Caucasian 44-year-old housewife. She claims not to smoke, drink, or have any other comorbidity. The patient complained of facial pain in her right jaw, started six months prior to her first visit. She had received treatment for acute sinusitis, without results. Over the past 30 days, she showed worsening of pain, radiating to her right TMJ. ENT examination showed no significant changes, and nasal endoscopy was normal. She underwent a CT scan, which revealed a mass in her right maxillary sinus, measuring 5 cm in its largest diameter, with bone erosion of the lateral wall, invading adjacent muscle tissue. Incisional biopsy was carried out using the Caldwell-Luc approach. Pathology tests done on surgical specimen revealed a high-grade adenocarcinoma with a non-intestinal pattern. The patient was then referred to a specific center for treatment.

Discussion: nasal sinus malignant tumors are rare and usually diagnosed at later stages (83% in stage III or IV at diagnosis), mainly due to their low incidence and the fact that symptoms are non-specific in the early stages. Early diagnosis is the decisive factor for successful treatment and recovery of function and cosmetics. Maxillary sinus carcinomas account for 2% of all head and neck tumors, and most are squamous cell carcinomas (SCC). Adenocarcinomas are more common in the ethmoid sinuses. CT scan is the examination of choice for staging, therapeutic planning and prognosis, as it identifies signs of local and lymph node invasion. Biopsy is required to identify the tumor type.

PS-126

SGP: 7841

Case report: primitive neuroectodermal tumor

Author(s): Maycon Waihrich Leal Giaretton, Luiz Carlos Alves de Oliveira, Eduardo Campara de Oliveira

Keywords: epistaxis, nasal cavity, nasal obstruction, neuroectodermal tumors, primitive.

The Ewing family of tumors covers a spectrum of neoplasms of primitive neuroectodermal cells -- embryonic cells that migrate from the neural crest. These tumors affect primarily bone and soft tissue. In terms of degree of neural differentiation, Ewing's sarcomas can be undifferentiated or peripheral primitive neuroectodermal tumors (PPNET). PPNETs are common in the first two decades of life and have lower incidence than other tumors of the Ewing family. Due to the high rate of malignancy and metastasis, the prognosis of patients affected by this pathology is poor. This tumor is less common in bone tissue (20%) and unusual in the upper respiratory tract. Possible therapies are chemotherapy, radiotherapy and surgery. There are few reports in the literature on Ewing family tumors in the nasal sinuses. The prognosis and outcome of Ewing family tumors include factors such as stage, size, location and chosen therapy. Finding a primary PPNET in the nasal cavity, given its malignancy, is clinically relevant for the patient. There is no description of primary tumors of this type in such anatomic site. The nose and its surrounding structures are usually affected by metastases. This report describes a primary PPNET in the nasal cavity.

PS-127

SGP: 7845

Eye proptosis as the first manifestation of Wegener's granulomatosis - case report

Author(s): Isamara Simas de Oliveira, Ricardo Teixeira Pimentel de Oliveira, Danilo Santana Rodrigues, Marcela Silva Lima, Ligia Oliveira Gonçalves, Leandro Farias Evangelista, Paulo Fernando Tormin Borges Crosara, Roberto Eustáquio Santos Guimarães

Keywords: exophthalmos, paranasal sinuses, Wegener's granulomatosis.

Objective: this paper aims to report a case of atypical Wegener's granulomatosis (WG). **Case report:** the patient is M.J.D.M, 74, Caucasian, female resident of Para de Minas. She was referred to the ENT ward at HC-UFMG in February of 2011 with a complaint of eye proptosis dating back to six months. Ophthalmic examination showed preserved visual acuity and eyeball motion. The patient did not report pain, weight loss or nasal congestion. Orbit CT scans showed an extraconal lesion pushing the orbit, invading the ethmoid and frontal sinuses and opacification of the ipsilateral maxilla. Flexible nasolaryngoscopy showed normal results with mild bulging of the lateral wall of the right nasal cavity. Chest X-rays showed a node in the right hemithorax. Lymphoma (metastasis?) and WG were considered. A biopsy was done under general anesthesia. During the procedure a hard lesion firmly adhered to the lamina papyracea was observed. The patient evolved well after the procedure and had no bleeding or eye alteration. Pathology tests showed that the respiratory mucosa and the bone wall had active chronic necrotizing inflammation with vasculitis in small to medium gauge vessels. Chest CT scans confirmed the presence of a node in the right lung. C-ANCA and PS-ANCA were negative. The patient was treated for Wegener's granulomatosis and is being followed up by Rheumatology. **Conclusion:** this paper describes an atypical case of WG with eye involvement and negative C-ANCA. This antibody may be negative in a significant percentage of WG patients and is important for clinical diagnosis when combined with pathology tests

PS-128

SGP: 7853

Allergic rhinitis: adapted therapeutic approach for developing countries

Author(s): Carlos Augusto Ferreira de Araújo, Mary Laura Garnica Perez Villar, Fausto Rezende Fernandes, Flávio Ribeiro Lana

Keywords: allergic, allergic, developing countries, perennial, rhinitis, rhinitis, rhinitis, seasonal.

Introduction: Allergic rhinitis is a global public health problem that affects about 10% of Brazilian children. Allergic rhinitis is defined as a symptomatic disorder of the nose induced by an IgE-mediated inflammation after exposure of the nasal membranes to allergens. **Objective:** this paper aims to evaluate the epidemiological profile of infants aged 0 to 12 years in the outpatient ward of the Otolaryngology School and the therapy given to them. **Methods:** 481 charts for patients seen in 2010 were reviewed and screened for allergic rhinitis and age range (0-12 years). One-hundred and thirty four patient records were selected. The treatment options for patients with allergic rhinitis were analyzed. **Results:** 42 patients with allergic rhinitis were found. Chosen therapy: management and environmental education combined with drug treatment (saline, antihistamine, topical steroids) and referral to an allergist for severe cases (on the Clinic). **Discussion:** the incidence of allergic rhinitis seen in the study was higher than the incidence observed in the literature for this age range. Given the low rate of return for reassessment, it is assumed that the therapeutic decision in the Clinic was effective in most cases. **Conclusion:** Although similar to the Brazilian incidence, allergic rhinitis has higher incidence rates in Petrópolis-RJ. The therapeutic approach adopted by the clinic, taking into consideration the effectiveness and cost of drugs, has yielded a satisfactory result.

PS-129

SGP: 7869

Nasal solitary fibrous tumor

Author(s): Lucas Ricci Bento, Mariana Dutra de Cássia Ferreira, Érica Ortiz, Eulália Sakano

Keywords: epistaxis, nasal cavity, solitary fibrous tumors.

This paper reports the case of a female 47-year-old patient, complaining of progressive bilateral nasal obstruction for one year. She had a reddish exophytic lesion with abundant vascularization in the right nasal cavity, and her paranasal sinus CT scan showed a lesion with the same density as muscle tissue occupying the entire right nasal cavity to the region of the choana, where it showed contralateral extension. She underwent en bloc removal of the lesion, and after histopathological analysis was given a diagnosis of intranasal solitary fibrous tumor, with confirmation by immunohistochemistry positive for CD34, negative to IA4 and vimentin was not satisfactory. The patient showed no signs of relapse five months into follow-up. Solitary

fibrous tumors are benign tumors that can occur in multiple organs with a few cases reported in the literature of intranasal occurrence, whose diagnosis is confirmed by immunohistochemistry. The treatment is still controversial because of the rarity of the disease, but surgery has been the initial choice in all cases reported to date.

PS-130

SGP: 7876

Acquired choanal stenosis in a 67-year-old patient - case report

Author(s): Amadeu Luis Alcântara Ribeiro, Ludimila de Oliveira Cardoso, Monik Assis Espindula, Luiz Augusto Miranda Sanglard, José Felipe Bigolin Filho, Rafael Fernandes Goulart dos Santos, Miguel Eduardo Guimarães Macedo, Aparecida Regina Brum

Keywords: choanal atresia, nasal obstruction, nasopharynx.

Acquired choanal stenosis is a rare disease that can occur after trauma of the choanal mucosa caused by events such as burns, radiotherapy, long-time feeding through nasoenteric tube, surgery, infectious and inflammatory diseases. The aim of this paper is to describe the natural history, etiology, diagnosis and surgical approach of choanal stenosis gained from a case report. A 67-year-old diabetic female patient came to our service and reported she had had bilateral nasal obstruction, rhinorrhea, anosmia and dysgeusia for the past 10 years. Nasal fibroscopy and nasal sinus CT showed obstruction of choanae bilaterally by trabecular tissue. The patient then underwent endoscopic removal of the lesion followed by stenting for 8 weeks. She then presented necrosis of the columella and palatal fistula and both were repaired. The patient recovered well and has normal nasal breathing. Pathology tests revealed reactive lymphoid hyperplasia and no malignancy. The transnasal endoscopic approach allowed direct access to the choanal region, with good viewing angle and lighting. Acquired choanal stenosis is a rare disease in adults whose origin must always be investigated.

PS-131

SGP: 7881

Osteoma of the ostiomeatal complex and anterior ethmoid sinus associated with nasal polyposis

Author(s): Juliana Frozoni Lemes, Fernando Veiga Angelico Junior, Priscila Bogar Rapoport, Gustavo Fernando Tognini Rodrigues, Luciano Szortyka Fiorin

Keywords: nasal obstruction, natural orifice endoscopic surgery, osteoma.

Osteomas are the most common benign bone lesions of the paranasal sinuses. Located preferentially in the frontal sinus, they are more prevalent in men in the fourth decade of life. The surgical treatment is controversial regarding indications and techniques to be used. Nasal polyposis is a chronic inflammatory disease that affects the respiratory mucosa and the paranasal sinuses. This paper describes the case of a 55-year-old patient with a 6-year history of bilateral nasal obstruction with polypoid degeneration in the nasal cavity as seen on physical examination. CT scans of the sinuses showed an opaque heterogeneous lesion, with areas of soft tissue inside, well-defined borders, occupying the ostiomeatal complex and the right ethmoid sinus, and opacification of all paranasal sinuses and nasal cavities bilaterally. He underwent a polypectomy combined with a bilateral sinusectomy and ethmoidectomy with endoscopic resection of the tumor. We found an osteoma in the ostiomeatal complex of about 4 cm in diameter. The association between nasal polyps and paranasal sinus osteoma is uncommon, and the pathophysiology of both diseases are different.

PS-132

SGP: 7907

Case report: closure of large oroantral fistula with septal cartilage

Author(s): Amanda Feliciano da Silva, Décio Gomes de Souza, Henrique Pedro Magoga Filho, Aden Luigi Castro Testi, Renato Cardoso Guimarães, Noelle Kistemarcker do Nascimento Bueno, Priscila Yukie Aquinaga

Keywords: maxillary sinus, nasal cartilages, oroantral fistula, tooth extraction.

Introduction: Oroantral fistulas, a.k.a. oral-sinus fistulas, occur when there is communication between the maxillary sinus and the oral cavity. This occurs due to the close relationship between the maxillary sinus floor and the periapical region of the premolars, molars and possibly canines. The etiology can vary, the most common one being after surgery for dental

extraction. **Objective:** To report a case of large oroantral fistula after tooth extraction with closure of septal cartilage. **Discussion:** The extraction of teeth with roots closely related to the maxillary sinus floor is the most common cause of oroantral fistula. CT scans of the paranasal sinuses is essential. There are several ways to close the fistula. The choice of approach must be personalized and based on the surgeon's experience. In our case, we have opted for septum cartilage grafting. This surgical technique has proven effective and can be performed quickly as the otolaryngologist is experienced in collecting this type of graft. **Conclusion:** Tooth extraction is the most common cause of oroantral fistula. CT scans of the paranasal sinuses are essential to diagnose and plan reconstruction. Septum cartilage graft has proven to be an effective alternative among the various forms of treatment.

PS-133

SGP: 7910

Prevalence of chronic rhinosinusitis among textile industry workers exposed exclusively to cotton dust

Author(s): Ivan de Picoli Dantas, Wilma Terezinha Anselmo Lima, Fabiana Cardoso Pereira Valera, Carlos Eduardo Monteiro Zappellini

Keywords: nasal cavity, nose diseases, paranasal sinus diseases, paranasal sinuses.

Introduction: The respiratory tract is a major point of entry for noxious particles and agents. Considering that exposure to aerosols may lead to the development of inflammatory processes and this is one of the possible causes of chronic rhinosinusitis (CRS), our goal was to determine the prevalence of CRS in workers exposed to cotton in order to characterize it as an occupational disease related to this irritant. **Materials and methods:** This study was based on the analysis of two questionnaires answered by 133 employees of a textile company. Workers with clinical diagnosis of CRS were submitted to nasal endoscopy and CT scan of the sinuses (TCSSF). **RESULTS:** Of the 133 employees polled, 35.3% (n = 47) were previously selected with the clinical symptoms of CRS and were invited to get the tests done. In 37 subjects who were examined we found abnormalities consistent with CRS -- 67.6% of nasofibrosopic (n = 25) and 70.3% (n = 26) of TCSSF. So we have 19.6% of the total population studied with confirmed diagnosis of CRS. **Discussion:** In accordance with the Guide for Occupational Diseases in Otorhinolaryngology, cotton is not cited as a causative agent of sinusitis; it is related only to occupational rhinitis. **Conclusion:** The high prevalence of CRS in workers exposed exclusively to cotton in this study can be characterized as an occupational disease. It was also concluded that there is a strong sensitivity in the questionnaire related to symptoms of CRS, which was confirmed with additional tests.

PS-134

SGP: 7918

Lagophthalmos in leprosy patients.

Author(s): Filipe Hailton Alves Aguiar, José Augusto da Costa Nery, Felipe Ladeira De Oliveira, Bruna Obeica Vasconcellos, Lara Mariana França, Renata Cristina Teixeira Coelho

Keywords: facial palsy, leprosy, mycobacterium leprae.

Objective: this paper aims to describe lagophthalmos as a manifestation of leprosy occurring due to the predilection of Mycobacterium leprae for nervous tissue. **Method:** the patient is an 85-year-old single male residing in Jacarepagua - Rio de Janeiro. He came to us complaining of nodes in his forearm. He reported that he had noticed the appearance of papules and nodules one year prior on his right and left forearms, neck, chest and face. Upper left lagophthalmos does not allow him to close his eyes and has caused epiphora. The following were seen on physical examination: papules and nodes on right and left forearm; plaques and nodes on left knee; thickened left and right ulnar nerve. **Results:** The patient underwent laboratory tests (smear of six sites including lesions with bacteriological index of 3.33; physical therapy evaluation of disability grade II (alterations on left eye.) The patient was stabilized and is taking multidrug therapy for leprosy. **Conclusion:** The diagnosis of leprosy is of paramount importance when considering the possibility of intervening early at the beginning of the symptomatic manifestations. The introduction of multidrug therapy for already involved patients is essential to treat leprosy, interrupt transmission and prevent deformities.

PS-135

SGP: 8512

Cardiorespiratory complications and ICU monitoring indication after adenotonsillectomy in children with obstructive breathing disorders

Author(s): Renato Oliveira Martins, Silke Anna Thereza Weber, Alessandra Loli, José Roberto Fioretto, Érico Vinícius Campos Moreira da Silva

Keywords: adenoids, intensive care units, palatine tonsil, postoperative complications.

Introduction: obstructive respiratory disorders of the upper airways and obstructive sleep apnea (OSA) have become a major factor in deciding to perform adenotonsillectomy. Despite the improvements in OSA diagnosis and earlier treatment, severe cases with risk for respiratory complications can still be seen. **Objective:** this paper aims to assess how often monitoring is indicated for patients with respiratory complications after tonsil surgery. **Materials and methods:** this is a retrospective study that looked into the charts of children of both genders aged between 2 and 2 years submitted to adenotonsillectomy in 2006-2010 to find data on indication for monitoring and respiratory complications. **Results:** in 811 surgical procedures, 45 cases were referred to ICU care. Most frequent comorbidities: obesity, age < 3, asthma, genetic syndromes, and neuropathy. Main reasons to indicate monitoring: AI > 10, high IDO, age < 3, obesity and syndromes. Eleven (24%) cases of respiratory complication were observed, 2 of acute lung edema, 6 of stridor, and 3 of brochospasm/stridor. **Discussion:** this study indicated the presence of respiratory complications after tonsil surgery in children with OSA. The main risk factors are: age < 3 anos, obesity, and asthma. Our data set indicates that pediatric patients with OSA are poor candidates for adenotonsillectomy. **Conclusion:** ICU care is frequently needed in post-tonsil surgery contexts. A high incidence of respiratory complications was observed in the postoperative care of children with age < 3, obesity, and asthma.

PS-136

SGP: 7937

Tolosa-Hunt syndrome mimicking cavernous sinus tumor

Author(s): Bernard Soccol Beraldin, Alexandre Felippu, Fábio Martinelli, Annie Caroline Gomes, Alexandre Colombini

Keywords: cavernous sinus, otorhinolaryngologic neoplasms, tolosa-hunt syndrome.

Tolosa Hunt syndrome was first described in 1954, when the author described the case of a patient with painful ophthalmoplegia caused by a nonspecific granulomatous inflammatory process that involved the cavernous sinus and the cavernous portion of the internal carotid artery. Seven years later, Hunt published a series of six patients, proposing criteria for the diagnosis of this syndrome. In 1988 the International Headache Society included the Tolosa Hunt Syndrome within the class of cranial neuralgias, and in 2004 the criteria for the classification of the syndrome were defined. The main differential diagnoses include: diabetic neuropathy, cavernous sinus thrombophlebitis, ophthalmoplegic migraine and tumor. The clinical syndromes are nonspecific, and imaging and pathology tests are essential to establish a precise diagnosis of the syndrome. The Tolosa Hunt syndrome is a rare disease of unknown etiology. Due to the absence of a specific biological marker it is mandatory to rule out other causes of painful ophthalmoplegia. This paper reports the case of a patient of Tolosa Hunt syndrome who had been originally diagnosed with cavernous sinus tumor.

PS-137

SGP: 7965

Nasal turbinate reduction with argon scalpel: initial experience of 20 cases and review of the literature

Author(s): Marcos Antonio Nemetz, Addressa Caroline Carneiro Pinheiro, Ana Beduschi Nemetz, Gabrielle Cordeiro de Oliveira, Alessandra Kraus

Keywords: argon, argon plasma coagulation, nasal septum.

The reduction of nasal turbinates is a common procedure to clear the upper airway in cases of hypertrophy of the turbinates. The argon scalpel allows for accurate surface ablation and consequently for reductions in the amount of blood lost during the procedure, as well as early recovery of the epithelium and clearance of the mucociliary flora. This paper aims at performing a literature review and report the initial experience of 20 patients who underwent septoplasty and reduction of inferior turbinates with argon scalpel.

PS-138

SGP: 7980

Craniofacial polyostotic fibrous dysplasia

Author(s): Carlos Augusto Seiji Maeda, Guilherme Romano Busato Sachet, Cristiano Roberto Nakagawa, Meliane Moleta, Raphael G. Alves, Vinicius Tomadon Bortoli

Keywords: craniofacial anomalies, facial bones, fibrous dysplasia, fibrous dysplasia of bone, polyostotic.

Fibrous dysplasia is characterized by a defect in bone modeling, with gradual replacement of normal bone by fibrosis with irregularly mineralized osteoid trabeculae. It is a benign congenital disorder of unknown etiology, usually manifested in late childhood. It is called polyostotic when it affects multiple bones. Involvement of the craniofacial skeleton can cause deformities and important organ dysfunctions. The case is about a 22-year-old woman complaining of slowly progressive increase in volume of her left hemiface. Facial deformities were visible in the malar and maxilla. CT scans showed polyostotic fibrous dysplasia. Surgery was performed for bone remodeling. Despite being an uncommon and benign disease, it is important for otolaryngologists to consider it as a differential diagnosis of face deformities. Early detection allows monitoring and prevention of major organ dysfunctions.

PS-139

SGP: 7983

Surgical treatment of intranasal fibrous dysplasia by endoscopic surgery: case report.

Author(s): Giulliano Enrico Ruschi e Luchi, Antonio Fernando Nogueira Maciel, Thais Camporez Pimentel, Mikaely Pereira Coser, Marília Vilas Boas Reis

Keywords: bone diseases, developmental, fibrous dysplasia of bone, nasal obstruction, video-assisted surgery.

This is a case report of a 12-year-old male complaining about nasal obstruction. Paranasal sinus CT showed a tumor with features of bone fibrous dysplasia. The tumor was completely removed by endoscopic sinus surgery, with lesser intra and post-operative morbidity, when compared to the classical surgery to remove intranasal tumors.

PS-140

SGP: 7984

Acute invasive fungal rhinosinusitis: report of 2 cases.

Author(s): Giulliano Enrico Ruschi e Luchi, Antonio Fernando Nogueira Maciel, Thais Camporez Pimentel, Mikaely Pereira Coser, Marília Vilas Boas Reis

Keywords: amphotericin b, immunosuppression, mucormycosis.

Objectives: fungal rhinosinusitis (FRS) is divided into two broad groups: invasive form (acute and chronic) and noninvasive (fungal ball and allergic FRS). Immunosuppression is the main determining factor for the development of this rare acute progressive and potentially fatal disease. The objective of this paper is to report two cases of acute invasive fungal rhinosinusitis in immunocompromised patients and correlate the findings with the literature.

Case Reports: Case 1: HN, 42, diabetic, renal transplant patient, developed high fever, vomiting and right hemiface numbness progressing to right facial palsy. Paranasal sinus CT scans showed opacification of the right maxillary, sphenoid and ethmoid sinuses, bilateral involvement in the frontal sinus, and periorbital soft tissue edema on the right. Patient was offered multimodal treatment with IV antifungal medication and emergency endoscopic surgery; pathology tests confirmed mucormycosis. 48 hours into postoperative care the patient developed disorientation, respiratory failure and died. Case 2: PS, 61, diabetic patient with liver cirrhosis. She developed high fever, purulent rhinorrhea on the left, progressing to left facial palsy. Paranasal sinus CT scans showed opacification of left maxillary, ethmoid and sphenoid sinuses, and left turbinate bone lysis. Multimodal therapy was initiated; pathology tests confirmed mucormycosis. Patient recovered uneventfully and was discharged after six weeks of hospitalization taking amphotericin B. **Conclusion:** patient survival depends primarily on the adoption of a multidisciplinary approach, followed by management of underlying diseases, early diagnosis of fungal invasion and consequent initiation of systemic therapy and surgical drainage. High mortality rates are observed even in patients treated properly.

PS-141

SGP: 7999

Exacerbation of chronic dacryocystitis and indications of endonasal endoscopic dacryocystorhinostomy

Author(s): Luiz Carlos Sava, Guilherme Eduardo Wambier, Henrique Wendling Sava, Vinicius Tomadon Bortoli, Luciane Bonoto, Jemima Herrero Moreira

Keywords: dacryocystitis, dacryocystorhinostomy, endoscopy, lacrimal apparatus diseases, lacrimal duct obstruction.

Dacryocystitis is the most common infection of the lacrimal apparatus. It is caused by the obstruction of the nasolacrimal duct, which creates a favorable environment for bacterial growth. The most common symptoms are epiphora and ocular discharge. Antibiotic therapy is used initially, but dacryocystorhinostomy is the definitive treatment. The classic approach is via external access, but in the last decades the use of the endoscopic endonasal procedure has grown. This paper reports a case of a 40-year-old man complaining of unilateral tearing and bulging of the lower medial corner of the ipsilateral orbit, similar to previously reported episodes. Dacryoscintigraphy and physical examination were consistent with chronic dacryocystitis exacerbation with canalicular obstruction. He underwent endoscopic dacryocystorhinostomy with success. Although the indications for endoscopic endonasal approach are very similar to the external approach, there are some advantages and some limitations inherent to the technique. It is up to capable ophthalmologists and otolaryngologists to study and discuss with the patient the best approach.

PS-142

SGP: 8000

Uncommon cause of nasal obstruction: mucous cyst in the nasopharynx

Author(s): Marco Antonio Ferraz de Barros Baptista, Fernando Veiga Angélico Júnior, Maurício Terceiro de Abreu, Priscila Bogar Rapoport

Keywords: cyst fluid, nasal obstruction, nasopharynx.

Cystic lesions in the nasopharynx are rare. This is a rare case of mucous cyst in the nasopharynx in a 43-year-old man. The patient presented mucous retention cysts originating from the fossa of Rosenmüller with typical appearance in X-ray images, thus allowing to differentiate it from other types of lesions in this region. Differential diagnosis and treatment options are discussed in the paper.

PS-143

SGP: 8001

Melanoma - a rare tumor of the nasal cavity.

Author(s): Gabriel Kuhl, Fernando Amaral, Leonardo Palma Kuhl, Joana Marczyk

Keywords: melanoma, nasal mucosa, otolaryngology.

Mucosal melanoma is a rare subtype of melanoma that affects mainly the head and the neck (55%); the most commonly affected sites are mouth, nasal cavities, and paranasal sinuses. Symptoms evolve slowly and silently and include nasal obstruction and epistaxis in early stage disease. Later stages may include local pain, visible masses in the nasal vestibule, sensation of endonasal filling, diplopia and eye proptosis. Prevalence rates increase between the sixth and eighth decade of life; there is no significant differences between genders. This paper describes a case of primary nasal mucosa melanoma and discusses disease presentation and therapy.

PS-144

SGP: 8004

Magnetic foreign body causing ulceration in nasal septum

Author(s): Márcia dos Santos da Silva, Renato Telles de Sousa, Alex de Santana Vidaurre, Renata de Farias Santana, Marcos Antonio Fernandes

Keywords: foreign bodies, nasal cavity, nasal septum, pressure ulcer.

Nasal foreign bodies are commonly seen in the ENT emergency setting. However, foreign bodies located in the nasopharynx are particularly rare in

adult patients. This paper describes the case of a patient who intentionally pushed two magnets into his nose, one into each nasal cavity. The magnets adhered firmly to the nasal septum because of the magnetic field created between them. Erosion of the mucoperichondrium was observed below the site the magnets adhered to, leaving about 1 cm of exposed cartilage. The patient healed completely after the magnets were removed.

PS-145

SGP: 8008

Severe epistaxis in a 7-year-old boy caused by a Capillary Lobular Hemangioma on the inferior turbinate

Author(s): Marco Antonio Ferraz de Barros Baptista, Lana Laura Franzoi de Barros, Caio Macedo Athayde Bonadio, Felipe Augusto Yamauti Ferreira, Rogério Fernandes Nunes da Silva

Keywords: capillary, epistaxis, hemangioma, nasal cavity.

Lobular capillary hemangiomas (LCH) are rarely found in the head and neck. This paper describes the case of a 7-year-old patient suffering from severe epistaxis with a LCH in the inferior turbinate. The authors of the paper believe this condition should be considered in the differential diagnosis of nasal cavity lesions.

PS-146

SGP: 7996

Schwannoma of the nasal septum: case report

Author(s): Laiza Araujo Mohana Pinheiro, Ronny Ng, Marcelo Hamilton Sampaio, Érica Ortiz, Marcello Anitelli, Eulália Sakano

Keywords: nasal septum, neurilemmoma, nose neoplasms.

Schwannoma is a benign neoplasm rarely found on the nasal cavity and paranasal sinuses. This paper describes the case of a 41-year-old man with a schwannoma arising from the nasal septum. The lesion was evaluated with nasofibrosocopy, CT scan, MRI and pre-operative biopsy. The tumor was excised through the endoscopic approach without difficulty and the patient had an uneventful follow-up. In this paper the authors discuss clinical presentation, differential diagnosis, imaging characteristics and treatment of this rarely encountered lesion.

PS-147

SGP: 8002

Prevalence of rhinitis symptoms among textile industry workers exclusively exposed to cotton dust

Author(s): Ivan de Picoli Dantas, Carlos Eduardo Monteiro Zappellini, Fabiana Cardoso Pereira Valera, Wilma Terezinha Anselmo Lima

Keywords: cotton fiber, cotton industry, rhinitis.

Introduction: the respiratory tract is one of the main points of entry of substances foreign to our bodies. Our upper airways are significantly exposed to noxious agents, whether they be gases, vapors, or aerosols (dust, smoke, smog, fog). These agents may cause discomfort, irritation, allergy, and erosion. This paper aims to assess workers exposed to cotton fiber and the presence of occupational rhinitis symptoms. Materials and methods: this study looked into a group of workers at Cooperativa Nova Esperança de Nova Odessa (São Paulo). Data points were collected by means of a questionnaire designed by the author to capture clinical findings connected to rhinitis. Results: 63.7% of the sample complained of nasal obstruction; 57.2% had nasal pruritus; 46.7% reported rhinorrhea; and 66.1% reported sneezing. Severe symptom manifestations were as follows nasal obstruction in 9%; pruritus in 9%; rhinorrhea in 4%; and sneezing in 6.4%. Discussion: environmental aerosol agents may clearly worsen symptoms and even trigger rhinitis. This study showed a strong correlation between exposure of **Introduction:** the respiratory tract is one of the main points of entry of substances foreign to our bodies. Our upper airways are significantly exposed to noxious agents, whether they be gases, vapors, or aerosols (dust, smoke, smog, fog). These agents may cause discomfort, irritation, allergy, and erosion. This paper aims to assess workers exposed to cotton fiber and the presence of occupational rhinitis symptoms. Materials and methods: this study looked into a group

of workers at Cooperativa Nova Esperança de Nova Odessa (São Paulo). Data points were collected by means of a questionnaire designed by the author to capture clinical findings connected to rhinitis. Results: 63.7% of the sample complained of nasal obstruction; 57.2% had nasal pruritus; 46.7% reported rhinorrhea; and 66.1% reported sneezing. Severe symptom manifestations were as follows nasal obstruction in 9%; pruritus in 9%; rhinorrhea in 4%; and sneezing in 6.4%. Discussion: environmental aerosol agents may clearly worsen symptoms and even trigger rhinitis. This study showed a strong correlation between exposure of textile industry workers to cotton and rhinitis symptoms. Conclusion: Data analysis indicates that the manifestation of rhinitis symptoms in this group of workers reinforces the relevance of offering preventive care and therapy so as to reduce the levels of discomfort and symptoms experienced and the nose and sinus complications that might stem from such context.

PS-148

SGP: 8010

Differential diagnosis of clivus tumors

Author(s): Tiago Vasconcelos Souza, Iulo Sérgio Barana, Diego Rodrigo Hermann, Leonardo Lopes Balsalobre, Fernando Oto Baliero, Aldo Stamm

Keywords: chordoma, diagnosis, differential, skull base neoplasms.

Introduction: The clivus can be affected by a series of lesions, including benign and malignant tumors, as well as non-neoplastic diseases. Clinical examination and imaging may facilitate the differential diagnosis of these lesions. In many cases, however, histopathology tests can establish a definitive diagnosis. **Objective:** this study aims to review and discuss the histopathologic diagnosis of cases of tumoral lesions in the occipital region of the clivus operated at our institution. **Methods:** this study comprises a retrospective analysis of 21 recent cases of patients with clivus tumors operated at our institution from January 2007 to April 2011. The histopathologic findings are described, and the main points correlated with the differential diagnosis between these neoplasms are discussed. **Results:** the following histopathologic diagnoses were found: clivus chordoma (12), neuroendocrine tumor (2), angiosarcoma (1), chondrosarcoma (1), nasopharyngeal carcinoma (1), fibrous dysplasia (1), metastasis (1), lymphoma (1), and plasmacytoma (1). **Conclusion:** based on our results we conclude that the differential diagnosis of lesions of the clivus is extensive. Chordomas are the most

PS-149

SGP: 8019

Ethmoiditis Deformans: an atypical case in an elderly patient

Author(s): Alexandra Torres Cordeiro Lopes de Souza, Nicolau Tavares Boechem, Jéssica Guimarães Gomes Silva, Larissa Salomão Pereira, Carolina Jarletti da Fonseca

Keywords: acquired, elderly, nasal polyps, nose deformities.

Objectives: nasal polyposis is a chronic inflammatory disease of the nasal mucosa that affects up to 4% of the population. It is a multifactorial disease also related to clinical syndromes such as Woakes'. This paper aims to report a case of nasal polyposis / ethmoiditis deformans of long duration in an elderly patient seen at the ENT Service and correlate it to the literature. **Case Report:** A 78-year-old male patient, longtime smoker with no other comorbidities, came to our service complaining of progressive nasal obstruction that had grown for the past twenty years associated with anosmia, retropharyngeal bulging - in the region of the paranasal sinuses - a clear reddish vegetating lesion creeping out of the nose, enlargement of the nasal pyramid, and facial deformity. A biopsy and CT scans of the sinuses were done, showing inflammatory nasal polyps and opacification of all paranasal sinuses respectively, with a homogeneous image going beyond the borders of the nasal cavities. The patient underwent an endoscopic removal of the maxillary and ethmoid sinuses and was prescribed high-dose topical steroids. No signs of recurrence have been recorded so far. **Conclusion:** We sought to describe an unusual presentation of polyposis, with deformity of the nasal pyramid, which usually affects young patients (especially adolescents). The case at hand involved an elderly patient not operated on previously, indicating that this is the first manifestation of the disease, and not a case of relapsing disease.

Nasopharyngeal angiofibroma: post-operative ischemic complication

Author(s): José Santos Cruz de Andrade, Ana Karina Assis, Adriano Fonseca Santana, Erico Vinhaes, Nilvano Alves de Andrade

Keywords: angiofibroma, nasal cavity, neoplasms.

Juvenile nasopharyngeal angiofibroma (JNA) is a highly vascular, locally aggressive tumor. Treatment is surgical, with or without embolization, and may be associated with serious preoperative, intraoperative and postoperative complications. **Objective:** To report the case of a patient diagnosed with JNA, who developed severe complications after surgical treatment with pre-operative embolization and intraoperative ligation of the external carotid artery. **Case report:** The patient is an 18-year male, with a history of headache, epistaxis and nasal obstruction. Nasal endoscopy: left nasal cavity with reduced lumen due to bulging caused by a tumor located in the right nasal cavity. Right nasal cavity completely blocked by a pinkish mass with bleeding sites and mucopurulent discharge. Preop CT scans showed a tumor occupying the entire right nasal cavity extending into the infratemporal fossa and orbital fissure, with a segment of intracranial invasion, occupying the sphenoid and maxillary sinuses, protruding the ipsilateral eye. Examination was consistent with juvenile nasopharyngeal angiofibroma classified as Radowski IIIb. The patient's tumor was embolized (right internal maxillary artery and both facial arteries) 72 hours before surgery. He then underwent a combined endoscopic / Weber-Ferguson right medial maxillectomy approach and the tumor was removed transorally. Upon removal of the tumor, there was profuse bleeding, requiring emergency ligation of the external carotid. Repair was done using titanium plates and the patient was referred to the ICU. In the immediate postoperative period the patient's upper lip and right side of the scalp were cyanotic. 36 hours later the then cyanotic tissues were necrotic. **Conclusion:** this case was reported to increase the awareness over the risks associated with reducing blood supply in an attempt to manage JNAs during surgery, especially when the disease is more advanced.

Bilateral nasolabial cysts

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: nasal obstruction, nonodontogenic cysts, otorhinolaryngologic neoplasms.

Nasolabial cysts are rare and account for about 0.3% of all cysts involving the maxillary region. Higher prevalence rates are observed among females between the 4th and 5th decade of life. They are unilateral in 90% of the cases. Bilateral occurrence is extremely rare. Few cases have been described in the literature. Clinical manifestation is the most important criterion for diagnosis. This paper describes one case of bilateral nasolabial cyst. Therapy consists of surgical removal using the intraoral approach, which allows for wide exposure.

Exophytic Schneiderian Papilloma: Case report of an unusual lesion originating in the nasal cavity

Author(s): Camila Pazian Feliciano, Thaís Augusta Costa Martins, Valesca Riccio-ppe, Thiago Ferreira Borges, Leonardo de Lima Teodoro, Júlio Cláudio de Sousa

Keywords: histology, nasal cavity, papilloma.

Objective: this paper aims to report a case of exophytic Schneiderian papilloma originating in the nasal cavity. **Case report:** A 76-year-old male patient sought ENT care because of hyposmia and a nasal obstruction that had been bothering him for 15 years. Examination of the ear showed a retraction of the left tympanic membrane; examination of the nose showed a septum deviated to the left (area II Cottle); no tumor was visualized. Endoscopic examination showed a vegetating verrucous lesion in middle third of posterior left nostril blocking the choana; CT scans showed soft-tissue density portions on the septum area combined with ipsilateral ethmoid sinus disease. Incisional biopsy yielded a diagnosis of fungiform papilloma.

The tumor was located in the caudal portion of the left middle turbinate to the left posterior portion of the septum. A lobulated dark tumor measuring 7.0x6.0x5.0 cm was resected using the endonasal approach. Histopathology confirmed the diagnosis of exophytic Schneiderian papilloma. **Conclusion:** Schneiderian papillomas are benign lesions that arise on the surface of the nasal mucosa. There are three main histological subtypes: endophytic papilloma (inverted), exophytic papilloma (waffle) and cylindrical papilloma. Fungiform papillomas develop from the anterior nasal septum and rarely stem from the side walls or posterior septum; nonetheless they should be considered in cases of posterior nasal lesions. Endonasal resection is a relevant surgical alternative given its high success rate and lower morbidity when compared to the external approach.

Management of Epistaxis in a São Paulo Tertiary Care Hospital

Author(s): Renata Santos Bittencourt Silva, Rodolfo Alexander Scalia, Cristina Penon

Keywords: epistaxis, guideline, practice management.

Despite advancements in the treatment of epistaxis, disparate viewpoints have hindered a formalized procedure or approach to take hold. In this study we designed a formal way to manage epistaxis episodes. We performed a review on Pubmed between 1990 e 2011 using key words like "epistaxis", "management", "update", "guideline". 1) If bleeding is localized, then the chemical or electric cautery can be applied. The nose should be packed if bleeding continues despite cautery or if no obvious bleeding is seen. Because of the risks associated with nasal packing most patients are admitted to the ward for at least 48 hours. If it fails then nasal packing must be done again and planned to be removed at the OR under direct visualization using an endoscope. 2) If the site of bleeding is not seen and/or if there is intense bleeding even when the pack is in place, anterior-posterior packing is recommended. These bleeds can be difficult to treat and may require either balloon insertion or a formal posterior pack. This time nasal packing must be in place for at least 72 hours. If it fails then the patient's nose must be packed again and the nasal packing can only be removed in the OR under direct visualization using an endoscope.

Esthesioneuroblastoma

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: esthesioneuroblastoma, nasal obstruction, neuroblastoma, olfactory.

Esthesioneuroblastoma or olfactory neuroblastoma is an uncommon malignant neoplasm that arises from the olfactory epithelium and accounts for 4% - 6% of all malignant tumors in the paranasal sinuses. It is classified as a neuroectodermal tumor with a predilection for adults. The clinical signs are nonspecific, but it usually appears in conjunction with nasal obstruction, epistaxis and anosmia. It is a rare disease, and there is no consensus regarding the best treatment. This paper describes a case of esthesioneuroblastoma.

Pneumocranium and pre-septal abscess with fasciitis in rhinosinusitis

Author(s): Helder Ikuo Shibasaki, Mariana Wilberger Furtado de Almeida, Ana Gabriela Gonçalves Torisan, Ricardo Arthur Hübner, Camila Izaac Alfredo, Atilio Maximino Fernandes

Keywords: fasciitis, necrotizing, pneumocephalus, sinusitis.

Rhinosinusitis (RS) complications are classically divided as orbital, bone and intracranial. Rare symptoms may also occur. Epidemiological data vary widely and there is no consensus on the exact prevalence of the different types of complications. It is known, however, that the periorbital ones are the most frequent, especially in ethmoidal RS. This is a case of acute rhinosinusitis affecting the maxillary, ethmoid and frontal sinuses that developed with pre-septal abscess, periorbital necrotizing fasciitis and pneumocranium.

PS-157

SGP: 8059

Choanal atresia

Author(s): Carlos Henrique Ballin, Adriel Carlos Martins, Carlos Roberto Ballin, Jemima Herrero Moreira, Súrya Toledo Guérios, Guilherme Eduardo Wambier

Keywords: choanal atresia, endoscopy, nasal obstruction.

Introduction: Choanal atresia is defined as a failure in the development of the communication between the nasal cavity and the nasopharynx. Most of these obstructions are osteo-membranous. Diagnosis depends on high clinical suspicion and must be confirmed with imaging tests, namely CT scans. Treatment is surgical. **Objective:** this paper aims to report a case of an adult patient diagnosed with right choanal atresia submitted to surgery. **Case Report:** JPSK, 47, male with a long-standing history of nasal obstruction, fetid rhinorrhea and inability to blow the right nostril. Nasal endoscopy: confirmation of right atresia. CT: material with soft tissue densities in the maxillary sinuses and right inferior meatus; right middle turbinate could not be identified. Patient underwent a transnasal endoscopic procedure. A mucosal flap was used to cover the wound; stenting was not needed; a 30-degree rigid endoscope was used during surgery. The patient recovered well and has attained normal breathing through the right nostril. **Conclusion:** unilateral choanal atresia is uncommon and difficult to promptly diagnose, as it offers nonspecific signs and symptoms.

PS-158

SGP: 8075

Differential diagnosis of persistent rhinosinusitis

Author(s): André Yassuo Prappas Yamamoto, João Cesar Frizzo Burlamaqui, Marco Antonio Ferraz de Barros Baptista, Renato Prescinotto, Priscila Bogar Rapoport

Keywords: burkitt lymphoma, nasopharyngeal neoplasms, nasopharynx, sinusitis.

Introduction: Burkitt's lymphoma is a type of non-Hodgkin lymphoma that usually manifests as a large osteolytic lesion in the jaw or as an abdominal mass. **Case Presentation:** Patient, for four years with rhinosinusitis, was treated for a month to no avail. During detailed investigation a mass in the nasopharynx (Burkitt's lymphoma) was found; the lymphoma disappeared after chemotherapy. **Discussion:** Although rare, when diagnosed early this lymphoma responds well to chemotherapy. **Final comments:** when the treatment prescribed for infectious rhinosinusitis fails, medical investigation must proceed to possibly diagnose other more severe diseases.

PS-159

SGP: 8077

Frontal-ethmoidal mucocele with eye proptosis

Author(s): Francisco Grocoske, Cassio Iwamoto, Marcos Mocellin, Heloisa Nardi Koerner, Maria Theresa Costa Ramos Oliveira, Otavio Zanini

Keywords: ethmoid sinus, exophthalmos, frontal sinus, mucocele.

This is a case of a 67-year-old female patient with frontal-ethmoidal mucocele and eye proptosis. The patient sought the ENT service at the School Hospital at UFPR complaining of longstanding holocranial headache without nasal obstruction, rhinorrhea, or post-nasal drip. She did not have any eye complaints. Nose examination showed nasal mucosa hyperemia, mild bulging of the left frontal region and left eye proptosis. CT scans of the sinus showed images with soft tissue density in the left ethmoid sinus, destroying cells, cribriform plate, orbit wall and the sphenoid bone. MRI confirmed frontal-ethmoidal mucocele. The patient underwent endoscopic resection of the lesion. The procedure was uneventful and the patient improved with full relief of symptoms and proptosis.

PS-160

SGP: 8084

Histological study of two years of nasal polyposis cases in a military hospital

Author(s): Thiago Dolinski Santa Rosa Oliveira, Alonço da Cunha Viana Junior, Daniella Leitão Mendes, Regis Marcelo Fidélis, Deborah Franco Abrahão

Keywords: biopsy, classification, nasal polyps.

The abstract was not sent.

PS-161

SGP: 8096

Oromandibular dystonia after complex facial fracture

Author(s): Mariana Dutra de Cassia Ferreira, Marion Mory, Reinaldo J Gusmão, Leopoldo N. Pfeilsticker

Keywords: dystonia, facial muscles, mandibular fractures.

Oromandibular dystonia is a rare motion disease characterized by involuntary muscle contractions of varied degrees of severity affecting the jaw, tongue, face and pharynx. This paper describes the case of a patient with oromandibular dystonia triggered by complex facial fractures.

PS-162

SGP: 8099

Vulcanized silicone molds used in nasal stenosis: technical notes

Author(s): Mariana Dutra de Cassia Ferreira, Eulália Sakano, Leopoldo N. Pfeilsticker

Keywords: anatomic, models, nasal obstruction, silicones.

Nasal stenosis causes significant functional and cosmetic impact. Several attempts at correcting it with the use of prosthetic devices are described in the literature, with different results. This paper presents two cases in which vulcanized silicone molds were used as support molds.

PS-163

SGP: 8105

Subcutaneous abscess as a complication of acute rhinosinusitis arising from craniotomy

Author(s): Antônio Luis de Lima Carvalho, Eleonora de Castro Bottura Neves, Samanta Dall'Agnese, Henrique Faria Ramos, Soraia El Hassan, Romualdo Suzano Louzeiro Tiago

Keywords: abscess, craniotomy, sinusitis.

The aim of this study is to report the case of a patient with a frontal-temporal subcutaneous abscess caused by sinusitis as a late complication of craniotomy. **Case report:** A male patient, 49, was admitted to the hospital with a history of purulent rhinorrhea on the right with 20 days of evolution, associated with nasal obstruction and progressive bulging in the frontal-temporal ipsilateral region. The patient had a reported history of craniotomy to clip an aneurysm of the internal carotid and right middle cerebral arteries. He showed no sensory and motor deficit, Glasgow 15 without signs of intracranial involvement. Fiberscope examination showed purulent discharge in the right middle meatus. Skull and paranasal sinus CT scans revealed content with soft tissue density in the right frontal, anterior and posterior ethmoid and maxillary sinus with ipsilateral signs of previous craniotomy with lateral opening of the frontal sinus associated with an increased volume of soft tissue in the frontal-temporal region, indicative of subcutaneous abscess. No signs of intracranial fluids were observed. The initial treatment was based on antibiotics and prednisone. Surgery was chosen, and the patient progressed satisfactorily in the postoperative period. **Final comments:** rhinosinusitis complications require the investigation of a possible intracranial extension of the disease through imaging. Once intracranial involvement is ruled out, treatment should be directed to endoscopic sinus drainage associated with subcutaneous drainage, using broad-spectrum antibiotics for prolonged periods of time.

PS-164

SGP: 8108

Pseudomucocele

Author(s): Luciana Giro Campoy Basile, Ana Célia Faria, Ivan de Picoli Dantas, José Maria Moraes de Rezende, Ari de Paula, Luana Gonçalves Oliveira, Ana Cecilia Macedo, Carlos Eduardo Monteiro Zappellini

Keywords: maxillary sinus, mucocele, paranasal sinuses.

Introduction: pseudomucocele is a rare disease. The maxillary sinus is affected in 100% of cases, the ethmoid sinus in 55% and the sphenoid sinus in 60%. Coste et al. observed CT scans of paranasal sinuses of children with cystic fibrosis and saw images with a high density and heterogeneous center and low density borders. Intraoperative findings showed a thickened inflammatory capsule along the contour of the sinus walls, with presence

of viscous fluid. It consists of a tissue capsule that limits inflammatory mucous secretion. Pathogenesis remains obscure. Some studies have tried to correlate its formation with glandular alterations, changes on intracellular transportation and genetic expression. The highest incidence of the disease occurs among young patients. **Discussion:** pseudomucocele is rare and has undefined etiology and epidemiology. It affects mainly young people by involving their maxillary sinuses. It is characterized by a tissue capsule that limits inflammatory secretions on the affected sinus. **Conclusion:** The choice of surgical treatment combined with medical therapy is based on the severity of clinical symptoms.

PS-165

SGP: 8125

Orbital complication after rhinosinusitis in children

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: child, orbital cellulitis, sinusitis.

Rhinosinusitis is an inflammatory process in the paranasal cavity. It usually occurs after upper respiratory tract infections. An estimated 0.5 to 2% of upper respiratory tract infections evolve to bacterial rhinosinusitis. The most frequent etiologic agent is *Streptococcus pneumoniae*. Orbital complications are the most frequent, and children are the most affected age group. Complications require early diagnosis and treatment. This paper describes a case of orbital complication after rhinosinusitis in a pediatric patient.

PS-167

SGP: 8127

Sphenoidal sinus antrochoanal polyp

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vania Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: nasal obstruction, polyps, sphenoid sinus.

Antrochoanal polyps, or Killian's polyps, are benign non-atopic solitary polypoid lesions that originate usually from the maxillary sinus. They originate more commonly in the distal antral region, although ethmoidal-choanal, choanal, and sphenoidal-choanal polyps are occasionally seen. They affect mainly children and young adults. Studies demonstrate they account for 4-6% of all nasal polyps. However, in the pediatric population this percentage reaches 33%. The probable etiologies in children are chronic sinusitis and / or cystic fibrosis. The main clinical sign is unilateral nasal obstruction. The treatment is surgical resection. Several surgical options have been suggested to minimize postoperative recurrence. This abstract describes one case of antrochoanal sphenoidal sinus polyp.

PS-168

SGP: 8132

Sinonasal malignant melanoma

Author(s): Rui da Silva Neto, Rodrigo de Andrade Pereira, João Paulo de Andrade De Maria, Fernando Machado de Mesquita, Raquel Godinho de Sá

Keywords: melanoma, nose neoplasms, paranasal sinus neoplasms.

Malignant melanomas of the nasal cavities are rare tumors that affect patients of advanced age, after the sixth decade of life with a late onset of nonspecific symptoms. Prognosis is generally poor. The initial presentation is usually unilateral, with symptoms of epistaxis and nasal obstruction. Diagnosis is done through histopathology and immunohistochemistry, and involves mostly disease in advanced stages. In cases of unilateral lesions of the nasal cavity associated with epistaxis in elderly patients, the differential diagnosis of melanoma of the nasal cavity, although rare, should always be entertained. Early diagnosis of these tumors improves the success of surgical treatment which is currently seen as the therapy of choice.

PS-169

SGP: 8141

Respiratory epithelial adenomatoid hamartoma of nasal septum: Case Report

Author(s): Laiza Mohana, Alexandre Caixeta Guimarães, Marcelo Sampaio, Érica Ortiz, Ronny Tah Ng, Eulália Sakano

Keywords: hamartoma, nasal septum, neoplasms.

Introduction: Respiratory epithelial adenomatoid hamartoma is an uncommon benign tumor of the upper aerodigestive tract. Tumors located in the nasal cavity are rare and usually affect the posterior septum. **Case Report:** a 51-year-old female patient reported left-side nasal obstruction progressing for seven months followed by intermittent episodes of headache and purulent rhinorrhea. Endoscopic examination showed a lobulated mass in the posterior left nasal cavity occupying the lower and middle meatus and extending into the choana. Intraoperatively, it was observed that the lesion in the nasal septum did not extend into the sinus. Histopathologic examination showed it was a respiratory epithelial adenomatoid hamartoma. The patient improved well postoperatively and has not shown signs of recurrence. **Review:** hamartomas are defined as aberrant differentiations that can produce a disorganized and mature mass of cells of a site-specific tissue. Clinically, patients with respiratory epithelial adenomatoid hamartomas can present nasal obstruction, epistaxis, recurrent sinusitis, facial pain, proptosis and hyposmia. Such polypoid masses may involve one or both nostrils. The main differential diagnoses include inflammatory polyp, inverted papilloma and sinus adenocarcinoma. Definitive treatment is surgical removal of the lesion. Prognosis is excellent and risk of recurrence is low. **Final Comments:** respiratory epithelial adenomatoid hamartomas are rare benign tumors that should be included in the differential diagnosis of nasal cavity unilateral exophytic tumors.

PS-170

SGP: 8142

Frontal sinus mucocele: using a combined surgical approach

Author(s): Danielle Sofia da Silva, Daniel Buarque Tenório, Katianne Wanderley Rocha Marinho Rosa, Igor Gomes Padilha, Bruno Gomes Padilha, Lucas de Pádua Gomes de Farias, Fabiano Evangelista da Silva, José Vicente Veloso Filho

Keywords: endoscopy, frontal sinus, mucocele.

Mucocele is characterized by the accumulation of mucus secretion inside a blocked cavity. It may occur in any of the paranasal sinuses, and when the frontal sinus is involved it may extend into the orbit or erode the affected sinus inner wall and cause the compression of the central nervous system. This paper describes a case of frontal sinus mucocele treated with a combined surgical approach, as the entire lesion could not be accessed endoscopically.

PS-172

SGP: 8150

Association between St. John's festivities held in June in Brazil and allergic rhinitis

Author(s): Talita de Almeida Henklain, Márcio Silva de Carvalho, Flávia Lira Diniz, Danilo Monteiro de Melo Henklain

Keywords: allergic, biomass, rhinitis, rhinitis, seasonal, smoke.

Introduction: Allergic rhinitis (AR) is a nasal inflammatory disease impacted by genetic and environmental factors associated to the immune mechanism. It is a disease of high prevalence and significant impact on quality of life. Environmental factors may trigger or exacerbate symptoms. Among them is the smoke produced by the typical bonfires set up during St. John's festivities in Brazil. **Objective:** this paper aims to review the themes and possible increases observed in the prevalence of allergic rhinitis in people exposed to smoke. **Materials and methods:** this paper describes the issues around rhinitis, smoke and St. John's festivities and presents a cross-sectional observational study performed during and after the period of St. John's festivities in June with public health care patients in an ENT service. **Results:** the study looked into 388 patients. Forty percent of the patients

were diagnosed with AR, and 56% of them reported exposure to smoke. Sixty percent of the patients were diagnosed with other ENT diseases, and 44% of them reported exposure to smoke. A higher prevalence of AR was observed among patients exposed to smoke, as also seen in the literature. Conclusion: exposure to smoke during St. John's festivities has increased the incidence of allergic rhinitis.

PS-173

SGP: 8151

When should nasal cavity foreign bodies be considered an emergency situation?

Author(s): Tammy Fumiko Messias Takara, Bruno Naconey de Souza, Guilherme Machado de Carvalho, Alexandre Caixeta Guimarães, Patrícia Bette, Etienne Santos Cordeiro, Reinaldo Jordão Gusmão

Keywords: emergency treatment, nasal cavity, nose.

Introduction: foreign bodies in the nasal cavities account for a significant number of cases involving patients between one and six years of age. Magnets and alkaline batteries may lead to severe injury and should be regarded as ENT emergencies. **Objective:** this paper aims to present a word of warning to physicians over the dangers connected to finding foreign bodies in the nasal cavities of patients, principally when such FB's are magnets or batteries as they may lead to severe injury. **Materials and methods:** this paper describes a case and relates it to the medical literature. **Discussion:** the following modes of action that lead to tissue injury have been described: 1. Necrotic injury caused by pressure exerted upon a site for an extended period of time, as seen in the case of foreign bodies pushed into small spaces causing impaction of certain sites for prolonged periods of time; 2. Electric cumulative burns by exposure to low voltage direct current passing between a battery's anode and cathode and through the victim's nasal mucosa; 3. Oozing caused by burns create a wet environment conducive to spontaneous leakage of battery alkaline contents and consequent intense local tissue response. Alkali can penetrate tissues deeply and produce liquefactive necrosis, which by its turn results in solubilization of proteins and collagen, saponification of lipids, and cell tissue dehydration. Acids, by their turn, produce coagulative necrosis in tissue superficial layers. **Conclusion:** it is important that suspicious foreign objects be identified and removed quickly. When batteries are found, a specialist must be called given the potential for severe complication.

PS-174

SGP: 8158

Esthesioneuroblastoma in a patient infected by HIV: a case report

Author(s): Lúcia Oliveira Gonçalves, Isamara Simas de Oliveira, Danilo Santana Rodrigues, Paulo Fernando Tormim Borges Crosara, Roberto Eustáquio Santos Guimarães

Keywords: esthesioneuroblastoma, hiv, nasal cavity, olfactory.

Objective: this paper aims to describe the case of an HIV patient diagnosed with an esthesioneuroblastoma - a rare olfactory epithelium cell malignant neoplasm. **Case report:** E.R., 42, male, looked for the ENT ward at HC/UFMG complaining of chronic sinusitis and recurring exacerbations for the past two years. The patient had nasal obstruction, hyposmia, cough, and purulent rhinorrhea. He presented left proptosis and epistaxis. CT scans of the paranasal sinuses showed a mass invading the nasal cavity, the left maxillary, ethmoid, and frontal sinuses, the orbit, and the CNS, accompanied by bone lysis. No changes were seen in the ophthalmic examination. The patient has been HIV-positive for 16 years and is taking antiretroviral drugs, and has undetectable viral load. A specimen was endoscopically collected for biopsy and immunohistochemistry analysis, and the patient was diagnosed with an esthesioneuroblastoma. Palliative radiotherapy was offered as the tumor was very advanced. The patient died within less than two months. **Conclusion:** esthesioneuroblastomas grow slowly, but are highly invasive, aggressive tumors. There is no consensus as to the best course of therapy as this is a rare disease. No correlation was found in the literature between this neoplasm and HIV.

PS-175

SGP: 8159

Osseocartilaginous rib graft rhinoplasty

Author(s): Marina Neves Rebouças, Lourival Mendes Bueno, Edson Júnior de Melo Fernandes, Fabiano Santana Moura

Keywords: bioprosthesis, plastic, rhinoplasty, surgery.

A 33-year-old former cocaine addict had a complete nasal septum perforation with collapse of the nose dorsum. The patient underwent a cosmetic procedure using a bony-cartilaginous rib graft.

PS-176

SGP: 8169

Sphenoid sinus mucocele: a case of rapidly progressive vision loss in a pregnant woman

Author(s): José Arruda Mendes Neto, Samanta Dall'Agnesse, Antônio Luís de Lima Carvalho, Eleonora de Castro Bottura Neves

Keywords: blindness, mucocele, optic nerve, sphenoid sinus.

Mucoceles are cystic, benign lesions that are formed within the paranasal cavities. They tend to expand and occupy the whole cavity leading to compression of surrounding structures. This paper describes the case of a sphenoid sinus mucocele in a pregnant woman who presented rapidly progressive visual loss. The patient was submitted to surgical endoscopic treatment with decompression of the optic nerve. However, the patient's visual acuity did not improve after surgery.

PS-177

SGP: 8171

Unilateral Nasal polyp: Inverted Papilloma

Author(s): Rui da Silva Neto, Rodrigo de Andrade Pereira, João Paulo de Andrade De Maria, Fernando Machado de Mesquita, Raquel Godinho de Sá

Keywords: inverted, papilloma, paranasal sinus diseases, paranasal sinus neoplasms.

Inverted papillomas are particularly rare tumors in females. They occur mostly after the 5th decade of life, and are generally sided with unspecific late symptoms such as nasal obstruction, rhinorrhea and recurrent epistaxis. Recurrence is very common; etiology is largely unknown. Diagnosis is confirmed by pathology tests. The differential diagnosis of elderly patients with unilateral nose tumors and presentation of nasal obstruction and epistaxis must always include inverted papillomas, particularly if the patient has undergone nasal surgery previously. Early diagnosis is important as it allows for a more successful and less disfiguring procedure. Surgery is the treatment of choice.

PS-178

SGP: 8181

Eyelid reconstruction with conchal cartilage grafts after basal cell carcinoma resection

Author(s): Gyl Henrique Albrecht Ramos, Cristiano Roberto Nagakawa, Sylvia de Figueiredo Jacomassi, Yara Alves de Moraes do Amaral, Tatiana Rosa Ogata

Keywords: basal cell, carcinoma, ear cartilage, eyelids, reconstruction.

Introduction: basal-cell carcinoma is the most prevalent form of skin cancer. Eyelid involvement is observed more often in the lower eyelids. Function preservation is the main aim of eyelid tumor resection procedures. This paper aims to describe a case of lower eyelid repair after BCC resection using conchal cartilage grafts with skin. **Case report:** M.F.S, 79, is female patient with a BCC in her right lower eyelid. The patient underwent biopsy before surgery. She had a history of nose surgery (thus ruling out the use of chondroseptum). Approach: 1) antisepsis, general anesthesia; 2) tumor resection with safety margins >0.5cm; 3) preparation of skin-perichondrium-cartilage graft from right ear concha; 4) eyelid repair by stitching conchal cartilage to the medial and lateral tarsal stumps (colorless vicryl 10.0); 5) stitch eyelid conjunctiva and ear concha skin with 10.0 line; 6) advance 0.5cm

over eyelid skin and use same line to stitch ear concha skin; 7) closure and ophthalmic topical cream for 48 hours. Two months later the patient had achieved a very good functional and cosmetic outcome. **Discussion:** repair procedures may vary. Chedid, et al and Matsuo, et al, concur in that the conchal graft is the most frequently chosen approach over chondroseptum. Conchal cartilage can be easily collected, offers minimal morbidity, and may be shaped to fit the defect. **Conclusion:** the procedure described above is a great option when facing patients with a history of nasal septum surgery, or situations in which the quality of nasal cartilage/mucosa/perichondrium cannot be asserted.

PS-181

SGP: 8194

Antrochoanal polyp in the maxillary sinus

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flávia Rodrigues Ferreira, Vânia Lucia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: maxillary sinus, nasal obstruction, polyps.

Antrochoanal polyp, or Killian's polyps are benign non-atopic solitary polypoid lesions that usually originate in the maxillary sinus. They originate more commonly in the distal antral region, but lesions located in the ethmoid-choanal, sphenoidal-choanal, and choanal areas have been reported. These polyps affect mainly children and young adults. Studies demonstrate that they account for 4-6% of all nasal polyps. However, in the pediatric population this percentage increases to 33%. The probable etiologies in children are chronic sinusitis and/or cystic fibrosis. The main clinical sign is unilateral nasal obstruction. Treatment is surgical. Several procedures have been suggested to minimize postoperative recurrence. This paper describes a case of antrochoanal sphenoid sinus polyp.

PS-182

SGP: 8199

Sinonasal melanoma: case report

Author(s): Isamara Simas de Oliveira, Marcela Silva Lima, Danilo Santana Rodrigues, Leandro Farias Evangelista, Ligia Oliveira Gonçalves, Cátia Rodrigues Domingos, Paulo Fernando Torrin Borges Crosara, Roberto Eustáquio Santos Guimarães

Keywords: case reports, melanoma, nasal mucosa.

Introduction: mucosal melanoma is a rare condition that does not stem from precursor lesions. It occurs generally in people over 60 years of age. Both genders are equally affected. Clinical manifestations are nonspecific and evolution is unpredictable. **Objective:** this paper describes an atypical case of melanoma, a potentially fatal malignant condition that affects the skin and mucosal membranes. **Case report:** M.F.S, 65, came to our service complaining of persistent unilateral nasal obstruction and epistaxis. The patient stated that such symptoms had been present for three years, and that she had been treated with a nasal topical cream that allowed for partial improvements. In September of 2010 the patient came to our service as the tumor protruded out of her right nasal cavity. Clinical assessment: the tumor was obstructing the patient's right nasal cavity and protruded out of her nose, producing ipsilateral proptosis. CT scans of the paranasal sinuses showed an expanding mass involving all sinuses and bone lysis. The patient underwent a middle-facial degloving procedure and a heterogeneous cystic mass was removed. Initial pathology tests: little differentiated malignant neoplasm with small round cells invading fragments of the respiratory mucosa, indicative of esthesioneuroblastoma or non-Hodgkin's lymphoma. Immunohistochemistry, however, pointed to melanoma. The patient recovered well after surgery and is being followed by her oncologist for metastases. **Conclusion:** mucosal melanoma is rare, but must be included in the differential diagnosis of nasal cavity unilateral neoplasms, particularly for elderly patients presenting nasal obstruction, epistaxis, and yellowish/dark polypoid masses. Early diagnosis is utterly important for better prognosis.

PS-183

SGP: 8201

Plasmocitoma extramedular de fossa nasal: relato de caso e revisão da literatura

Author(s): Carolina Sponchiado Miura, Edwin Tamashiro, Wilma Terezinha Anselmo Lima, Fabiana Cardoso Pereira Valera, Francesca Maia Faria, Emanuel Capistrano Costa Junior

Keywords: nasal cavity, paranasal sinuses, plasmacytoma.

Head and neck extramedullary plasmocytoma is a rare malignant tumor; it accounts for 3% of plasma cells tumors. About 75% of these tumors originate in the submucosa of the upper respiratory tract and show a predilection for the nasal cavity and paranasal sinuses. This paper presents a case of nasal cavity extramedullary plasmocytoma in a 57-year-old man in whom surgical excision was initially performed followed by complementary radiotherapy.

PS-184

SGP: 8232

Antrochoanal Polyps: an analysis of 22 cases.

Author(s): Erika Pérez Iglesias, Mariana Rocha Tetilla, Edimara Maria Botelho Andrade Isola

Keywords: diagnosis, maxillary sinus, nasal polyps.

Introduction: Antrochoanal or Killian's polyp is a benign lesion of the nasal cavity. It originates in the mucosa of the maxillary sinus and grows through the maxillary ostium toward the choana, reaching up to the nasopharynx. The most common symptom is unilateral nasal obstruction. Physical examination usually reveals a unilateral mass in the middle meatus driving out to the choana. Treatment is mainly surgical. Simple avulsion of the polyp can lead to a recurrence rate of 25%. **Objective:** this is a retrospective analysis of 22 cases of Killian's polyp aimed at looking into epidemiologic, clinical, and therapy characteristics. **Materials and Methods:** A retrospective analysis was carried out on the medical records of patients diagnosed with Killian polyp treated surgically surgery at our department between 2000 and 2010. **Results:** the group had 22 patients, 10 (45.4%) males and 12 (54.6%) females. Age ranged from 4 to 61 years. All had unilateral lesions, 10 on the right and 12 on the left side. The most prevalent symptoms among the patients studied was unilateral or bilateral nasal obstruction (20). All patients underwent endoscopic surgery, and 3 were also submitted to the maxillary Caldwell-Luc procedure. **Conclusions:** In our study antrochoanal polyps were more highly prevalent among children and young adults, with a slight predominance in females. Most patients underwent polypectomy with expansion of the maxillary ostium, as an attempt to reduce the recurrence rate that was found in only 4.5% of patients.

PS-185

SGP: 8239

Ameloblastoma of the maxillary sinus

Author(s): Cátia Rodrigues Domingos, Rubiana Ferreira Sousa, Ligia Oliveira Gonçalves, Danilo Santana Rodrigues, Leandro Farias Evangelista, Isamara Simas de Oliveira, Marcela Silva Lima, Fernando Castro de Paulo, Paulo Fernando Torrin Borges Crosara, Roberto Eustáquio Santos Guimarães

Keywords: ameloblastoma, maxillary sinus, odontogenic tumors.

Odontogenic tumors are lesions originating in the epithelium, mesenchyme or both, which are also part of the biological mechanism of teeth and periodontal structure formation. Ameloblastomas can thus be classified as epithelial odontogenic tumor classically presenting a slow, invasive and expansive growth pattern. They are locally aggressive, may involve soft tissues, and present high recurrence rates. This paper presents a case of ameloblastoma in which the patient underwent tumor enucleation and bone curettage. The patient has been followed up and has not presented signs of tumor relapse.

Nasal cavity malignant melanoma

Author(s): Claudia Emi Hashimoto, Douglas Jósimo Silva Ribeiro, Lucas Uliani Lima, Glauber Tércio Almeida, Licia Sayuri Tanaka, André Armani

Keywords: head and neck neoplasms, melanoma, paranasal sinus neoplasms, radiotherapy.

Nasal mucosa and paranasal sinus primary malignant melanomas account for less than 1% of all melanomas. These tumors are aggressive and have unknown etiology. They usually produce nonspecific complaints such as nasal obstruction, rhinorrhea, and repetition epistaxis in older patients. Diagnosis is done through biopsy and immunohistochemistry is added when needed. Treatment is surgical. Radiotherapy is reserved for inoperable tumors, but success rates are low. Prognosis is poor and relapse rates are high. **Objective:** this paper describes a case of nasal mucosa malignant melanoma diagnosed and followed up at a university hospital and presents a literature review comprising other similar cases. **Case report:** MS, 82, had nasal obstruction and a tumor in the right nasal cavity, pain in the right side of her face, and repetition epistaxis. The patient sought medical attention and was requested to undergo CT examination of the sinuses. CT imaging showed an extensive solid formation inside the right nasal cavity. The patient was biopsied and an undifferentiated malignant neoplasm. Immunohistochemistry was done on the specimen for diagnostic purposes. The patient underwent a medial maxillectomy and has evolved without complications or recurrence. **Conclusion:** primary malignant melanomas of the nasal mucosa are rare and tend to be diagnosed at later stages. When diagnosed at an earlier stage, however, they offer better chances of cure through surgery and good prognosis. Clinical follow-up supported by imaging is a requirement.

Acute rhinosinusitis complications associated with concha bullosa

Author(s): Maycon Waihrich Leal Giaretton, Eduardo Campara de Oliveira, Brunno Fernando Correia Muniz de Resende, Bibiana Callegaro Fortes, Fabrício Scapini

Keywords: abscess, case reports, epidural abscess, orbital cellulitis, sinusitis.

Introduction: acute rhinosinusitis (ARS) complications have become less frequent as antibiotic therapies improved. However, even when adequate treatment is offered, anatomic disorders such as concha bullosa (CB) may be conducive to the manifestation of complications. **Objective:** this paper describes two cases of ARS complications associated with CB. **Materials and methods:** Case #1 - male 12-year-old patient with clinical findings matching left periorbital abscess, evolving for three weeks despite adequate antibiotic therapy. CT scans showed images suggestive of an extensive pre-septum abscess combined with acute sinus disease and CB. The patient underwent endoscopic surgery and evolved well. Case 2 - male 21 year-old patient with clinical signs of ARS and frontal subcutaneous abscess. CT scans showed frontal abscess and extensive CB. The patient underwent endoscopic surgery and evolved well postoperatively. **Discussion:** concha bullosa (CB) is a variation from normality with incidence rates ranging between 14-53%. There is no consensus in the literature as to the relation between CB and ARS development. **Conclusion:** although it is not possible to establish an unequivocal cause and effect association between CB and ARS, the presence of CB must be considered as an aggravating factor in the pathophysiology of ARS and its complications.

Case report: large nasal basal cell carcinoma

Author(s): Edson Junior de Melo Fernandes, Marina Neves Rebouças, Fabiano Santana Moura, Claudiney Candido Costa

Keywords: basal cell, carcinoma, nasal bone, nose neoplasms.

Introduction: malignant nose tumors are more frequently seen in males, on a 2 to 1 ratio. Prevalence rates peak between the third and fifth decade of life. Basal-cell carcinoma is one of the most common nose tumors. It is also the most common type of cancer to affect humans, and incidence has increased recently. Genetic studies indicate that basal-cell carcinomas grow slowly because the tumor's DNA has a long synthesis stage; consequently, it may take years for the tumor to double in size. **Objective:** this paper

describes the case of a basal-cell carcinoma that grew for about 10 years to deform the patient's nasal framework. **Case report:** the patient is a 62-year-old male rural worker born and resident of Ceres-GO. He is a smoker and has had a tumor in his nose growing for 10 years. His companion reported he did not accept treatment or interventions. Physical examination revealed a large nose tumor with crusts, foul odor, and significant disfiguration of the area. The patient had been biopsied and diagnosed with rhinosporidiosis, and did not consent to a new biopsy. After X-ray assessment the entire tumor was removed with safety margins. The entire nose framework had to be removed, including part of the septum bone and part of the nose bones. Pathology tests done on the specimen revealed a basal-cell carcinoma with free margins without perineural or vascular invasion. The patient is in rehab and has been referred to the oral and maxillofacial surgery service. **Conclusion:** basal-cell carcinomas are slow-growth tumors that frequently involve the nose, and may lead to significant deformity.

Fungus ball in the ethmoid sinus: a rare presentation

Author(s): Milena Magalhães de Sousa, Pablo Pinillos Marambaia, Manuella Silva Martins, Lilian Lacerda Leal, Maria Eudiane de Macêdo Marques

Keywords: ethmoid sinus, ethmoid sinusitis, mycoses.

Fungus ball is an non-invasive form of fungal infection. It is a dense extramucosal mesh of fungal hyphae in various decomposition stages. Clinical presentation is similar to chronic rhinosinusitis secondary to bacterial infection and features nasal obstruction, purulent rhinorrhea, cacosmia, and facial pain that may last for months and years. X-ray images show complete or partial sinus opacity combined with thin uneven bone walls. Usually only one sinus is involved - specifically the maxillary, followed by the sphenoid, the frontal, and rarely the ethmoid sinus. This study aims to describe a rare case of fungus ball in the ethmoid sinus.

Spontaneous nasal septum abscess

Author(s): Layla Mendes Faria, Márcia Maria de Freitas Dias Voltolini, Márcio César da Silva, Paulo Vitor Atsushi Takemoto, Edmir América Lourenço

Keywords: abscess, infection, nasal septum.

Nasal septum abscess is defined as the accumulation of pus between cartilage and its mucoperichondrium or the septum bone and its mucoperiosteum. It is a rare condition more commonly seen after nasal trauma followed by hematoma and subsequently abscess formation. Other less frequent causes are dental infection, sinusitis, nose surgery, and immune involvement. Treatment involves surgical drainage and antibiotic therapy. Early diagnosis and treatment are decisive to avoid complications and sequelae such as nose dorsum collapse. This paper aims to describe a rare case of septum abscess unrelated to trauma in an immunocompetent patient without any apparent infection.

A rare osteoblastoma in the ethmoid sinus: case report

Author(s): José Antônio Pinto, Pedro Paulo V. C. Cintra, Fabio Caracho Batista, Regina Helena Noronha Gonçalves, Rodrigo Koler, Thiago Branco Sônego

Keywords: ethmoid sinus, osteoblastoma, paranasal sinus neoplasms.

Introduction: Osteoblastoma is a benign osteoblastic tumor that occurs most often in the spine and long bones. Its incidence in the facial region, especially in the ethmoid sinus, is very low and poorly documented. **Objective:** this paper describes a case of nasoethmoid osteoblastoma treated at our institution and presents a literature review on this type of tumor. **Materials and Methods:** this is a case of an expanding mass in the nasal cavity with eye involvement. The lesion was initially excised through an endoscopic procedure, but relapsed after four months. A new intervention was performed with a combined external and endoscopic approach. The final diagnosis was osteoblastoma. **Discussion:** Osteoblastomas may be divided into two subtypes: osteoid or periosteal. Clinical course is initially silent; nasal obstruction, hyposmia, and epistaxis are the main late symptoms.

X-ray findings are nonspecific, and definitive diagnosis requires confirmation through histopathology tests. Differential diagnosis must include other tumors of the nasal cavity, and the physician should always be alert to the possibility of malignant sarcomas. **Conclusion:** External or combined external/endoscopic approaches are the treatment of choice, and provide the best access to the tumor.

PS-192

SGP: 8273

Nasal septum abscess in a cocaine user

Author(s): Flavia Araujo Barroso Pereira, Maria Isabel dos Santos Beiler, Patricia Lazzetti Brentan, Ana Cristina da Costa Martins, Jair de Carvalho e Castro

Keywords: abscess, cocaine, nasal septum.

Nasal Septum abscess is a rare condition that involves mostly the anterior portion of the septum and is frequently associated with trauma. This paper describes the case of a 25-year-old female cocaine user who sought care at the SCMRJ ENT service. The patient reported that she was experiencing acute nasal obstruction, nose pain, pain on the right side of her face, thickened whitish rhinorrhea, and minor epistaxis for the past seven days after snorting massive amounts of cocaine. An abscess was seen in her right nasal cavity and the patient was offered drainage followed by placement of a Penrose drain and bilateral nasal packing. **Objective:** this paper aims to describe a case of nasal septum abscess seen at the SCMRJ ENT service. **Conclusion:** nasal septum abscess must be considered as a possibility for all patients with acute nasal obstruction. Treatment is done by making an incision and then draining the abscess as soon as a diagnosis is made in order to avoid further complications, as the septum cartilage is an important part of the nasal framework.

PS-193

SGP: 8278

Frontal sinus mucocele combined with upper eyelid abscess

Author(s): Jane Maria Paulino, Marcela Estrela Tavares, Raissa Vargas Felici, Anna Milena Barreto Ferreira Fraga, Fausto Antônio de Paula Junior, Paola Scotoni Levy, Mirella Tabachi Vallorini

Keywords: abscess, frontal sinus, mucocele.

Mucocele develops after the ostia are obstructed, grows slowly inside the paranasal sinuses, expands and erodes adjacent bone structures. Sinus drainage may be obstructed as a result of inflammation, neoplasms, surgery, and trauma. The frontal sinus is the one most frequently affected, but mucocele has been described in all other sinuses. Imaging is of paramount importance for diagnosis. In this case report, given the atypical presentation, MRI scans were used to rule out other diseases such as orbital complications from rhinosinusitis and neoplasms.

PS-194

SGP: 8279

Sphenoid sinus mucocele treated endoscopically: a case report

Author(s): Cicero Matsuyama, Marcela Gouvea Oliveira, Thais Yuri Hashimoto, Ana Carolina Cardoso de Rezende, Juliana Saab De Faria, Daniele de Lima Soares

Keywords: mucocele, natural orifice endoscopic surgery, sphenoid sinus.

Mucocele is a cystic lesion that affects the sinuses. It is lined by pseudostratified epithelium composed of mucosal or purulent material, along with expansive traits and bone resorption. It grows slowly and is more common in the ethmoid and frontal sinuses, and less frequent in the maxillary and sphenoid sinuses. Symptoms may be extensive depending on the region affected, or might be presented only as headache, ophthalmic symptoms, or hyposmia. The etiology is multifactorial. CT scans are the diagnostic method of choice and, when needed, MRI may be used. Endoscopic surgery is the treatment of choice, as it is less invasive and yields good results. This paper describes the case of a patient with a sphenoid sinus mucocele treated endoscopically. The patient is evolving well after the procedure.

PS-195

SGP: 8298

Odontogenic orbital abscess.

Author(s): Raissa Vargas Felici, Ralph Silveira Dibbern, Anna Milena Barreto Ferreira Fraga, Jane Maria Paulino, Marcela Estrela Tavares, Paola Scotoni Levy, Mirella Tabachi Vallorini

Keywords: abscess, orbital cellulitis, sinusitis.

Introduction: most odontogenic infections enroll a wide range of microorganisms present in the gingival sulcus. Orbital disease is the most frequent, with prevalence peaks among children and young people. Orbital abscesses left undiagnosed and untreated may lead to irreversible eye disorders. **Case report:** a 19-year-old male patient had edema and hyperemia of the right upper eyelid for two days. He complained of a toothache now established for two weeks. Physical examination showed he had a dental abscess and purulent secretion in the right nasal cavity. The patient had no eye involvement. He was hospitalized, given antibiotics and had CT scans of the face and orbit done. The oral maxillofacial, ENT and ophthalmic care teams were called to see the patient. CT scans showed opacification in the right anterior maxillary ethmoid sinus, and fluid in the lateral-superior portion of the right orbit. **Discussion:** infection may propagate into the orbit cavity by two different paths: the venous system or by contiguity. Venous propagation is more common as the ophthalmic venous system has no valves. Treatment usually requires hospitalization, multidisciplinary assessment, and IV antibiotics. Surgery is required for patients failing to respond to early clinical therapy. **Closing remarks:** the abscess was located in the lateral-superior portion of the orbit, thus making it more difficult to drain the eye nasally through the lamina papyracea. The disease gave in only after the abscess was drained through the oral, sinonasal, and external ocular approaches.

PS-196

SGP: 8304

Immunotherapy in patients over 55 years. Results and literature review

Author(s): Eduardo Baptistella, Sergio Maniglia, Diego Malucelli, Daniel Rispoli, Thanara Pruner da Silva, Renata Vecentin Becker, Stephanie Saab, Gustavo Sela

Keywords: elderly, immunotherapy, rhinitis.

Introduction: as we age, our immune systems undergo a series of morphologic and functional changes. We reach our immune peak during puberty, and see our immune capabilities decay gradually from then on. **Materials and methods:** this study looked into 104 charts of patients aged over 55 seen at our institution between June 2009 and July 2010. Patients with allergy-related complaints were screened through interview, physical examination, and ENT examination; then they were submitted to a skin test for mites before and after a specific 1-year course of sublingual immunotherapy. Cutaneous response was graded as none, mild, moderate, or severe. **Results:** before treatment 42 patients were graded as severe and 62 as moderate, adding to 59.6% of all assessed patients. After specific immunotherapy, 40 (38.4%) patients had their cutaneous response graded as none, 37 (35.6%) as mild, 19 (18.3%) as moderate, and 8 (7.7%) as severe. **Conclusion:** immunotherapy, a de-sensitization technique, is indicated in special circumstances in which patients cannot avoid exposure to allergens or do not respond to drug therapy. Specific immunotherapy used to treat allergic rhinitis in elderly patients was effective and did not introduce side effects. Improvements could be observed in the skin test scores.

PS-197

SGP: 8306

Nasal Lipoma: a case report

Author(s): Godofredo Campos Borges, Jose Jarjura Jorge Junior, Fabricio Parra Brito Oliveira, Maria Cecilia Ferro, Henrique Pedro Magoga Filho, Noelle Kistemarcker do Nascimento Bueno

Keywords: lipoma, maxillary sinusitis, paranasal sinuses.

Introduction: Lipomas are the most common benign soft tissue tumors in adults. Head and neck lipomas account for approximately 13% of all lipo-

mas. They rarely occur in the sinonasal tract. Only a few cases have been reported to date. **Objective:** this paper describes a case of an adult patient diagnosed with a nasal lipoma. **Discussion:** Lipomas are made of mature fat cells, without cell atypia and are by far the most common mesenchymal neoplasms. The most common symptoms in patients with tumors in the nasal cavities or paranasal sinuses are bilateral nasal obstruction, facial pain, posterior nasal discharge and epistaxis. Differential diagnosis of tumors in these sites often includes nasal polyps, osteoma, hemangioma, papilloma, angiofibroma. **Conclusion:** This case shows that even though lipomas are extremely rare in the nasal cavity and paranasal sinus, they should be considered in the differential diagnosis of tumors.

PS-198

SGP: 8315

Five minute turbinectomy: a new approach to turbinate surgery

Author(s): Camila Corrêa Tabajara, Renato Roithmann, Rafael Rossel Malinsky, Claudia Mahfuz Martini

Keywords: nasal cavity, nasal mucosa, nasal obstruction, natural orifice endoscopic surgery, turbinates.

Chronic nasal obstruction is a common occurrence in the adult population. Turbinate hypertrophy - bony and mucosal - is one of its defined causes. Various approaches have been described to surgically manage the turbinates, but none has been elected as the golden standard. We have developed a fast and easy approach - when compared to other established procedures - to reduce the risk of intraoperative bleeding, need to pack the nose, crust formation, and effectively mitigate nasal obstruction symptoms. The study is still in progress and this paper aims to describe the first six cases done under controlled postoperative monitoring. Our preliminary results have shown a high degree of patient satisfaction in terms of improvement of symptoms. Additionally, the procedure has yielded low morbidity rates as there is no need for nose packing and less crust formation.

PS-199

SGP: 8319

A study on the complications after septoplasty in an ENT service

Author(s): Gabriel de Castro Figueiredo, Antonio Issa, Pedro Ivo Antoniazzi Paulin, Ana Cláudia Dias de Oliveira

Keywords: epistaxis, hematoma, infection, nasal septum.

Introduction: septoplasty is a procedure aimed at repairing deviated nasal septa. Various surgical techniques are used in septoplasty, each posing its pros and cons. The purpose of septoplasty is to provide functional improvement without altering other aspects of the nose's physiology. **Objective:** this paper aims to analyze the complications arising after septoplasty at an ENT service in Ribeirão Preto. **Materials and methods:** this is a cross-sectional study done with 157 septoplasty patients submitted to inferior turbinate surgery (92 males and 65 females with ages ranging between 16 and 54 years). Patients were under general anesthesia and intubated. Cottle's approach was chosen. **Results:** complications were bleeding (3.18%), septum hematoma (1.9%), infection (3.82%), synechia (1.27%) and septum perforation (2.54%); **Conclusion:** although nasal packing and nasal splint were not used, there was a low rate of complications - within the rates reported in the literature. Pre and postoperative follow-up is important, as complications may negatively impact the outcome of surgery. Complications must be treated promptly as they appear.

PS-200

SGP: 8324

Sinonasal myiasis

Author(s): Gabriel de Castro Figueiredo, Antonio Issa, Pedro Ivo Antoniazzi Paulin, Ana Cláudia Dias de Oliveira

Keywords: leprosy, myiasis, paranasal sinuses.

Introduction: Myiasis is the infestation of hosts by dipteran larvae, usually causing a desperate situation for the patient. It is related to hygiene, sanitation and sewage, usually affecting older people. **Case:** A 70-year-old leprosy patient presenting with nasal myiasis, which was managed clinically and surgically. **Conclusion:** treatment is successful when medication and surgery are associated. In this case, the larvae were not resistant to ivermectin. Our treatment priority was to ensure patient wellbeing and remove the larvae.

PS-201

SGP: 8325

Lacrimal gland tumor - case report

Author(s): Marcos Mocellin, Gyl Henrique Albrecht Ramos, Maria Theresa Costa Ramos de Oliveira, Luiz Guilherme Patrial, Luiz Henrique Schuch, Luiza Rodrigues Caffarate, Renier Ykeda Barreto

Keywords: adenoma, adenoma, lacrimal apparatus, pleomorphic.

Benign tumors of the lacrimal fossa are rare and have a controversial management. Most are composed of lacrimal gland adenomas, which must be excised completely due to the risk of recurrence and malignant transformation. We present a case of a patient with a tumor in the lacrimal gland fossa with clinical and radiological features compatible with lacrimal gland pleomorphic adenoma.

PS-202

SGP: 8326

Fronto-choanal polyp: diagnosis and treatment

Author(s): Isabele Favoretto Canas Peccini, Ana Cláudia Ghiraldi Alves, Sílvia Carolina Almeida Sandes, Fábio Tadeu Moura Lorenzetti

Keywords: frontal sinus, nasal obstruction, nasal polyps.

Introduction: Choanal polyps were first described in 1763 by Palfyn; however, in 1906 Killian made a more detailed description of the subject. Kubo (1909) and Van Alyea (1956) confirmed the intrasinus origin of choanal polyps. Fronto-choanal polyps come from the frontal sinus and extends into the nasopharynx. These lesions are rare and usually diagnosed by endoscopy and CT scan. **3. Goal:** to report on a rare case of a fronto-choanal nasal polyp. **Case report:** TP, 58 years old, smoker, complains primarily of a right nasal obstruction for 3 months, accompanied by hyposmia, daily snoring and sporadic apneas reported by the wife. Upon fiberoptic nasolaryngoscopy we identified a small polypoid degeneration in the left middle meatus and a large polypoid tissue originating from the right middle meatus projecting to the cavum with probable origin in the frontal recess. A CT scan report using the Lund-Mackay classification, assigned a total score of zero for the left paranasal sinuses and 4 on the right side (1 = maxillary, 1 = frontal and 2 = ostiomeatal complex). The patient was submitted to endonasal sinusotomy of the affected sinuses, with polypectomy, sectorial septoplasty and inferior nasal turbinate cauterization. At surgery we noticed that the polyp came from the right frontal sinus. The specimen was sent for pathology evaluation, and the finding was of inflammatory nasal polyp. **Conclusion:** The treatment of fronto-choanal polyps by means of endonasal endoscopic surgery is effective, because it allows complete removal of the polyp all the way from its origin in the frontal sinus, with minimal changes caused to the anatomy and physiology of the region.

PS-203

SGP: 8327

Inferior nasal concha capillary hemangioma in a child - case report

Author(s): Danielle Candia Barra, Ludmila Morgado Santos, Vanessa Ramos Pires Dinarte, Kazue Kobari, Alfredo Rafael Dell'Aringa

Keywords: capillary, hemangioma, nasal cavity, turbinates.

Hemangiomas are common vascular malformations in humans and occur predominantly in the head and neck. Hemangiomas are the most common benign tumor of head and neck in children. However, the intranasal location is very rare. Diagnosis should be suspected in the presence of intermittent epistaxis, which may be associated with nasal obstruction, local pain or facial deformity. The objective is to present the case of a 10-year-old with capillary hemangioma of the inferior turbinate, its diagnosis and treatment.

PS-204

SGP: 8332

Charge Syndrome (CS): a complex diagnosis.

Author(s): Rafaela Cesario Pereira Maluf, Fúlvio Calice Ferreira, Adriano José Flávio, Edivarley Rodrigues da Costa Júnior, Fernanda Marra Martinez

Keywords: atrial, ear, external, facial paralysis, heart septal defects.

Charge Syndrome (CS): a complex diagnosis Introduction: CS is a set of congenital defects and its estimated incidence is 1/10.000 births. Diagnosis is performed according to major and minor criteria. CS results from mutations in the CHD7 gene in more than 75% of the cases. The objective is to report a case of CS and compare it with the literature showing the diversity of clinical presentations, thus contributing to its early detection. **Case Presentation:** an 8-year-old newborn with dyspnea, low O₂ saturation and cyanosis. Physical examination: congenital facial paralysis on the left, ear malformation, retrognathia, major septum deviation to the right, and micropenis. CT scan of the sinuses showed a completely closed left choana, and urinary tract ultrasonography showed left dilatation of the ureter and pyelocaliceal dilatation with dilatation and higher ureter placement into the bladder. Echocardiography showed septum defect. His karyotype had no changes. **Discussion:** The major diagnostic clues are coloboma, choanal atresia, abnormalities of the face, middle or inner ear. Minor clues are heart disease, psychomotor and/or growth retardation, delayed puberty, genitourinary anomalies and a typical phenotype. When the clinical manifestations are compatible with CS it is necessary to study the patient's karyotype, but the cost is high and only 2/3 of the tests are positive in diagnosed patients. **Conclusion:** Further research is needed to understand the complexity of the syndrome and to guide interventions, therapies and educational strategies, to provide CHARGE patients with a satisfactory quality of life.

PS-206

SGP: 8339

Superior Blepharoplasty in patient with native Brazilian traits

Author(s): Tatiana Carneiro da Cunha Almeida, Washington Luiz de Cerqueira Almeida, Artur Grinfeld, Carolina Almeida Grinfeld, Mirella Melo Metidieri, Francisco José Motta Barros de Oliveira Filho, Hugo Fernandes Santos Rodrigues

Keywords: blepharoplasty, plastic, rejuvenation, surgery.

Introduction: When it comes to facial rejuvenation surgery, superior blepharoplasty enjoyed little progress in recent years, being a relatively safe procedure, bearing satisfactory results. (1,2). However, little is published about superior blepharoplasty in patients with native-Brazilians' traits. The surgical strategy of such a procedure differs from the earlier, used in patients wishing to enhance the beauty of their look without showing signs of an aging eyelid. Thus, the purpose of this study is to describe the use of superior blepharoplasty in patients with indigenous traits. **Case Report:** A female patient, aged 25, born and raised in Feira de Santana-BA, complaining of bilateral ptosis and indigenous traits (Figure 1). We indicated superior blepharoplasty using the conventional technique, in which the surgeon captures the excess skin with a delicate forceps; proceeds to anesthesia injection with adrenaline. The skin is dissected off the underlying musculature with the aid of a scalpel and hemostasis is performed with a bipolar electrocautery. We proceeded to resect of a strip of preseptal orbicularis muscle using fine-tipped scissors. The suture is intradermal using a 5-0 nonabsorbable wire (Figure 2). **Conclusion:** The aesthetic goal of upper blepharoplasty in a patient with indigenous traits differs from the traditional procedure because it does not aim for eye and facial rejuvenation. On the contrary, it is intended to provide the patient with a more beautiful ocular appearance, by raising the upper eyelid fold so that the pre-tarsal skin becomes more apparent.

PS-207

SGP: 8340

Tomography Profile According to the Lund-Mackay Score for Patients seen at the ENT Clinic

Author(s): Ivan de Picoli Dantas, Hardlynn Wesley Saunders Rocha Tavares, Ana Cecília Cavalcante de Macedo, Carlos Eduardo Monteiro Zappellini, Fábio Silva Alves, Luana Gonçalves Oliveira, Luciana Campoy Giro Basile

Keywords: prevalence, sinusitis, tomography.

Introduction: Chronic Rhinosinusitis (CRS) affects thousands of individuals worldwide, resulting in high costs. There are several guidelines for its diagnosis, proposed by the American Academy of Otolaryngology, which as currently used. CT scan is an important complementary exam in the clinical and surgical management of patients with CRS. The Lund-Mackay tomographic staging system is a leading scoring method used to assess the severity of the disease and assist in therapeutic decisions. Thus, this study aims to evaluate the tomographic profile according to the Lund-Mackay score for patients seen in the rhinology clinic of Santa Casa de Campinas.

Materials and methods: Computed tomography scans of 20 patients treated at the rhinology clinic of Santa Casa de Campinas during April-May 2011 were staged according to the Lund-Mackay system. **Results:** A high average score was found, with 80% of the values being above 4. **Discussion:** The authors describe the use of the Lund-Mackay staging system in the evaluation of patients with CRS. **Conclusion:** The findings in this study revealed a prevalence of high Lund-Mackay scores, with 80% of the cases above 4, these values were considered pathological for this method of assessment.

PS-208

SGP: 8344

Traumatic CSF Fistula - case report

Author(s): Paulo Roberto Lazarini, André Fanhani Lopes, Marcelo Scapuccini, Fernão Beviláqua Alves da Costa, Cristiane Sayuri Koza de Jesus

Keywords: case reports, cerebrospinal fluid rhinorrhea, review.

CSF rhinorrhea occurs because of a fistula between the meninges, in special, the dura mater and the skeletal structures of the skull. It can be traumatic or non-traumatic, the former is responsible for most of the cases. Its suspicion is corroborated by clinical and laboratory findings, such as dosing beta 2 transferrin in the nasal fluid; and radiological exams such as high-resolution CT, MRI or MR/CT cisternography scans. Most of the fistulas resolve spontaneously, and the surgical treatment depends on the increase in the risk of meningitis. Repairs can be done by the extracranial or intracranial approach. Endoscopy is the most widely used. The purpose of this paper is to describe a case of traumatic cerebrospinal fluid (CSF) rhinorrhea and to revise the literature about it.

PS-209

SGP: 8345

Correction of cerebrospinal fluid rhinorrhea by nasal endoscopy, using intrathecal fluorescein

Author(s): Renata Farias de Santana, Renato Telles de Souza, Alex de Santana Vidaurre, Ângelo Rafael Cunha de Azevedo, Luiz Carlos Nadaf de Lima, Márcia dos Santos da Silva, Marcos Antônio Fernandes

Keywords: cerebrospinal fluid rhinorrhea, endoscopy, nose.

The abstract was not sent.

PS-210

SGP: 8358

Ethmoid mucocele alone: a case report

Author(s): DCarolina Cincurá Barreto, Lara Cavalcanti Almeida, Marcus Miranda Lessa, Clara Monica Figueiredo de Lima, Raquel Crisostomo Lima Verde

Keywords: endoscopy, ethmoid sinus, mucocele.

Introduction: Mucocele is a benign cystic lesion, lined by pseudostratified respiratory epithelium that may affect any paranasal sinus. Ethmoidal mucocele is usually associated with frontal mucocele or less frequently to sphenoid mucocele. Isolated ethmoidal mucocele is a rare event. The aim of this study is to report a case of mucocele with involvement of the anterior ethmoid sinus, with emphasis on clinical, radiological and therapeutic approach. **Case presentation:** Female patient, 26 years old, white, business management, born and raised in Salvador - Bahia, asymptomatic, referred to otorhinolaryngology evaluation after the incidental finding of isolated ethmoidal mucocele, in computed tomography (CT) of the temporomandibular joint. The patient had no history of head trauma, malignancy or previous surgery. CT scan of the paranasal sinuses showed total filling of the left anterior ethmoid cell by isodense material, which has an inflating aspect, bone remodeling, and some bulging of the orbital medial wall. We can clearly see a discontinuity of the adjacent lamina papyracea, but without signs of invasion of the orbital cavity by the ethmoid cell material. The patient underwent endoscopic sinus surgery for marsupialization and drainage of ethmoidal mucocele when ran uneventfully. **Conclusion:** Isolated ethmoidal mucocele is a rare condition that can be diagnosed in asymptomatic patients and cause intracranial and orbital complications. Marsupialization with drainage of the nasal mucocele is a safe and effective therapeutic approach.

Columella extended graft: case report

Author(s): Tatiana Carneiro da Cunha Almeida, Washington Luiz de Cerqueira Almeida, Artur Grinfeld, Carolina Almeida Grinfeld, Mirella Melo Metidieri

Keywords: nose, plastic, rhinoplasty, surgery.

Introduction: The extended columellar graft is a type of structural graft used in endonasal rhinoplasty that combines the attributes of columella support and tip graft. It is used to promote the projection and contour of the nasal tip. Our goal with this study was to evaluate the aesthetic outcome of patients undergoing rhinoplasty using this type of nasal graft. **Case report:** A female patient, aged 45, from Curitiba - PR, complaining of a large nose and nasal tip ptosis, which worsened when she smiled. Through intercartilaginous and marginal incisions, we resected part of the nasal septum to use as a graft, measuring 2 cm in length and 8 mm wide. The graft was positioned through a marginal incision, with the base toward the nasion and the apex pointing to the nasal tip. Thus, the graft was placed over the nasal dorsum. The patient recovered from surgery without complications, now with nasal tip rotation and projection, showing a significant improvement in aesthetics and facial harmony. **Comments:** The extended columellar graft is a reliable method to provide projection and contour for the nasal tip. The successful use of the graft requires accurate diagnosis and technique.

Sliced cartilage graft in rhinoplasty: case report

Author(s): Tatiana Carneiro da Cunha Almeida, Washington Luiz de Cerqueira Almeida, Artur Grinfeld, Carolina Almeida Grinfeld, Francisco José Motta Barros de Oliveira Filho

Keywords: cartilage, nose, rhinoplasty.

Introduction: nose surgery using sliced cartilage grafts became popular 70 years ago, but it was replaced by the use of silicone after the Second World War. In 1968, some authors used cartilage graft covered with sliced fascia to facilitate its placement. In 2000, another author made use of Surgicel to cover the sliced cartilage, but observed, after a few months, a large number of cases with graft resorption, besides the need for another surgery. Our goal with this study was to evaluate the aesthetic outcome of patients undergoing rhinoplasty using this type of nasal graft. **Case report:** A female patient, years old, from, complaining of Through a 3cm incision above the ear we removed a piece of temporal fascia (4X4 cm) for grafting purposes. The nasal septum cartilage was removed, sliced and packed into a syringe, then wrapped by fascia. We sutured it with catgut 4-0 wire, creating a type of "bean bag". The graft is then placed under the nasal dorsum and we suture the distal end. The patient recovered postoperatively without complications, showing an increase in nasal dorsum with significant improvement in facial aesthetics and facial harmony. **Comments:** sliced cartilage grafts re-emerged as a viable method for nasal reconstruction in both primary and secondary rhinoplasty. Surgicel incites inflammatory response with consequent graft absorption, whereas the fascia reduces the inflammatory response, keeping the cartilage healthy.

Maxillary mucocele: the case of a young patient

Author(s): Danielle Sofia da Silva, Daniel Buarque Tenório, Marcos Rossiter de Melo Costa, João Paulo Lins Tenório, Igor Gomes Padilha, Bruno Gomes Padilha, Lucas de Pádua Gomes de Farias

Keywords: endoscopy, maxillary sinus, mucocele.

Mucoceles are benign lesions with a potential for local destruction. Considering the paranasal sinuses, it is rare in the maxillary. This paper describes a case of maxillary mucocele in a young patient and the treatment.

Augmentation rhinoplasty with autogenous skull graft: use of computed tomography in late postoperative evaluation

Author(s): Lisandra Megumi Arima, Leandro Castro Velasco, Romualdo Suzano Louzeiro Tiago

Keywords: autologous, parietal bone, rhinoplasty, transplantation.

Introduction: the nasal dorsum is relevant both in its functional and aesthetic aspects. Nasal reconstruction can be performed using the most varied kinds of materials, which may be classified as: allogenic or homogeneous; heterogeneous; alloplastic; and autogenous. **Aim:** to describe a case of rhinoplasty to enlarge the nose in which we used skull bone graft, and to show the use of CT scan as a tool to check graft position after surgery. **Case report:** VAR, female, black, 45 years of age, came to our medical service because she felt uncomfortable with her flattened and round tipped nose. She was referred to rhinoplasty to increase her nose by using skull bone graft. Computerized Tomography with tridimensional reconstruction showed that the back portion of the graft had subsequently shifted, which caused a slender depression at the lower 1/3 of her nasal dorsum. **Final comments:** skull bone grafts are indicated in rhinoplasty to enlarge the nose, and are preferable to other grafts to reconstruct the nasal bony dorsum. In the long-term follow-up, computerized tomography with tridimensional reconstruction of the facial bones enables physicians to check the bone graft position and it also helps in patient education.

Orbital floor fracture - reconstruction with poly-L-lactic/poly-L-glycolic acid sheet

Author(s): Pedro Simas Moraes Sarmento, Leonardo Kruschewsky, Marcos Vidal Rivas, Tatiana Novais, Epifanio José Pereira Filho, Miguel Leal Andrade Neto, Loren de Britto Nunes

Keywords: enophthalmos, facial bones, orbital fractures, orbital implants.

The complex anatomy of the bony orbit is subject to a wide array of possible types of fracture. The diagnosis and treatment of orbital fractures has always been a challenge. One simple method of categorizing orbital fractures is to break them down in: 1. fractures in which the external bony orbital rim is intact, and 2. those in which it is disrupted. The classic orbital floor blowout fracture occurs in the absence of an orbital rim fracture. Nowadays, with computed tomography scans, diagnosis and surgical planning have become much easier. Esthetic changes and functional disorders such as diplopia, distopia, enophthalmos and motility deficit can be related to these fractures. The basic objective of reconstructing an orbital defect is to restore orbital volume, function and aesthetics. To reconstruct the defect of the orbital floor, various autogenous as well as allogenic and alloplastic materials have been used with pros and cons. This case report aims to report on the treatment of post traumatic enophthalmos in a blow-out fracture, diagnosed by CT scan imaging, using poly-L-lactic/polyglycolic acid sheet through a subciliary approach for orbital floor reconstruction.

Lethal Midline Granuloma: Presentation of a clinical case

Author(s): Juliana Saab de Faria, Marcela Gouvea Oliveira, Thais Yuri Hashimoto, Adriana Rossi, Ana Margarida Bassoli Chirinea, Yuri Sister

Keywords: granuloma, lethal midline, lymphoma, palate, t-cell, wegner granulomatosis.

The authors hereby present a case of a Lethal Midline Granuloma (LMG) seen at the Otorhinolaryngology Department of the CEMA Hospital in 2011, which is being monitored after histological and histochemical confirmation, and the patient is undergoing treatment with radiotherapy and chemotherapy. The Lethal midline granuloma is a rare and aggressive disease, difficult to diagnose and bearing a poor prognosis, which should be suspected by a physician at an early stage to arrange for the appropriate therapy and to obtain a better outcome.

Traditional partial turbinectomy versus Five-minute Turbinectomy: preliminary results comparing the two techniques

Author(s): Camila Corrêa Tabajara, Renato Roithmann, Claudia Mahfuz Martini, Marina Faistauer, Tássia Alicia Marquezan Augusto

Keywords: nasal cavity, nasal mucosa, nasal obstruction, natural orifice endoscopic surgery, turbinates.

Nasal turbinates play an important role in the normal respiratory function, especially in regards of changes caused to the inhaled air. The respiratory epithelium, abundant in the inferior turbinate, is essential for maintaining normal nasal defense, to humidify, heat and filter the inhaled air. Inferior turbinate hypertrophy is a very common cause of nasal obstruction and often requires surgical treatment. Several techniques have been described for the surgical management of nasal turbinates and among them we highlight the partial turbinectomy, the turbinoplasty, the electrocautery with lateral dislocation and even total turbinectomy. The main goals of surgery should be: maximize the airway while maintaining nasal function and minimize complications. The head of the inferior nasal turbinate has a primary role in controlling trans-nasal airflow, as it regulates the flow at the nasal valve. Thus, the surgical reduction of the nasal turbinate head often significantly improves trans-nasal airflow. This study proposes a comparison between classical partial turbinectomy and the surgical reduction of the inferior turbinate head with a cutting forceps, a technique we call five-minute turbinectomy.

Endoscopic dacryocystorhinostomy: our experience and literature review

Author(s): Francis Vinicius Fontes de Lima, Mariane Barreto Brandão Martins, Ronaldo Carvalho dos Santos Júnior, Arlete Cristina Granizo Santos, Valéria Maria Prado Barreto, Eduardo Passos Fiel de Jesus, Thiago da Silva Caruca Brígido

Keywords: dacryocystitis, dacryocystorhinostomy, natural orifice endoscopic surgery.

Introduction: Obstruction of the lacrimal ways causes constant or intermittent tearing, called epiphora and it can occur at any point in its path. The treatment of this condition may be surgical and although traditionally surgeons have done the external dacryocystorhinostomy, the advent of endoscopic surgery and its improvements have meant that this is increasingly the preferred technique. **Methods:** The material in this study consisted of eight surgical cases followed between 2007 to 2011 (four years). We analyzed gender, age at surgery, dacryocystitis etiology, clinical features, number of surgeries required for the repair and follow-up. **Results:** There was a predominance of females when compared to males (7:1), their ages were between 8 and 71 years, mean of 37.8 years. With regards to etiology, five were classified as idiopathic, two were post traumatic, and one was iatrogenic. Patients were followed up for six months, on average, with symptom improvements. Only one patient with persistence of epiphora was re-operated, successfully by the external approach. **Conclusion:** Endoscopic endonasal surgery should be considered in patients with lacrimal duct obstruction, due to its high success rate, besides being a safe procedure with less morbidity and better cosmetic results.

Juvenile angiofibroma: Our 7-year experience and literature review

Author(s): Mariane Barreto Brandão Martins, Francis Vinicius Fontes de Lima, Ronaldo Carvalho dos Santos Júnior, Arlete Cristina Granizo Santos, Valéria Maria Prado Barreto, Eduardo Passos Fiel de Jesus, Carlos Alberto Barreto de Mendonça, Thiago da Silva Caruca Brígido

Keywords: angiofibroma, endoscopy, natural orifice endoscopic surgery.

Juvenile nasopharyngeal angiofibroma (NAJ) is a rare tumor. Even though it is benign, it has a great vascular component with a very aggressive behavior, due to its local invasiveness and consequent symptoms. This kind of tumor may cause epistaxis and significant nasal obstruction. NAJ is typically a disease of teenage men. Our study was approved by the Ethics

Committee, under protocol # 0114.0.107.000 -11. **Objective:** To describe the experience of the our otorhinolaryngology service in the treatment of juvenile angiofibroma considering the study of 20 cases. **Materials and methods:** We retrospectively studied 20 surgical cases. We analyzed age, gender, symptoms, stage, treatment, surgery duration, intraoperative bleeding, need to pack the nose after the procedure, hospitalization time, later and immediate complications, and recurrence. **Results:** The median age was 16 years, all males. The patients were divided according to Fisch, Andrews and Radkowski classifications. Every 20 patients were submitted to surgical treatment. The average surgery time was 120 minutes and the medium bleeding volume was 300ml. All the patients submitted to the endoscopic surgery left the Hospital one day later the procedure. 17 patients were also submitted to clamping of the external carotids and tumor embolization before surgery. **Conclusion:** The endoscopic surgery, alone or associated to other conventional techniques, seems to be safe for the treatment of angiofibromas in their different stages.

Gardner's Syndrome

Author(s): Davi Sousa Garcia, Rodrigo Nishihara Jorge, Lídio Granato

Keywords: gardner's syndrome, nasal obstruction, osteoma.

Gardner's syndrome includes adenomatous polyposis of the colon, osteoma of the skull and epidermoid cysts, with an incidence of about 1/14000 births. We present a case of a 21-year-old male patient complaining of bilateral nasal obstruction, worse in the left side, since childhood, associated to bulging of the nasal pyramid and hyposmia. He had already been submitted to resection of a mandibular osteoma and lumbar cysts, subtotal colectomy with ileorectal anastomosis. On physical examination we noticed bulging of the nasal dorsum, jaw and nasal floor. Paranasal sinus CT showed osteoma in many topographies. The otorhinolaryngologist plays an important role, considering that early diagnosis of this syndrome is vital for the survival of the patient. Indeed, malignant degeneration of colon polyps occurs in 100% of the patients.

Septoplasty and inferior turbinectomy complications in a private hospital

Author(s): Fernanda Madeiro Leite Viana, Ulisses José Ribeiro, Viviane Nunes da Costa, Leonardo Radúnz Vieira, Priscila Roldan

acquired, epistaxis, nose deformities, nose diseases.

Introduction: Septoplasty is a common procedure in ENT practice, and its complications are rare, the most common are: adhesion, epistaxis, hematoma, abscess and septal perforation. **Objective:** To evaluate the incidence of septoplasty complications in a private hospital that has a residency program in otolaryngology. **Materials and methods:** We conducted a retrospective study from April, 2004 to April, 2011 covering 1564 patients undergoing septoplasty in Our Lady of Lourdes Hospital in Sao Paulo. Of these, 33 patients underwent further intervention because of complications. **Results:** All patients underwent the first surgical intervention received immediate nasal packing, lasting from 6 to 12 hours, a splint and antibiotic prophylaxis with amoxicillin. The average age of patients undergoing second surgery was 29 years, they were 20 males and 13 females. In these, tranexamic acid was used in cases of epistaxis and change of antibiotic therapy in cases of septal abscess. Of the second procedures carried out, 15 were done to remove adhesions, 12 ligations of the sphenopalatine artery, we drained four septal abscesses, corrected one septal perforation and in one patient we did both procedures. **Discussion:** The incidence of septoplasty and inferior turbinectomy complications remains low. The use of a glove finger packing is advocated in our practice, providing less morbidity. Prophylactic antibiotic therapy is used in our service because infection is a common complication. The intranasal splint is also routine for 4 to 7 days and with it we noticed a low rate of hematomas and synechia. **Conclusion:** The incidence of complications after septoplasty remains rare. The postoperative measures used in our service help us have a low complication rate.

Balloon dilatation of the sphenoid sinus ostium in a patient with fungus infection and visual deficit

Author(s): João Paulo Saraiva Abreu, Moises Ximenes Feijão, Isabelle Jataí, Arthur Chaves Gomes Bastos, Daniel Nogueira Cruz, João Flávio Nogueira Júnior

Keywords: immunocompromised host, natural orifice endoscopic surgery, sinusitis, sphenoid sinusitis.

Immunocompromised patients with sinusitis represent a challenge to otolaryngologists. These patients are more vulnerable to potentially serious complications such as meningitis, brain abscess, and others. We present a case and the treatment of an immunocompromised patient who presented an acute right side visual deficit and underwent a balloon sinuplasty for the management of a fungal sinusitis at the right sphenoid sinus, discussing the outcome and follow-up. Learning from this case could help those group of immunocompromised patients with sinusitis with a less invasive treatment, one that potentially can bring more benefits than ESS with traditional instruments. Also, the use of a flexible endoscope to look inside a sinus without having to remove any tissue can bring future implications, such as the development of new instruments and new techniques for ESS.

Bilateral congenital choanal atresia: a 13-year-old patient

Author(s): Yuri Sister, Franciane Regina Vargas, Andrea Gomes Carreira, Daniele de Lima Soare, Guilherme Salomon, Marcio Monteiro Aquino

Keywords: choanal atresia, endoscopy, natural orifice endoscopic surgery.

Objective: To report a case of 13-year-old with bilateral congenital choanal atresia. **Case report:** A male, 13-year-old patient, with bilateral nasal obstruction, anosmia, hyaline rhinorrhea and nasal voice since childhood. Physical examination: pale and atrophic turbinates, hyaline rhinorrhea and high palate. Nasal fibroscopy revealed bilateral choanal atresia. We performed CT of the paranasal sinuses which confirmed the diagnosis, showing a membranous bone composition. Subjected to surgical endoscopy, we made a mucosal flap. The patient did well postoperatively. **Conclusion:** Bilateral choanal atresia is a rare condition and is usually detected at birth due to exuberant symptoms, and it should be surgically corrected as soon as detected, because it is a potentially lethal condition and it leaves facial and psychological sequelae in the development of children. The patient described here is an unusual case due to the late diagnosis, and it causes an irreversible sequelae in facial development brought about by mouth breathing.

Paramedian forehead flap for nasal tip reconstruction: case report

Author(s): Thiago Motta Oliveira, Miriam Cabral Moreira de Castro, Renato Castro Alves de Sousa, Vinicius Antunes Freitas, André Gustavo de Paula Alvarenga, Christiano Orlandi Silva

Keywords: esthetics, nose neoplasms, surgical flaps.

Objective: To present a case of nasal reconstruction after recurrence of basal cell carcinoma of the tip of the nose, using a paramedian frontal flap. **Case report:** OASB, 84, retired female, born in Ponte Nova-MG. Had a history of basal cell carcinoma of the nose, she had already been submitted to three surgeries, and 6 months ago she developed a suspicious lesion. Another biopsy was performed which confirmed local recurrence. We operated her, removing the tumor area, adjacent skin and cartilage fragments from the right wing of the nose. The surgical specimen was sent for frozen section examination and the lateral margins and the deep margin were free from disease. We then made the paramedian frontal flap at the base of the pedicle, measuring 1.5 cm wide and 3 cm wide in the region covering the tip of the nose. We complemented the nose wing using ear cartilage to fill up the missing areas. After 3 weeks a new surgical procedure was performed for resecting the pedicle graft and close the area. Today, the patient is being followed up in the outpatient clinic, with excellent cosmetic results and without local recurrence. **Conclusion:** nasal reconstruction aims at restoring aesthetics as close as possible to the natural organ. That said, because of its color and texture, the skin of the forehead is the best donor site for flaps used in nasal reconstruction.

Nasolabial Cyst: a case report

Author(s): Vivian Angerami Gonzalez, Camila Kemen Candalafa, Erik Xavier da Silva Pinto, Ana Margarida Baccioli Chirinea, Maria Carmela Cundari Boccalini

Keywords: cyst fluid, cysts, odontogenic cysts.

The nasolabial cyst is a rare condition that develops under the wing of the nose, of unknown cause. This lesion grows slowly and it does not reach a precise size (1.5 - 3 cm), it clinically looks like a floating tumor in the nasolabial groove, that causes a bulging in the region. The diagnosis can be made clinically only, and image exams may help, if needed. The present study shows a 30-year-old female patient that complained about a tumor around the left wing of the nose and the features suggested a nasolabial cyst. The CT scan shows a tumor as dense as soft tissue in the left region around the nose measuring about 5 cm of diameter and with well defined borders and clear, with an apparent cystic content inside. So, after the diagnosis of nasolabial cyst, the patient was submitted to surgical resection and the histology exam confirmed the diagnosis.

Septoplasty: postoperative morbidity, complications and patient satisfaction

Author(s): Francisco Grocoske, Cezar Augusto Sarraff Berger, Marcos Mocellin, Heloisa Nardi Koerner, Maria Theresa Costa Ramos de Oliveira

Keywords: nasal cartilages, nasal obstruction, nasal septum, turbinates.

Introduction: The most conservative septoplasty techniques tend to minimize complications. Few studies have assessed postoperative (PO) complaints and patient satisfaction with the surgery. Such information will enable focusing on revision or added procedures to optimize results. **Objectives:** Identify and evaluate the more frequent postoperative complications and the overall satisfaction of septoplasty patients. **Methods:** Prospective study of 34 patients undergoing septoplasty in the Otolaryngology Dept. of Hospital de Clínicas de UFPR and Hospital IPO. The evaluation was done by collecting data in a specific protocol on the day of surgery, 2nd, 7th and 30th day PO. **Results:** In the second day PO, the most important findings were nasal obstruction, runny nose and bleeding. On a scale of 1 to 10, the average score for pain was 4.07. On the 7th day PO, there was a decrease in the previous complaints, but increased infection and suture dehiscence. The average score for pain was 2.16. On the 30th day PO, there wasn't septal perforation, synechia or hyposmia, but 26% of residual deviation. Pain score was 1.70. The average score assigned to satisfaction with the outcome of surgery was 8.35. **Conclusion:** We saw in our study that immediate PO complications decreased significantly as time passed, and those that still remained did not affect the overall outcome of the surgery, as shown by patient satisfaction scores.

Unilateral choanal atresia in Adult: Report of Two Cases

Author(s): Isabele Favoretto Canas Peccini, Ana Cláudia Ghiraldi Alves, Sílvia Carolina Almeida Sandes, Silvio Pinheiro M. Bertoz, Fábio Tadeu Moura Lorenzetti

Keywords: choanal atresia, nasal obstruction, nasopharynx.

Objective: To report two cases of adult patients diagnosed with unilateral choanal atresia. **Case Report:** Case 1: NOSRM, 21, in the first visit complains that she had never breathed through her right nasal cavity, she reports mouth breathing and snoring, with a choking-sensation dyspnea on strenuous exertion, abundant rhinorrhea, especially on the right side. Upon rhinoscopy we noticed an obstructive septal deviation to the left with nasal pyramid deviated sideways, asymmetric hypertrophy of the inferior turbinates (4+/4 on the right side and 1+/4+ on the left), and right-side only mucosal pallor 3+/4+. Upon endoscopy we visualized right choanal stenosis and large amounts of hyaline secretion. On CT scan of the sinuses we identified a bony choanal atresia on the right. We corrected the choanal atresia through a transnasal approach, performed a septoplasty and turbinectomy on the right side only; and after one year the patient remained asymptomatic. Case 2: DA, 22, came to our service with complaints of right nasal obstruction

since birth, accompanied by snoring, constant runny nose, especially on the right side, and nasal itching. Upon rhinoscopy, hyaline secretion was observed only in the right nasal cavity. On endoscopy we noticed a mucous secretion and stenosis of the right choana. Computed tomography of the paranasal sinuses showed obstruction of the right nasal cavity. We planned and corrected the atresia endoscopically; and two years after surgery the patient reports an improvement in her symptoms. **Conclusion:** Choanal atresia in older children, adolescents or adults is relatively rare. Surgical treatment for correction of this pathology usually yields good results.

PS-230

SGP: 8429

Nasal splint left for 10 years: case report and literature review

Author(s): Rodrigo Batista Maia, Julians Feitosa Coelho, Luiz Eduardo Levy Vicentin, Eduardo Landini Lutaif Dolci

Keywords: nasal obstruction, nasal septum, rhinitis, sinusitis, splints.

Introduction: We report a patient who had a nasal splint for 10 years after surgical correction of a nasal septum fracture. **Case report:** A 49 years-old patient reported fetid rhinorrhea, yellowish, persistent, also anosmia, bilateral and fixed nasal obstruction refractory to medical treatment, lasting for six years ago, with previous history of surgical treatment of a nasal fracture 10 years in the past. After splint removal, there was total resolution of her sinus problems. **Discussion:** We looked for publications on the benefits of using the splint in septoplasty, its complications and comorbidities. The use of the nasal septoplasty splint, though widespread, has no scientific evidence to support it. We emphasize that there is no description in literature of any splint left for such an extended period of time.

PS-231

SGP: 8435

Ischemic complications after embolization and surgical treatment of a juvenile nasopharyngeal angiofibroma - case report

Author(s): Nilvano Alves de Andrade, Adriano Santana Fonseca, Marcele Ramos Brandão, Renato Mariano Nunes, Adriana Burgos Senna

Keywords: angiofibroma, embolization, nose neoplasia, therapeutic.

Juvenile nasopharyngeal angiofibroma (JNA) is a rare, vascularized and locally invasive tumor, typically affecting male adolescents. The treatment of choice is surgery and embolization is a means to reduce bleeding and surgical time. This study aims at reporting two cases of juvenile nasopharyngeal angiofibroma stage IV of Fish, which were submitted to embolization in the preoperative period and the patient developed wound dehiscence, ischemia and tissue necrosis in the postoperative period. The vascular embolization could justify a hypoperfusion, impairing surgical healing and causing ischemia and tissue necrosis. Despite the systematic use of embolization, this procedure is not free of complications and can bring about serious problems, increasing the morbidity of these patients.

PS-232

SGP: 8437

Endonasal resection of a nasopharyngeal tumor: plasmacytoma

Author(s): Fábio Rauen Martinelli, Alexandre Felippu Neto, Danilo Nunes Gosling, Bernard Socol Beraldin, Alexandre Colombini Pellegrinelli Silva, Nicole Dezordi Magarinos

Keywords: multiple myeloma, nasopharyngeal neoplasms, plasmacytoma.

Extramedullary plasmacytoma is a rare disease, more common in men and its incidence increases with age. The main site of attack is the upper aerodigestive tract. The patient's main complaints are: progressive nasal obstruction, rhinorrhea and epistaxis. Histopathologically, it presents plasma cell infiltration of various maturities and produces monoclonal immunoglobulin outside the bone marrow. The diagnosis is based on the finding of a monoclonal plasma cell tumor excluding extramedullary multiple myeloma. Due to the radiosensitivity of the tumor, radiotherapy is the mainstay in therapy, and chemotherapy remains controversial. Although the surgical approach is controversial because of the difficulty of access concerning the local anatomy and the complexity of the region, we find that total resection with subsequent radiotherapy to be the best option.

PS-234

SGP: 8441

Myxoid neurofibroma of the maxillary branch of the trigeminal nerve: differential diagnosis of tumors of the pterygopalatine space

Author(s): Roger da Costa Scalco, Geórgia Patrícia Novak Pinheiro de Freitas, Antonio Luís de Lima Carvalho, Ana Maria Almeida de Sousa, Henrique Faria Ramos

Keywords: neurofibroma, pterygopalatine fossa, trigeminal nerve.

Neurofibromas in the trigeminal nerve are rare. The purpose of this report is to describe the clinical and imaging findings in a patient with neurofibroma in the maxillary branch of the fifth cranial nerve. A 67 year-old, female, with pain complaints and altered sensation in the head and neck area for a long time, underwent diagnostic investigation and surgical treatment, which progressed to anesthesia in the territory of V2 and traces of a tumor in the orbital apex. Despite being uncommon, the otolaryngologist should consider the diagnosis of a neurofibroma in lesions in the paranasal sinuses and pterygopalatine fossa, based on its particularities in the imaging and pathology studies.

PS-235

SGP: 8442

Treatment of epistaxis on a patient with the rendu-osler-weber syndrome: case report

Author(s): Heloisa Nardi Koerner, Renata Mainardes Sawczuk, Juliana Ben-thien Cavichiolo, Maria Theresa Costa Ramos de Oliveira, Rafael Ferri Martins, Fernanda Tan Miyamura

Keywords: epistaxis, hemorrhage, nasal mucosa.

Introduction: The Rendu-Osler-Weber syndrome is a rare disease of autosomal dominant inheritance, characterized by recurrent epistaxis, telangiectasia multiple, visceral lesions and a positive family history. **Case report:** AAS, 58 year old, male, was referred to the Otorhinolaryngology ward of the Hospital de Clinicas do Parana because of recurrent epistaxis since childhood, with progressive worsening after 45 years, requiring many blood transfusions. On rhinoscopy we found telangiectasias, mucosal hyperemia and crusts. The patient was diagnosed with hereditary hemorrhagic telangiectasia (Rendu-Osler-Weber syndrome), submitted to several procedures, the latter being cauterization of the sphenopalatine artery and nasal septum. **Conclusion:** The Rendu-Osler-Weber syndrome is a difficult disease to control, and it can lead to recurrent and variable bleeding. The difficulty on treating this disease justifies the need for further treatment trials to help control symptoms.

PS-236

SGP: 8443

Juvenile nasopharyngeal angiofibroma: case report

Author(s): Fabiano Evangelista Silva, Marcos Rossiter de Melo Costa, João Paulo Lins Tenório, Danielle Sofia da Silva, Lia Tácia Costa Cavalcante, José Vicente Veloso Filho

Keywords: angiofibroma, epistaxis, nasal obstruction.

Juvenile nasopharyngeal angiofibroma is a rare benign neoplasm, which almost exclusively affects male adolescents. It is a highly vascularized tumor of slow growth, but locally invasive and destructive. **Objective:** to report a case of nasopharyngeal angiofibroma in a young adult patient treated surgically in our department. **Case Report:** J.C.G.R patient, 27 years, with a history of right nasal obstruction associated with episodes of epistaxis. **Discussion:** the nasopharyngeal angiofibroma arises at the margin of the sphenopalatine foramen and it may extend into the pterygopalatine fossa, paranasal sinuses and nasal cavity, causing symptoms such as pain, unilateral nasal obstruction and epistaxis. Surgery is considered the best treatment option, with recurrence rates ranging from 6 to 24%. **Conclusion:** despite being a benign tumor, the nasopharyngeal angiofibroma can be highly invasive locally, causing sequelae and, therefore, it should be diagnosed early and treated properly.

Nasopharyngeal angiofibroma: case report

Author(s): Thiago Motta Oliveira, Miriam Cabral Moreira de Castro, Vinícius Antunes Freitas, Caroline Guimarães Cardoso, Felipe de Almeida Assunção, André de Paula Alvarenga, Christiano Silva Orlandi

Keywords: angiofibroma, endoscopy, nasopharyngeal neoplasms.

Objective: To report the case of a patient with nasopharyngeal angiofibroma, emphasizing the surgical approaches used and the usefulness of preoperative embolization. **Case Report:** M. D. N. M., age 12, male, started 3 years ago with progressive nasal obstruction associated with massive epistaxis on the right nasal cavity that ceased spontaneously. For one year now he has had severe epistaxis requiring anteroposterior packing in the right nasal cavity as an immediate measure. CT scan of the paranasal sinuses revealed a heterogeneous mass impregnated by contrast, suggestive of angiofibroma, obstructing the right nasal cavity and pterygopalatine fossa extending closely to the optic nerve and ipsilateral internal carotid artery. Classified as IIIB in the Rodkowski scale. He underwent embolization the day before the endoscopic surgery. The surgery was endoscopic only. The tumor was resected in its entirety, and the patient is currently asymptomatic. Recent nasal endoscopy and CT scan with contrast showed no signs of recurrence. He is being monitored every six months. **Conclusion:** The preoperative embolization, although bearing risks, is effective in reducing intraoperative bleeding. The literature calls for radical surgery as the most effective treatment, and the endoscopic endonasal approach has been useful, effective and causes less morbidity than the open procedure, thus decreasing the length of hospital stay and complications. It is more technically demanding, requiring greater dexterity from the surgeon, with limitations in addressing the infra-temporal fossa.

Leishmaniasis in patients with acquired immunodeficiency syndrome

Author(s): Pablo Gimenes Tavares, Raquel Guedes Monteiro, Creonice Danielle Antunes Lopes, Rosane Almeida Rabelo, Claudio Campos Rodrigues, Calil Fraiha Sobrinho, Diego Antonio Linhares Martinelli, Ricardo Toledo Piza

Keywords: aids-related opportunistic infections, infectious disease medicine, otolaryngology.

We describe the case of a patient complaining of odynophagia, dysphagia, asthenia and weight loss, and came up with the hypothetic diagnostic of AIDS associated with a granulomatous disease. Appropriate tests confirmed the diagnosis of HIV infection and leishmaniasis.

Bilateral Nasolabial Cyst

Author(s): Marco Antônio Thomas Caliman, Erika Mucciolo Cabernite, Juliana Tichauer Vieira, Diogo Carvalho Pasin, Denilson Storck Fomin

Keywords: acquired, cysts, nonodontogenic cysts, nose deformities.

The nasolabial cyst is a rare non-odontogenic development cyst that affects the upper lip laterally to the midline. It represents 0.3% of all maxillary cysts. The bilateral presentation is extremely rare, occurring in only 10% of the cases. Its origin is controverted, this cyst is frequently asymptomatic and the most common sign is nasal wing elevation, shadowing the nasolabial sulcus. The purpose of this paper is to report a case of bilateral nasolabial cyst with a discussion and literature.

Endoscopic surgery of a nasopharyngeal angiofibroma: Case Report

Author(s): Thiago Motta Oliveira, Miriam Cabral Moreira de Castro, Vinícius Antunes Freitas, Caroline Guimarães Cardoso, Felipe de Almeida Assunção, Christiano Silva Orlandi, André Gustavo de Paula Alvarenga

Keywords: angiofibroma, endoscopy, nasopharyngeal neoplasms.

Objective: To report the case of a patient with nasopharyngeal angiofibroma, emphasizing the surgical approach used and the usefulness of preoperative embolization and tumor recurrence rates. **Case Report:** JRP, 31 years old, came to us complaining of progressive, bilateral, nasal obstruction for 06 years, associated with rhinorrhea, with no aggravating factors or mitigating circumstances. Anterior rhinoscopy showed purulent bilateral endoscopy bulging of the soft palate. Computed tomography suggested a mass occupying the entire nasopharynx with bulging of the soft palate, with no signs of bone destruction. Biopsy and pathology suggested juvenile nasopharyngeal angiofibroma. Directed embolization of branches of the right internal maxillary artery in its sphenopalatine segment and palatine branch of the right internal maxillary artery. Three days after embolization he underwent tumor resection under general anesthesia and nasal endoscopy. Patient recovered uneventfully and was discharged on the second postoperative day. The specimen's pathological report was that of a juvenile nasopharyngeal angiofibroma. **Conclusion:** Preoperative embolization, although bearing risks, is effective in reducing intraoperative bleeding. The literature calls for radical surgery as the most effective treatment. The endonasal endoscopic approach has been useful, effective and carrying less morbidity than open surgery, thus decreasing the length of hospital stay and complications. It is technically challenging, requiring greater dexterity from the surgeon and it has limitations in addressing the infra-temporal fossa.

Analysis of 65 patients with CSF fistula as to etiology, location and recurrence rate

Author(s): Thiago dos Santos Ferreira, Marcelo Hamilton Sampaio, Carlos Takahiro Chone, Eulalia Sakano

Keywords: cerebrospinal fluid, cerebrospinal fluid rhinorrhea, craniocerebral trauma, meningitis, skull base.

Introduction: Spontaneous fistula is rare, and it may be associated with hidden malformations in the skull base. Traumatic fistulas frequently happen a few days after the trauma. Its closure by a transnasal approach promotes a faster recovery with less surgical morbidity. The precise location of the fistula during surgery is important to treatment success. **Methods:** Retrospective study. Cases treated between 2006 and 2011 were evaluated according to a protocol that included clinical presentation, etiology, location and recurrence rate. **Results:** There were 65 patients, 95% had hyaline rhinorrhea and meningitis in 13 (20%) patients. Etiology: Head injury 23 (35%), spontaneous 25 (40%), iatrogenic 16 (24%) and not reported, two (3%). Location: ethmoid in 20 (32%); sphenoid in 19 (30%); cribriform plate in 21 (33%), and the frontal in five (8%). There were three recurrences (4.8%), all in the Sphenoid. **Conclusion:** In HI cases, males prevailed, at the age below 35 years. Spontaneous CSF fistulas prevailed in females aged above 35 years. All recurrences were spontaneous and were located in the sphenoid. In our study, Fischer's test showed statistical significance for spontaneous recurrence as the etiology ($p = 0.05$). Bone defect size was not assessed in our study and the data regarding the spontaneous fistulas should be viewed with caution since this is a retrospective study.

Intranasal glomangiopericytoma

Author(s): Flávio Bertonecello, Priscila Bogar Rapoport, Rogerio Fernandes Nunes da Silva, Fernando Veiga Angélico Jr, Diego de Oliveira Lima

Keywords: endoscopy, hemangiopericytoma, nasal cavity.

Glomangiopericytoma is a rare vascular tumor, first described in 1942 by Stout and Murray. Its origin is related to the pericytes of Zimmerman, vascular cells of the body involving coiled capillaries and post-capillary venules, representing less than 1% of vascular tumors. More than half of reported cases involve the musculoskeletal system and skin, about 15 to 30% are found in the head and neck, oral cavity and nasal/paranasal sinuses - less frequently affected sites. The glomangiopericytomas can arise at any age, being more frequent in patients in the first and second decades of life. Its clinical behavior ranges from a totally benign tumor to aggressive

metastatic cancer. The aim of this study is to describe the case of a patient with intranasal glomangiopericytoma, the diagnosis was confirmed by histopathology after surgery.

PS-244

SGP: 8470

Dengue: blood clotting changes and pre and postoperative otorhinolaryngological implications

Author(s): Luciana Ribeiro Magalhães, Daniela Mendes Leitão, Lana Moutinho, Regis Marcelo Fidelis, Thiago Santa Rosa Dolinski

Keywords: blood coagulation factors, dengue, otorhinolaryngologic surgical procedures.

Introduction: Dengue fever is a common disease in tropical areas. It is caused by virus of the Flavivirus genus, transmitted by *Aedes aegypti* mosquitoes. In Brazil, the disease is endemic, with epidemic outbreaks. It is known to cause haematological effects in patients: hemoconcentration, leukopenia, thrombocytopenia and clotting changes; with an increased incidence of bleeding. The interest in this subject arose after observing a patient submitted to septoplasty, recently affected by dengue, who developed nasal bleeding of difficult control. **Objective:** To evaluate clotting disorders in dengue patients and identify how they relate in the pre and postoperative periods in otorhinolaryngological surgeries. **Method:** Literature search review. **Conclusion:** Dengue hemorrhagic diathesis is caused by vasculopathy, thrombocytopenia and low coagulation, which are mainly responsible for skin and mucosal bleeding. Although the platelet count returned to normal values 7 to 10 days after the period of defervescence, its complete function is restored only 2 to 3 weeks after the initial phase of convalescence period. In view of the risks cited, any patients with a previous history of dengue, within 30 days after resolution of initial symptoms, should not be submitted to otorhinolaryngological surgeries.

PS-245

SGP: 8473

Ossifying fibroma of the ethmoid sinus: case report

Author(s): Carolina da Fonseca Jarletti, Jéssica Guimarães Gomes Silva, Alexandra Torres Cordeiro Lopes de Souza, Larissa Salomão Pereira, Eduardo Luis Gomes de Almeida

Keywords: adolescent, fibroma, fibrous dysplasia of bone, ossifying.

Introduction: The ossifying fibroma is a rare, benign, slow growth tumor, more frequent between the second and third decades of life, predominant in white females. It essentially originates in the maxilla and mandible and are uncommon in the paranasal sinuses. This paper describes a rare case of ossifying fibroma of the ethmoid sinus in adolescent males and correlates it with literature data. **Case report:** 15-year old male patient, presented with unilateral nasal obstruction and decreased visual acuity on the right side, because of a tumor in the right ethmoid sinus extending to the nasal cavity. The radiological changes suggested a fibro-osseous disease, and after surgical resection, histopathology tests confirmed the tumor to be an ossifying fibroma. **Comments:** Even when dealing with a benign tumor of slow growth and low malignant potential, the ossifying fibroma is a tumor that may cause symptoms, pushing against adjacent structures, thus requiring complete excision, including the adjacent periosteum, and careful clinical follow up with periodic imaging exams.

PS-246

SGP: 8479

Nasal eosinophilic angiocentric fibrosis

Author(s): Renata Farias de Santana, Renato Telles de Souza, Luiz Carlos Nafad de Lima, Marcos Antônio Fernandes, Márcia dos Santos da Silva, Leandro Tavares Flaiban

Keywords: fibrosis, nasal obstruction, nose neoplasms.

The abstract was not sent.

PS-248

SGP: 8486

Fronto-ethmoidal mucocele in a mccune-albright patient: case report

Author(s): Renata Mainardes Sawczuk, Bettina Carvalho, Renier Barreto Arrais Ykeda, Rodrigo Silveira Miranda, Otavio Pereira Lima Zanini, Rafael Ferri Martins, Marcos Mocellin

Keywords: ethmoid sinus, fibrous dysplasia, frontal sinus, mucocele, polyostotic.

Introduction: mucoceles are epithelial-coated cystic lesions with mucous content that can affect the sinuses. They are expansive and slow growth lesions and may eventually undermine adjacent vital structures. The McCune-Albright Syndrome is rare and is characterized by the triad of café au lait lesions, polyostotic fibrous dysplasia and early puberty. **Case report:** CT, female, 13 years old, with McCune-Albright Syndrome, Cushing Syndrome and arterial hypertension. She came to in our department complaining of bilateral nasal obstruction, worse in the left side. She also complained of snoring and mouth breathing. The examination showed hypertelorism, bilateral ocular ptosis and short stature. Anterior rhinoscopy revealed a globular lesion in the left middle meatus, lined with nasal mucosa. On CT scan of the sinuses we noticed frontal bone dysplasia and a round, expansive, soft tissue density mass occupying the entire left nasal cavity, ethmoidal sinuses and frontal sinus left cells, suggestive of frontal and ethmoidal mucocele. The lesion was endoscopically removed and sent to the pathologist. The patient evolved well in the post-op indicating significant improvement of the nasal obstruction. **Conclusion:** This paper aims to draw attention to a rare association between mucocele and McCune-Albright Syndrome. Diagnosis and early treatment are paramount to prevent serious complications and sequelae to the patients.

PS-249

SGP: 8490

Nasopharyngeal angiofibroma: a review of nine cases

Author(s): David Weber Sampaio Sousa, Sebastião Diógenes Pinheiro, André Alencar Araripe Nunes, Marcos Rabelo de Freitas, Flávio Maria Nobre Othon Sidou

Keywords: angiofibroma, embolization, endoscopy, epistaxis, nasopharyngeal neoplasms, therapeutic.

Introduction: Nasopharyngeal angiofibroma (NFA) is a benign, highly vascularized, slow growing tumor, with a high tendency for local invasiveness, of frequent recurrence and high rates of bleeding. It is almost exclusively diagnosed in male adolescents. It typically presents as epistaxis, unilateral or bilateral nasal obstruction and rhinorrhea. The diagnosis is based on signs and symptoms, macroscopic aspects of the tumor, epidemiology and imaging evaluation of the lesion. Pre-surgical biopsy must be avoided due to the high risk of bleeding. Complete surgical resection of the tumor is the first choice of treatment. In this paper we present a literature review of nasopharyngeal angiofibromas and we describe nine cases of patients who underwent surgical treatment in the ENT Service at Walter Cantídio University Hospital - Federal University of Ceará. **Materials and methods:** Retrospective study, carried out by analyzing the charts of patients submitted to surgical resection of nasopharyngeal angiofibromas from September 5th, 2002 to December 10th, 2010. **Results:** All the patients were males and were between 11 and 30 years of age. The most frequent symptoms were nasal obstruction and epistaxis (100%). Eight patients were classified as stage III of Chandler's staging system and one as stage II. Seven cases underwent endoscopic surgical approach, and two were treated with midfacial degloving. Recurrence occurred in two cases. **Conclusion:** In the present study we found that endoscopic approach is safe for the complete resection of an NFA, with low residual and recurrent disease rates. Lower intraoperative bleeding rates were found in patients who underwent preoperative embolization.

PS-250

SGP: 8492

Is lacrimal duct obstruction always dacryocystitis?

Author(s): Thiago dos Santos Ferreira, Arethusa Medeiros, Albina Altemani, Marilisa Nano Costa, Eulalia Sakano

Keywords: dacryocystitis, dacryocystorhinostomy, lacrimal apparatus, nasolacrimal duct.

We report on four cases with unusual and rare diseases affecting the lacrimal sac; however, with clinical presentation of dacryocystitis. The first was a malignant melanoma; the second, a diffuse large B cell lymphoma; the third, rhinosporidiosis; and the fourth, a diffuse B cell lymphoma.

PS-251

SGP: 8514

Rhabdomyosarcoma of the maxilla in a 1-year-old child - case report

Author(s): Flávia Gonçalves de Oliveira Maestrali, Rachel Catão de Lucena, Renato Tadao Ishie, Guilherme Chiverini Sampaio Correa, Elder Yoshimitsu Goto

Keywords: child, maxilla, rhabdomyosarcoma.

Rhabdomyosarcoma is a rare aggressive malignancy that accounts for 5-8% of all malignant tumors of childhood, with peak incidence between 2 and 6 years of age. The most affected areas include the head and neck. Treatment consists of surgery, chemotherapy and radiotherapy. We report the case of a child under 2 years with a tumor in the face observed after a fall, which histopathological examination revealed a rhabdomyosarcoma. The objective of this report is to highlight the importance of having in mind the differential diagnosis of tumors of the face in order to initiate proper investigation and early specific treatment.

PS-252

SGP: 8519

Squamous cell carcinoma of the nasal vestibule: When to suspect?

Author(s): Daniela Pereira Rezende, Roberta Bak, Janaina Oliveira Bentivi Pulcherio, Patrícia Bittencourt Barcia Barbeira, Marcos Aurélio Baptista de Oliveira

Keywords: carcinoma, nasal cavity, nose neoplasms, squamous cell.

Introduction: The squamous cell carcinoma is the most frequent malignant neoplasm of the nasal cavity. It is rare in the nasal vestibule with significant morbidity and mortality, frequently mistaken with benign lesions and diagnosed later. **Objective:** To stress the importance of diagnosing squamous carcinoma in nasal vestibule lesions that appear benign at first, with benign characteristics and a slow course. **Report:** A 73-year-old male, caucasian patient, smoker, came to our otolaryngology service with swelling of the right nostril for two and a half years. In the examination we found a brownish, hardened, ulcerative and vegetative lesion, with undefined limits, in the right nasal vestibule. A histopathological study of the lesion revealed the lesion to be squamous cell carcinoma. The patient was sent to oncologic follow up. **Discussion:** The squamous cell carcinoma of the nasal vestibule presents with a few symptoms, with likelihood of being misdiagnosed in the beginning, thus delaying treatment. Treatment is based on radiotherapy with or without surgery. The size of the tumor is the most important prognostic factor. **Conclusion:** the otolaryngologist must be attentive to the examination of this region, regardless of the symptoms presented by the patients, since early diagnosis improves the outcome of the disease.

PS-253

SGP: 8524

Epidemiological profile, symptoms and classification of allergic rhinitis: a study of 168 cases

Author(s): Theago Barros Silva, Murillo Freire Lobato, Waner Josefa de Queiroz Moura, Diego Costa Farias, Joyce Oliveira de Lima, Lorena Gonçalves Rodrigues, Larissa Magalhães Navarro

Keywords: allergic, nasal obstruction, perennial, rhinitis, rhinitis.

Introduction: Allergic rhinitis is defined as a chronic inflammation of the nasal mucosa mediated by IgE after allergen exposure. It affects all ages, genders and races, beginning predominantly in late childhood and adolescence. The diagnosis is mainly clinical. The principal symptoms are nasal obstruction, rhinorrhea, sneezing and itching. It presents as a disease of high morbidity with significant impact on quality of life and important association with other comorbidities. **Objective:** This study aims to establish the prevalence of symptoms in patients with allergic rhinitis, their distribution according to age and gender, as well as their classification in the department of Rhinology within a University Hospital. **Materials and methods:** We studied 168 patients (no age restriction) with allergic rhinitis, who were

followed up in the Rhinology ward of a university hospital. We conducted a cross-sectional study using a protocol in the period of January, 2010 to January of 2011. **Conclusion:** The most prevalent were: female genders, adult age and the persistent severe form of the disorder. Studies on allergic rhinitis in adults are needed, taking into account other symptoms in addition to the nasal ones, and the socio-economic consequences of the condition.

PS-254

SGP: 8527

Spontaneous giant maxillary hematoma simulating a sinonasal tumor: a case report

Author(s): João Paulo Saraiva Abreu, Érika Ferreira Gomes, Moisés Ximenes Feijão, Isabelle Oliveira Jataí, Arthur Chaves Gomes Bastos, Juliana Soeiro Maia, Gemima Garcia Gadelha

Keywords: hematoma, maxillary neoplasms, maxillary sinus.

The organized hematoma of the maxillary sinus is a rare entity, with fewer than 100 cases described in the literature. Clinically, it manifests as unilateral nasal obstruction and rhinorrhea. Epistaxis is present in 70% of the cases. The mass can gradually reshape the maxillary sinus and cause bone erosion. In this paper, we report a case of spontaneous organized hematoma of the maxillary sinus, simulating a sinonasal tumor. A 33 year-old male patient presented a history of 1 year of nasal obstruction and rhinorrhea on the right side, that evolved with prominent ipsilateral epistaxis, without predisposing factors. Upon examination, we noticed a reddish mass with fibrous consistency occluding the entire nasal cavity. CT scan showed the maxillary sinus completely filled with a soft-tissue mass, with significant bone erosion. Outpatient biopsy indicated a clot. The patient was treated by a combined surgical approach (endoscopic + Caldwell-Luc incision), leading to complete recovery. The etiology of the spontaneous hematoma was unclear. Possible causes include increased blood flow around the ostium of the maxillary sinus or ruptured aneurysms of arterioles that supply blood to the sinus. The possible mechanism of organized hematoma formation results from bleeding in a semi-enclosed lumen (maxillary sinus), with formation of a hematoma encapsulated by fibrosis, which prevents reabsorption, leading to gradual expansion and adjacent bone demineralization. In conclusion, the spontaneous organized hematoma of the maxillary sinus is a rare entity that simulates sinonasal neoplasms due to an expansive behavior and associated symptoms.

PS-255

SGP: 8530

Histoplasmosis in the nasal septum without lung involvement in an immunocompetent patient

Author(s): Ricardo Landini Lutaif Dolci, Gisela Andrea Yamashita, Ney Castro Pentead Junior

Keywords: chronic, granulomatous disease, histoplasmosis, nasal septum.

Immunocompetent 85-year-old patient from Juriti - the countryside of Pernambuco, complaining of four months of constant pressing pain, of average intensity in the nasal region, radiating to the frontal area, throbbing in nature, lasting for hours, worsening with head movement, which improved with rest. During this period he also had bilateral nasal obstruction, a somewhat yellowish bilateral anterior rhinorrhea and hyposmia. He had epistaxis in the anterior left nasal cavity, and we did serology studies for granulomatous disease, which came negative. Paranasal sinuses CT scan was ordered and the nasal septum lesion was biopsied. We diagnosed nasal septum histoplasmosis, which we treated with itraconazole which improved his symptoms.

PS-256

SGP: 8537

Transclival CSF fistula secondary to Echchordosis Physaliphora -- A case report and literature review

Author(s): Luís Augusto Miranda Dias, Márcio Nakanishi, Marcelo Ricardo Canuto Natal, Gustavo Henrique Soares Takano, João Mangussi-Gomes

Keywords: bacterial, cerebrospinal fluid rhinorrhea, chordoma, meningitis, notochord.

Echchordosis Physaliphora (EP) is a rare congenital lesion of notochordal origin commonly found in the posterior region of the clivus. It is usually asymptomatic and in most cases it is found incidentally in radiological or

post-mortem studies. We describe a case of a CSF fistula secondary to EP and then present a brief review of the literature. Only two similar cases have already been reported so far. A 54-year-old female patient was referred with an 18-month history of intermittent, right-sided, watery rhinorrhea and a previous treated episode of acute bacterial meningitis, 12 months ago. A CT/MRI scan revealed a small homogeneous mass in the dorsum of the clivus, extending to the sphenoid sinus. It was a T1-hypointense and T2-hyperintense lesion, with no contrast enhancement. The hypothesis of transclival CSF fistula secondary to EP was considered and the patient was submitted to endoscopic transnasal/sphenoidal surgery. During the procedure, a gelatinous mass was seen protruding through a small orifice in the posterior wall of the sphenoid sinus. The lesion was excised and the bone defect corrected. Further histopathological analysis confirmed the diagnostic hypothesis. The patient has been asymptomatic since surgery. EP originates from ectopic notochordal tissue. It may be located along the axial skeleton, it is more commonly found in the pre-pontine cistern. Also of notochordal origin, the chordoma is considered the malignant counterpart of EP and should always be included in the differential diagnosis. This distinction has important prognostic and therapeutic implications and can be confirmed based on the comparison of clinical, radiological, histopathological and immunohistochemical characteristics of both lesions.

PS-257

SGP: 8542

Neuroendocrine carcinoma of the maxillary sinus: case report

Author(s): Tatiana Carneiro da Cunha Almeida, Francisco José Motta Barros de Oliveira Filho, Tércio Guimarães Reis, Marcelo Rosa Lima, Bruno Cunha Pires, Maurício Leite Oliveira, Antônio Fausto de Almeida Neto

Keywords: carcinoma, maxillary sinus, maxillary sinus neoplasms, neuroendocrine.

Introduction: Malignant lesions of the nasal cavity and paranasal sinuses are rare, accounting for 3% of all cancers in the head and neck and 0.2% to 0.8% of all neoplastic diseases. Despite the low incidence, these tumors are clinically significant for their poor prognosis. The primary neuroendocrine carcinoma (NEC) of the sinonasal cavities are extremely rare and difficult to diagnose by conventional histopathological examination. The advent of computed tomography (CT) provided a better understanding of the anatomy of the face, essential for proper evaluation of lesions, their characteristics, extent and planning for surgical or radiotherapy treatment. **Case report:** We report a young female patient, complaining of bilateral nasal obstruction, more pronounced on the left side, and episodes of mild epistaxis for 6 months, after investigation by imaging and biopsy with immunohistochemical analysis we confirmed it was a poorly differentiated neuroendocrine tumor. The patient underwent resection of the left supra-meso structure, with preservation of the orbital contents through a combined Weber-Ferguson and Lynch incision, she is now undergoing radio and chemotherapy. **Conclusion:** Carcinoid tumors of the paranasal sinuses are rare, and not very commonly reported in the literature. Despite the complex differential diagnosis, the immunohistochemical analysis is an important diagnostic weapon. The recommended treatment for these cases is surgery, according to the standards of oncological resection and the proper safety margins.

PS-259

SGP: 8553

Verrucous squamous cell carcinoma

Author(s): Denise da Silva Calvet, Fabiana Rocha Ferraz, Francisco Javier Gonzalez Poceiro, Pauliana Lamounier e Silva, Jamille Lima Wanderley Ribeiro

Keywords: carcinoma, carcinoma, nasal cartilages, squamous cell.

78 year old, Caucasian male, was seen at the Hospital Andaraí in November 2010, complaining of a lesion in the right nasal cavity for 12 years. He did not have spontaneous nosebleeds. His nose bled only during excessive manipulation (not very significant, and spontaneously resolving, without intervention). He reported pain upon palpation. PH: No hypertension or DM. COPD being treated in the Pneumology Department. FH: No family history of cancer. Smoked for 65 years, 2-3 packs/day, and stopped 5 years ago. Alcoholism (Cachaça) since 14 years of age, stopped 15 years ago. Worked in a lead factory for 5 years (between 14 and 19 years of age). Difficult nasal endoscopy because of the size of the lesion; nevertheless, we found a 4cm verrucous lesion in the right nasal cavity, implanted in the anterior nasal septum. CT scan showed a soft tissue lesion, inserted in the anterior nasal septum, without bone or cartilage destruction and without

other major structural changes. He underwent endoscopic sinus surgery to remove the tumor. The tumor was removed with wide margins and the specimen was sent to the pathology lab. On Feb 28, 2011, the lab reported on a well-differentiated epidermoid carcinoma with a predominant verrucous pattern. The patient was referred to the Head and Neck Department of the Bonsucesso General Hospital, where he is being followed up.

PS-260

SGP: 8559

Signs and symptoms in empty nose syndrome

Author(s): Maria Isabel dos Santos Beiler, Flavia Araujo Barroso Pereira, César Leandro Terra Brito, Jair de Carvalho e Castro

Keywords: nose, obstructions (sewerage), respiratory mucosa.

Introduction: The empty nose syndrome (ENS) is considered an iatrogenic condition. The concept is not well established; however, it is understood as a nose that has been anatomically altered by a surgical procedure, leaving the nasal cavity wider. The patient complains of nasal obstruction which does not match the nasal dimensions observed in physical exams; hence being called paradoxical obstruction. Another common symptom is dry nose due to chronic mucosal inflammation. **Case report:** RML came to the Department of Otolaryngology, complaining of nasal obstruction. She reported that, in 2007, she was submitted to septoplasty and inferior turbinate surgery; however, her symptoms became worse in the late postoperative period. In 2008 she was diagnosed with septal perforation, when she underwent surgical treatment for concha bullosa. After the last intervention and still with the same symptoms, she sought care in many ENT and pneumology clinics, always getting the diagnosis of sinusitis and treatment for such. In March 2011, she came to our clinic for the first time for consultation. On examination, including nasal endoscopy, we found residual anterior nasal septum deviation, with a broad nasal cavity and diffuse atrophy of the mucosa; lower and middle turbinate hypotrophy. **Comment:** the ENS is rare. Diagnosis is difficult because there is no correlation between the reported symptoms and clinical findings. The lack of knowledge about this entity delays the diagnosis. This syndrome is considered debilitating and alter nasal physiology, which is critical to respiratory function, as well as patient's well-being. We concluded that the ENS is really difficult to manage, and the best treatment remains prevention.

PS-261

SGP: 8568

Endoscopic correction of unilateral choanal atresia with a mucosal flap

Author(s): Francisco Grocoske, Cassio Iwamoto, Marcos Mocellin, Maria Theresa Costa Ramos Oliveira, Heloisa Nardi Koerner, Otavio Zanini

Keywords: choanal atresia, nasal cavity, nasal obstruction.

We present a case of unilateral choanal atresia in a 10-year old patient. He came to the ENT Department of Hospital de Clinicas, Universidade Federal do Parana, complaining of right nasal obstruction for many years, accompanied by runny nose and sneezing. Rhinoscopy showed mild bilateral turbinate hypertrophy and purulent discharge in the right nasal cavity. We performed a nasal endoscopy which showed right unilateral choanal atresia, clear fluid and mild adenoid hypertrophy. A CT scan of the paranasal sinuses was requested, which showed the right unilateral choanal atresia. The patient underwent endoscopic surgical correction of the atresia, with removal of the atretic plate and the creation of a septal mucosal flap. The procedure was uneventful, with good postoperative evolution and immediate improvement of the nasal obstruction. The patient recovered well, having hyaline secretion and crusting at the site of resection for two weeks after surgery, but maintaining the patency of the neo-choana.

PS-262

SGP: 8573

Recurrence of septal adenoid cystic carcinoma

Author(s): Lara Silva Carvalho, Lana Patricia Souza Moutinho, Daniella Leitão Mendes, Regis Marcelo Fidelis, Thiago Dolinski Santa Rosa de Oliveira

Keywords: carcinoma, nasal cavity, radiotherapy, recurrence, therapeutics.

The septal adenoid cystic carcinoma is a tumor of the salivary glands that may affect the nasal cavities and the paranasal sinuses; it's the second main type of malignancy in this site, after squamous cell carcinoma. Tumors of the sinonasal tract are asymptomatic or they mimic inflammatory diseases, slowing the diagnosis, hence their advanced stage upon diagnosis. Because of their affinity for perineural and bone invasion, they can affect the skull base. They usually present as nasal obstruction, facial pain or epistaxis. The main site of origin is the maxillary sinus, followed by the nasal cavity. The aim of this study was to present the report of a case of this rare disease, which can contribute to the discussion concerning the best treatment, which is still controversial. Currently, the indication is surgical resection associated with adjuvant radiotherapy, leaving chemotherapy for palliative cases. There is no consensus on the neck dissection, but it has been done in cases of advanced primary disease, or recurrence after surgery. Since there is a high recurrence rate, the best is to surgically remove the tumor with clear margins and have a strict post-operative follow-up to ensure a long survival.

PS-263

SGP: 8574

Complicação de abscesso septal: relato de caso e revisão da literatura

Author(s): Carolina Santos Bosaipo, Eduardo Pereira Bosaipo, Heriáldo Luís Ribeiro Pelúcio, Flávio Fernando Bringel Martins, Luciana Oliveira Sousa

Keywords: abscesso, cartilagens nasais, foliculite, septo nasal.

Introdução: Os autores descrevem um caso de abscesso septal devido à foliculite em vestibulo nasal, tardiamente encaminhada para diagnóstico especializado, com complicação de queda do dorso nasal. **Apresentação de caso clínico:** Paciente de 14 anos, branca, natural e proveniente de Santa Inês - MA, procurou o ambulatório de otorrinolaringologia com quadro de dor intensa e obstrução nasal grave há aproximadamente 10 dias, iniciado com foliculite de vestibulo nasal. Realizada imediata documentação diagnóstica e drenagem de grande quantidade de secreção purulenta espessa do septo nasal, seguido de tamponamento e cobertura antibiótica adequados, no HMTM. Recebeu alta hospitalar após dois dias de internação, prescrição de antibióticos e sintomáticos, e orientação para reavaliação ambulatorial. Sete dias após a alta, procurou o ambulatório de otorrinolaringologia, quando já evidenciamos queda do dorso nasal, posteriormente documentada por tomografia computadorizada. **Discussão:** Raros na clínica atual, os abscessos mais comuns são causados por traumas nasais seguidos de hematoma septal, embora outras causas possam levar a abscessos, tais como foliculites, como descrito neste trabalho, processos periodontais e rinossinusais. Por causarem compressão e, conseqüentemente, necrose com destruição da cartilagem, podem produzir impacto respiratório importante e deformidade estética, por queda do dorso e ponta do nariz. **Comentários finais:** Enfatizamos a importância do pronto diagnóstico e tratamento adequados, para prevenção de complicações potencialmente graves, bem como sérias e desagradáveis sequelas funcionais e estéticas.

PS-264

SGP: 8576

Nasal adenoid cystic carcinoma: case report

Author(s): Rachel Catão de Lucena, Ricardo Silva Chiabai Loureiro, Flávia Gonçalves de Oliveira Maestrali, Ana Carolina de Menezes Simas, Leonardo Barreto, Renata Lopes Mori

Keywords: carcinoma adenóide cístico, neoplasias das glândulas salivares, neoplasias nasais.

The adenoid cystic carcinoma is a rare tumor that represents less than 1% of malignant tumors of head and neck. It grows slowly, with early neural invasion, it has a high incidence of local recurrence and distant metastasis - which can develop years after initial resection. The purpose of this paper is to describe a case of nasal adenoid cystic carcinoma, discuss its prognosis and follow up.

PS-265

SGP: 8583

Case report: complication of isolated sphenoidal fungal non-invasive sinusitis

Author(s): Renato Tadao Ishie, Renata Lopes Mori, Tarcísio Aguiar Linhares Filho, Rachel Catão de Lucena, Alice Andrade Takeuti

Keywords: fungi, sinusitis, sphenoid sinus.

Fungus in paranasal sinuses can cause a range of disorders, varying from a fungal ball sinusitis all the way to a debilitating invasive disease. Infectious diseases of sphenoid and posterior ethmoid sinuses have large potential morbimortality. The aim of this study is to report a case of sphenoidal fungal non-invasive sinusitis complicated by incomplete superior orbital fissure syndrome. Despite rare, the complication of sphenoidal fungal non-invasive sinusitis must be promptly suspected and its diagnosis and treatment must happen as soon as possible in order to achieve favorable outcomes.

PS-266

SGP: 8595

Bilateral nasoalveolar cyst: a case report

Author(s): Carolina Cincurá Barreto, Ana Paula dos Anjos Vieira, Larissa Fernandez Correia Brandão, Raquel Crisostomo Lima Verde, Clara Monica Figueiredo de Lima, Marcus Miranda Lessa

Keywords: cysts, diagnosis, nose.

Introduction: Nasoalveolar cyst is a rare non-odontogenic cyst that originates in the upper lip region. It is usually found as an unilateral lesion, but it can be bilateral in 10% of the cases. The aim of the present study was to report the case of a woman with bilateral nasoalveolar cyst. **Case presentation:** A.B.P, a 52 year-old, presenting with continuous and progressive bilateral nasal obstruction, worse on the right side, for approximately 20 years. Physical exam revealed bilateral elevation of the nasal ala, superior lip protrusion and bulging of the nasal floor. By palpation we noticed a lesion of cystic aspect, between the nasal floor and the gingivolabial sulcus. Computed tomography of the paranasal sinuses showed a hypodense image of oval shape, homogeneous and well defined, located at the nasal wing region, bilaterally. The patient was submitted to surgery for lesion resection, through sublabial incision with blunt dissection and absorbable suture. 3 months after the surgery, the patient returned asymptomatic to follow-up, without recurrence of the lesions. The definitive diagnose of nasoalveolar cyst was established on pathology studies. **Conclusion:** Nasoalveolar cyst is an uncommon pathology, especially when bilateral lesions are found. Clinical manifestations are variable, ranging from an incidental finding to pain and facial deformities. The most indicated treatment is surgical excision, associated with low recurrence rates and few complications.

PS-267

SGP: 8600

Recurrent meningitis in a patient with trauma-related csf fistula

Author(s): Regis Marcelo Fidelis, Daniela Leitão Mendes, Alonço da Cunha Viana Junior, Thiago Dolinski Santa Rosa de Oliveira, Karlos Kempis Lima da Silva

Keywords: meningitis, meningitis, pneumococcal, tomography.

CSF leaks are caused by an injury to the arachnoid, dura, bone and mucosa, which results in extracranial flow of CSF. Fistulas are didactically classified as having a nasal or ear origin. CSF leaks are classically divided into traumatic and non-traumatic, the latter being also called spontaneous. The traumatic CSF fistulas can be divided into iatrogenic (surgery) or accidental (non surgical). Both can be subdivided into early and late. The main goal of CSF treatment is to prevent ascending meningitis. Regardless of the route of approach (intra- or extracranial), several authors have reported that the failure to identify the site of the CSF leak, either preoperatively or intraoperatively, is an important factor in the failure rate.

PS-268

SGP: 8605

Cerebral and oftalmological complications of acute sinusitis

Author(s): Nilce Sanny Costa da Silva Behrens, Bianca Mamede Passos, Regis Marcelo Fidelis, Thiago Dolinski Santa Rosa Oliveira, Daniella Leitão Mendes

Keywords: empyema, orbital cellulitis, paranasal sinuses, subdural.

Intracranial complications are rare; nevertheless, it is important to make an early diagnosis and promptly install treatment because of their high morbidity and mortality. This paper aims at discussing a clinical case in which there was a complication of acute sinusitis, with a favorable outcome, and a review on the topic.

Inverted papilloma of the left maxillary sinus

Author(s): Naize Giacobbo de Lima, Luzia Gross Lague, Hamilton Leal Moreira Ferro, Marcela Cristina Weber Pasa, Aline Gaiotto Maluta, Ricardo Kunde Minuzzi

Keywords: epistaxis, inverted papilloma, nasal obstruction.

Introduction: the sinonasal inverted papilloma is a benign neoplasia, usually affecting patients in their fifth and sixth decades of life, predominating among males, of unknown etiology. **Objective:** to report the case of an inverted papilloma in the maxillary sinus, given that it is locally aggressive, with high recurrence rates. **Case report:** 47 year-old male, with left side nasal obstruction, using vasoconstrictor for six months, without symptom improvement. We carried out a nasal endoscopy, in which we noticed a polypoid mass in his left nasal cavity, coming from the maxillary sinus, destroying the sinonasal wall on that side. We ordered a CT scan of the paranasal sinuses, in which we noticed a lesion occupying the maxillary sinus, with osteolysis of the ipsilateral sinonasal wall. We did an endonasal surgery, nasalizing the left maxillary sinus and removing the polypoid mass. The pathology study was positive for inverted papilloma. The patient is under follow up for three years now, without recurrence. **Discussion:** the inverted papilloma, usually originated from the lateral nasal wall, with secondary involvement of the maxillary and ethmoidal sinuses. The patient usually complains of unilateral nasal obstruction, epistaxis and rhinorrhea. Although benign, this tumor is locally aggressive, causing bone erosion and destruction, with high recurrence rates. Its main differential diagnoses are: sinusitis, benign neoplasias, ossifying fibroma, foreign body, internal carotid artery aneurism and sphenoid-choanal polyp. Given that it is locally aggressive, with high recurrence rates and associated with a malignant tumor, treatment must be thorough, based on complete removal of the tumor and of the adjacent periosteum.

Nasal septum perforation by multiple rhinoliths

Author(s): Márcia dos Santos da Silva, Renato Telles de Souza, Luiz Carlos Nadaf de Lima, Renata Farias Santana, Marcos Antonio Fernandes

Keywords: nasal obstruction, nose diseases, sinusitis.

We report a patient with classic symptoms of a nasal foreign body: fetid rhinorrhea with unilateral nasal obstruction. The patient had been mistakenly treated for sinusitis for about 10 years and did not report having inserted foreign objects in his nasal cavity. After confirming the diagnosis by endoscopy, endoscopic removal was indicated during which we noticed perforation of the nasal septum just below where there was a rhinolith. The perforation was probably due to the long stay of the foreign body in the nasal cavity.

Bilaterally duplicated and stenotic internal auditory canal: case report. Indication for cochlear implant?

Author(s): Bettina Carvalho, Rogerio Hamerschmidt, Rodrigo Kopp Rezende, Marcos Mocellin

Keywords: cochlear implantation, cochlear nerve, ear, inner.

Introduction: The duplicity of the Internal Auditory Canal (IAC) is a rare congenital malformation that leads to ipsilateral deafness. Malformations of the inner ear have long been considered contraindications to cochlear implants (CI). **Objective:** to describe the case of a patient under evaluation in our service, in order to discuss the indications for CI in children with inner ear malformations. **Results:** the patient is undergoing preparation for CI. **Discussion/Conclusion:** today, it is a fact that CI can be indicated in patients with congenital inner ear malformations, providing they have the cochlear nerve, as shown in our case.

Paralisia facial periférica decorrente de colesteatoma gigante

Author(s): Fábio Silva Alves, Fábio Alves

Keywords: cholesteatoma, ear, face.

Cholesteatomas can be defined as expansive and invasive tumors, which can cause sensorineural hearing loss, facial palsy, meningitis and intracranial abscesses (1). Cholesteatomas affect mostly Caucasians, it is rarely seen in Blacks and Asians (1). Cholesteatomas are able to break through bone; this bone erosion mechanism is still controversial, and some hypotheses have been raised, such as mechanical compression, osteoclast stimulation, cytokines and collagenases (1,2). Because of its destructive behavior, even if insidious, early diagnosis and proper treatment help prevent its complications, which range from hearing loss, labyrinthitis, meningitis, cerebral abscesses and peripheral facial palsy(1,3). Because of a possibility of severe complications from this disorder, it is highly important to do a literature review and report such case.

Managing complications of otitis media: a retrospective study

Author(s): Camila Carrara Yassuda, Eduardo Tanaka Massuda, Fabiana Cardoso Pereira Valera, Tassiana do Lago, Lucas Carezzi, Gabriel Bijos Faidiga, Flávia Silveira, Mariana de Lima Coelho

Keywords: mastoiditis, meningitis, otitis media.

Objective: to establish the frequency, treatment and course of patients with intratemporal and intracranial complications of Otitis Media at our institution Study Design: a retrospective study with analysis of the medical records of patients treated for intratemporal and intracranial complications of Otitis Media(OM) over the last 5 years in our service, identified according to the International Classification of Diseases (ICD 10) **Subjects and Methods:** thirty-eight patients aged 2 months to 75 years were treated for intratemporal and intracranial OM complications during this period. **Results:** acute otitis media(AOM) was the main cause of complications (56% of the cases). Eighteen patients had extracranial complications only, 14(37%) had intracranial complications and 6 (16%) had both. Extracranial complications, in decreasing order of frequency were: mastoiditis, facial paralysis and labyrinthine fistula, occurring in 71%, 25% and 4% of the cases, respectively. A retroauricular abscess was a complication detected in 4 patients(10%), associated with mastoiditis. Intracranial complications were: meningitis, brain abscesses and lateral sinus thrombosis in 58%, 27% and 15% of the cases, respectively. Mastoidectomy was performed in 40% of the patients. The neurosurgical approach was extensively used in the presence of a brain abscess (72%), but this intracranial complication was not so frequent among all others. Six deaths (13%) occurred as a consequence of intracranial complications **Conclusion:** acute otogenic complications still represent a challenge, although its frequency has remained constant over the last 5 years at our institution. Operative treatment is predominantly needed for intracranial complications. Complications of OM are still associated with high morbidity and mortality and indicate that OM continues to be a condition deserving attention and that its complications require a rapid intervention.

Traumatic Peripheral Facial Nerve Palsy: Clinical and Surgical Evaluation

Author(s): Julia Stabenow Jorge, José Jarjura Jorge Junior, Godofredo Campos Borges

Keywords: facial nerve, facial nerve injuries, temporal bone.

Objective: To analyze clinical and surgical cases of traumatic facial nerve palsy (TFNP) treated in a tertiary outpatient clinic during the period between 2004 to 2010. **Methods:** A retrospective study of 16 cases of PFPT, from a total of 65 cases (24.61%) of Peripheral Facial Nerve Palsy in the period. **Results:** 13 cases (81%) were male. The age ranged from 9 to 60 years with an average of 36 years. Regarding the type of trauma, 9 (56.25%) were by accident - 5 due to car accident, 3 as result of falling and 1 by an object hitting the temporal bone; 4 (25%) by assault and 3 (19%) were iatrogenic. Most frequent symptoms were: otorrhea in 9 cases (56.25%), paresthesia of the paralyzed side in 6 (37.5%), tinnitus in 5 cases (31.25%) and dizziness in 5 cases (31.25%). They also reported otalgia in 4 cases (25%), ear fullness

in 2 cases (12.5%) and retroauricular pain in 2 cases (12.5%). Of the 16 cases studied, 10 (62.5%) underwent medical treatment, 5 (31.25%) surgical treatment and in 1 case (6.25%) there was no follow-up. According to the House-Brackmann criteria, there was improvement in 11 (73.33%) patients. **Conclusions:** The authors traced the profile of patients with PFPT and the results obtained with their treatment.

PS-278

SGP: 7767

Vestibular Rehabilitation in Vascular Vestibulopathy

Author(s): Geraldo Majela Pereira, Isabella Marques Pereira

Keywords: dizziness, stroke, vestibular diseases.

Stroke is an effusion resulting from lack or restriction of blood supply to the brain, which can cause cell damage and changes to neurological functions. Clinical manifestations of this condition include change of motor, sensory, mental, perceptual, language functions, while neurological symptoms can vary depending on the exact location and extent of the injury. Patients with stroke may have postural imbalance and insecurity during walking. Vestibular rehabilitation can be employed in cases of dizziness and/or other clinical manifestations caused by disorders of physical balance. This study aimed at describing a case of VR in a male patient, 46 years old, who was sent to the Department of Neurotology of a Public Municipal Hospital, diagnosed with an ischemic stroke based on clinical history and vestibular findings. The patient used anti-vertigo drugs with no improvement, referred to VR by the ENT. This is also indicated in cases of vestibular dysfunction of vascular origin, aiming at enhancing postural stability, provide security while carrying out body movements, reducing fear and anxiety caused by dizziness as well as improving the quality of life of patients. There was significant improvement in his dizziness after 3 months of therapy, with normal results in the evaluation of static and dynamic balance. He stopped having dizziness and imbalance, and reached vestibular compensation. We may conclude that vestibular rehabilitation is an effective tool in fighting the symptoms and clinical signs related to vestibular dysfunction.

PS-279

SGP: 7776

Hearing Loss: rescue therapy with intratympanic methylprednisolone

Author(s): Frederico Santos David, José Luis Serrano Barba, Ivan Machado de Almeida Júnior, Marcos Antônio Guerra Júnior

Keywords: metilprednisolona, perda auditiva súbita, surdez.

The abstract was not sent.

PS-280

SGP: 7789

Otorhinolaryngological changes in patients with rheumatic diseases

Author(s): Lutiane Scaramussa, Reinaldo Jordão Gusmão

Keywords: blood vessels, disease progression, otitis.

Much has been discussed about the manifestations of rheumatic diseases in ENT patients. Otorhinolaryngological manifestations in autoimmune diseases represent a diagnostic challenge for the rheumatologist, the otolaryngologist and the GP. Commonly, ENT symptoms may represent an early sign of an autoimmune disorder not yet diagnosed, which often requires a prompt and aggressive use of an immunosuppressive treatment. Given the increase in the incidence of rheumatic diseases worldwide, driven by population aging and exposure to increased numbers of inducers of auto-immune diseases, the identification of ENT symptoms in these patients may become an important tool for early diagnosis and treatment of such disorders. This study, therefore, is to identify ENT manifestations in patients with rheumatic diseases.

PS-281

SGP: 7794

Reflex otalgia: When should one suspect of joint-related Temporomandibular Dysfunctions?

Author(s): Carlos Eduardo Monteiro Zappellini, Fábio Silva Alves, Hardynn Wesley Saunders Rocha Tavares, Ana Cecília de Macedo Cavalcante, Luana Gonçalves Oliveira, Ivan de Picoli Dantas

Keywords: temporomandibular joint, temporomandibular joint disorders, temporomandibular joint dysfunction syndrome.

Introduction: The temporomandibular joint (TMJ) is one element of the stomatognathic system consisting of several internal and external structures, capable of performing complex movements. Chewing, swallowing, speech and posture depend heavily on the function, health and stability of this joint to work properly. Either the joint or the muscle may represent the root cause. **Discussion:** According to the literature, the Temporomandibular Dysfunction (TMD) and orofacial pain affect mainly women at ages above 18 years, as per described in epidemiological studies of prevalence. In TMD patients there is a 77.5% of prevalence of at least one hearing complaint such as ear pain, tinnitus, dizziness and hearing loss, as reported in some studies. **Conclusion:** Diagnosis and treatment of TMJ dysfunction are very controversial, as are their relationship with otological symptoms. It is great the importance of multidisciplinary work (otolaryngologists, dentists, speech therapists, physical therapists and psychologists) for patients with such complex pathology, in order to achieve better treatment results. However, there is a need for more studies to reach a consensus on the playing field of each professional involved in this process. We highlight the importance of an accurate and early diagnosis in order to prevent future problems.

PS-282

SGP: 7795

Hemorrhagic dengue can generate Bilateral Sensorineural Hearing Loss?

Author(s): Carlos Eduardo Monteiro Zappellini, Fábio Silva Alves, Hardynn Wesley Saunders Rocha Tavares, Ana Cecília de Macedo Cavalcante, Luciana Campoy Giro Basile, Carlos Eduardo Maibashi

Keywords: dengue, dengue hemorrhagic fever, dengue virus.

Introduction: Dengue is considered the most important arbovirus affecting humans in terms of morbidity and mortality. It is a serious public health problem worldwide. It is an acute febrile infectious disease caused by an arbovirus, which belongs to the Flaviviridae family and transmitted by the *Aedes aegypti* mosquito. To date, four serotypes (1, 2, 3 and 4) are known. **Discussion:** Often we are faced with patients who have a fever, without changes in physical examination or with only a mild hyperemia of the oropharynx and nasal mucosa, leading the physician to suspect of a viral process. In the presence of an epidemic, the differential diagnosis of viral infections with Dengue becomes very important. **Conclusion:** Considering the scientific and technological resources currently available in relation to dengue, the goals of controlling this disease should be clear. Changes to hearing acuity, although of uncertain etiology, can represent an important sequela and we should consider this diagnosis in order to minimize this complication. We stress that physicians are not used to ordering audiometry to a dengue patient upon hospital admission, one must investigate, looking for another disease that could also be affecting the patient.

PS-283

SGP: 7815

Temporal bone fracture caused by head injury

Author(s): Fábio Silva Alves, Rodrigo Ubiratan Franco Teixeira, Carlos Eduardo Monteiro Zappellini, Luana Gonçalves Oliveira, Luciana Campoy Basile, José Maria Moraes de Rezende, Hardynn Wesley Saunders Tavares

Keywords: craniocerebral trauma, head, temporal bone.

Fractures of the petrous portion of the temporal bone represent 20-40% of all skull fractures. They arise, especially, from automobile and work-related accidents. Ear sequelae of head injuries are consequences of petrous bone fractures reaching the inner or middle ear, and it may cause damage to cochleovestibular membranous or neural structures, the tympanic-ossicular system or the facial nerve. After stabilizing the patient from the acute trauma, one must do a complete assessment of the temporal bone. A high-resolution

CT scan with axial and coronal slices must be done, with a bone window in order to assess skull base fractures. When the patient is in better shape, a complete audiological investigation is paramount. Balance tests are not important when one is considering early surgery in cases of trauma. Brainstem Evoked Response Audiometry is also useful in order to locate the level of the lesion. Temporal bone fractures may be associated with cerebral or neck injuries, which explains the large number and complexity of symptoms.

PS-284

SGP: 7816

Total extrusion of a stapes prosthesis: a case report

Author(s): Leonardo Mendes Acatauassú Nunes, Paulo Saraceni Neto, Ricardo Fratzato, Ektor Tsuneo Onishi

Keywords: ossicular prosthesis, otosclerosis, stapes surgery.

Introduction: Stapedotomy is considered effective in the treatment of otosclerosis by many; it is even considered as the gold standard method of treatment, but it carries some inherent complications that should be discussed with the patient at the time of their option for this treatment. **Objective:** The objective of the present study is to describe a case of total extrusion of a stapes prosthesis through the intact tympanic membrane, during the late postoperative period.

PS-287

SGP: 7838

Is it important to repeat the repositioning maneuver after benign paroxysmal positional vertigo treatment?

Author(s): Alexandra Kolontai de Sousa Oliveira, Leticia Boari, Lília Pereira Abreu Ferro, Renata Botelho Frota, Érika Perez Iglesias, Mariana Rocha Tetilla

Keywords: semicircular canals, treatment outcome, vertigo.

A retrospective study of patients in the neurotology ward from november 2010 to april 2011. Results: The study included 28 patients; 24 females, mean age 55.57 years; and 10.71% had other associated diseases of the labyrinth. All cases identified involved benign paroxysmal positional vertigo of the posterior semicircular canal, and Epley maneuver was performed in most patients and a Semont freeing maneuver was done in 4 cases. During the retest we had 18 negative cases; 10 patients had positional nystagmus with the same characteristics observed in the first diagnostic maneuver. Conclusion: The study shows that it is valid to perform the retest after the particle repositioning maneuver in BPPV, given that the percentage is high with positive retesting, which do not improve after reevaluation.

PS-288

SGP: 7843

Giant Cholesteatoma invading the temporal bone petrous apex: case report

Author(s): Renier Barreto Arrais Ykeda, Maria Theresa Costa Ramos de Oliveira, Fabiola Marques Morosini, Ronnie Barreto Arrais Ykeda, Herton Coifman, Marcos Mocellin

Keywords: cholesteatoma, cholesteatoma, ear, ear diseases, inner, mastoiditis, middle ear.

Introduction: Cholesteatomas are cystic insidious and destructive lesions that affect any pneumatized area of the temporal bone. They can cause extracranial and intracranial complications. **Case report:** C.A.G.F, 28 years old, from Curitiba-PR with a giant cholesteatoma of the right temporal bone with erosion of the internal auditory canal revealed by CT and MR images. He came to our department with a 19-year right-ear with: deafness, otalgia, otorrhea and right peripheral facial paralysis. He was submitted to surgery on that ear through a retroauricular transcortical approach in February of 2011 by the Otorhinolaryngology and Neurosurgery departments of the UFPR. During surgery, a CSF fistula was found because of dura mater invasion and meningitis, in the postoperative he was immediately initiated in antimicrobials with clinical resolution. He was discharged and currently he has been followed up with a good postoperative evolution. Final comments: This paper aims at stressing a rare disease - a giant cholesteatoma, which despite being a benign tumoral lesion it can cause severe sequelae and complications.

PS-289

SGP: 7852

Peripheral Facial Paralysis and Giant Cholesteatoma

Author(s): Fábio Silva Alves, Carlos Eduardo Monteiro Zappellini, Luana Gonçalves Oliveira, Luciana Campoy Basile, Rodrigo Ubiratan Franco Teixeira, Ivan de Picoli Dantas, José Maria Moraes de Rezende

Keywords: cholesteatoma, ear, facial paralysis, middle, middle ear.

Introduction: Cholesteatomas are cystic lesions encased in stratified squamous epithelium, filled with keratin. They are classified as congenital, and acquired, which are subdivided in primary - formed from a tympanic retraction; and secondary, originated from epithelium migration through a tympanic perforation. **Case Report:** LCS, 59 years old from Campinas/São Paulo, he came to our clinic with a history of dizziness, he also reported headache and progressive right peripheral facial paralysis. The mastoid CT scan showed a hypodense image with soft tissue density filling the middle ear, destructing the ossicular chain, semicircular canals, cochlea and extending until next to the proximal portion of the internal auditory meatus. He was referred to surgery. During the intraoperative we found an extensive destruction of the cortical layer of the mastoid, which was obstructed by a tumor of a yellow color and firm. Today, he is under regular follow up, and in sound general condition. **Final Comments:** This paper aims to stress the important complications of these pathologies, which despite being common and being a benign tumoral lesion, it can bring severe sequelae to the patient. A multidisciplinary treatment is important for these disorders.

PS-290

SGP: 7867

The Effectiveness of Vestibular Rehabilitation in Benign Paroxysmal Positional Vertigo

Author(s): Geraldo Majela Pereira, Isabella Marques Pereira

Keywords: vertigo, vestibular diseases, vestibular function tests.

Benign Paroxysmal Positional Vertigo is the most common type of peripheral vestibular disorder, characterized by brief episodes of vertigo when the head is moved in certain positions. BPPV is common in adults and the elderly, but it is rare in children. Its etiology is diverse - ovarian hormonal dysfunction, metabolic and vascular diseases, head trauma, and others. BPPV is triggered by the build up of fractions of utricular otoliths in the endolymph (canalithiasis) or on the ampullary crest of semicircular canals (cupulolithiasis). Spontaneous remission is common for patients in whom episodic vertigo persists, this dysfunction can be intolerable, and impairs patients's regular activities. Diagnosis is made through maneuvers such as the Dix-Hallpike and the Brant-Daroff positioning maneuvers and the Turn Test that assesses the semicircular canals. The best treatment for BPPV is a vestibular rehabilitation by means of the otolith repositioning maneuver, and success will depend on the canal involved and the location of the otoliths. Since it is a common vestibulopathy in the clinical practice, we evaluated 61 patients who underwent examinations with the vestibular test in the period from 31/01/2011 to 16/05/2011, the tests were performed in a private ENT and Speech Therapy clinic in Itaúna-Minas Gerais, where we identified 10 patients among the subjects with diagnosis of BPPV by the Dix-Hallpike maneuver. Patients with BPPV underwent vestibular rehabilitation. After the end of this, 100% of the patients reported significant improvements in their postural dizziness, a result that shows the effectiveness of treatment.

PS-291

SGP: 7891

Multisegmental posturography: evaluation of postural strategies using a tridimensional electromagnetic system

Author(s): José Fernando Colafêmina, Eduardo Ferrioli, Antonio Adilton Oliveira Carneiro, Taiza Elaine Grespan Santos-Pontelli, José Ailton Oliveira Carneiro

Keywords: postural balance, sensory deprivation, young adult.

Objective: The purposes of this study was to analyze the postural strategies in different sensorial conditions with multisegmental posturography using a tridimensional electromagnetic sensors system. Moreover, there was a further objective to present values for healthy young subjects using this tool. **Materials and Methods:** Twenty-five subjects were studied, ranging in age from 18 to 35 years. We used the POLHEMUS® device with two sensors. The

data was submitted to mathematical processing using a special Lab-View software and transformed into values, such as: maximum displacement, speed and trajectory. Tests were performed with the subjects standing in the orthostatic position for 90s, with eyes opened and closed, on stable and unstable surfaces. **Results:** The subjects had an inverted pendulum oscillation in all sensorial conditions and less available sensorial information was associated with higher postural oscillation. **Conclusion:** The method employed proved to accurately evaluate postural strategies. To summarize, this is a useful and practical tool to investigate several aspects of the motor control not only in static but also in dynamic conditions.

PS-292

SGP: 7906

Facial palsy and sensorineural hearing loss arising from vertebro-basilar artery ectasia

Author(s): Fúlvio Calice Ferreira, Rafaela Cesário Pereira Maluf, Luis Carlos Alves de Souza, Aldo José Bellodi, Thailise Giroto Ferreira

Keywords: cerebral arterial diseases, dilatation, pathologic, vertebrobasilar insufficiency.

Introduction: The vertebrobasilar artery ectasia refers to a complete or partial dilation of this artery. In some situations, the patient may be asymptomatic and in other cases there may be a large number of symptoms. The goal is to describe a case of facial palsy and sensorineural hearing loss due to vertebrobasilar artery ectasia. **Case Presentation:** MEBSR, female, age 63, progressive hearing loss on the left side and ipsilateral facial paralysis. **Physical exam:** normal left and right otoscopy and peripheral facial palsy on the left. Pure tone audiometry and tympanometry showed sensorineural hearing loss on the left. The BAEP results suggested retrocochlear disorder on the left side. MRI was normal. Magnetic resonance angiography (MRA) of the intracranial arteries showed a dilated and tortuous left vertebral artery in close contact with the cranial nerves VII and VIII. **Discussion:** With the increased use of new non-invasive diagnostic methods, we have more frequently found ectasias of the vertebrobasilar system, and even asymptomatic cases have been diagnosed. The set of symptoms guided our search towards conditions originating in the path of the VII and VIII cranial nerves. BERA with the absence of wave V was decisive to decide for an angiogram. **Conclusion:** Thanks to technological advancement and the introduction of new methods of noninvasive imaging, we have in hands the power to diagnose disorders which went undetected due to their low prevalence and/or diagnostic difficulty.

PS-293

SGP: 7911

Atypical presentation of an intratemporal facial nerve schwannoma

Author(s): Fúlvio Calice Ferreira, Edivarley Rodrigues da Costa Júnior, Luis Carlos Alves de Souza, Antonio de Pádua Aquisti Junior, Pedro Rangel Perez

Keywords: cranial nerve neoplasms, neoplasms, otalgia.

Background: The facial nerve schwannoma is a slow growing benign tumor that originates from the nerve sheath, in a focal way, as a solitary and encapsulated mass. The symptoms may present as facial paralysis, hearing loss, imbalance, palpable mass in the parotid or the patient may even be asymptomatic. Our goal is to report a case of facial nerve schwannoma in which neck and ear pain were the only clinical manifestations. **Case Presentation:** PPO, 23 year old, female with 2 months of left ear and neck pain. Normal bilateral otoscopy. Computed tomography of the mastoid showed the presence of an expansive, soft tissue density mass located in the left mastoid, involving the path of the third portion of the facial nerve and the styloid foramen, causing extensive adjacent bone erosion, measuring approximately 1.3 x 0.6 cm in its largest cross-sectional diameter. She was referred to surgery to resect the lesion. The pathology exam revealed it to be a schwannoma. **Discussion:** The most common symptoms of schwannomas are facial weakness and hearing loss. In our case, extensive bone erosion, extension and unusual exclusive involvement of the third portion of the nerve, explain the unusual symptoms and lead us to consider cholesteatoma, paraganglioma and tympano-jugular cystadenocarcinoma as differential diagnoses. **Conclusion:** Ear pain is a symptom resulting from a wide range of ENT diseases, the physician should investigate this symptom, through an accurate workup, taking into account the differential diagnosis, with special attention to the facial nerve schwannoma.

PS-294

SGP: 7912

Cochlear nerve aplasia as differential diagnosis of congenital sensorineural hearing loss

Author(s): Fúlvio Calice Ferreira, Luis Carlos Alves de Souza, Ana Lúcia Ariano Junqueira, Rafaela Cesário Pereira Maluf, Jayson Peixoto Machado

Keywords: nervous system, nervous system malformations, peripheral nervous system.

Purpose: The aim of this paper is to present a case of aplasia of the cochlear nerve as one among the various differential diagnoses of unilateral sensorineural congenital deafness. **Case Presentation:** INF, 6 years old, born at 28 weeks of gestation, weighing 2.2 kg. The mother reported that two years ago, her daughter had been showing attention deficit and difficulty in responding to sounds coming from the right side. She was also having trouble performing school activities, and she had no other otological complaints. She spent 15 days at the NICU because of her prematurity. **Physical exam:** Otoscopy, cerebellar and balance tests were all normal. Audiometry and tympanometry showed hearing loss in her right ear and normal left ear hearing thresholds. Distortion product and transient otoacoustic emissions showed no response on the right and normal left responses. ABR showed no wave formation in the right ear. Computed tomography did not show structural changes. Her head MRI showed absence of the vestibulocochlear nerve in its inner ear portion on the right. **Conclusion:** Due to the variety of approaches in the face of many causes of sensorineural hearing loss, it is of paramount importance for the ENT to lead a broad and thorough investigation. Using appropriate clinical, electrophysiological and studies, it is possible to diagnose a congenital sensorineural deafness. The aplasia of the cochlear nerve should always be taken into consideration because although rare, when present it may be associated with other diseases and may require intervention.

PS-295

SGP: 7920

Facial palsy as initial symptom of parotid tumors - Case Report

Author(s): Lorenzo Bonino do Nascimento, Renata Regina G. Lorencetti Mahmoud, Romualdo Suzano Louzeiro, Antonini de Oliveira e Sousa, Rui Carlos Ortega Filho

Keywords: diagnosis, facial paralysis, parotid neoplasms.

Introduction: The major salivary gland neoplasms account for 3-4% of all head and neck tumors, 80% involve the parotid gland. Of these only 20% are malignant, and the standard surgical treatment is parotidectomy with facial nerve preservation. **Objectives:** This paper aims at reporting a case of malignant tumor of the parotid gland presenting as initial manifestation of facial paralysis. **Discussion:** This case presents an atypical form of parotid tumor, which began with clinical facial palsy, and according to the literature the usual presentation is that of an asymptomatic mass (approximately 80% in the series), and the mucoepidermoid carcinoma is the most commonly observed histology.

PS-296

SGP: 7921

“Ear Candles” as external auditory canal Foreign bodies

Author(s): Danielle Candia Barra, David Augusto Rodero, Flávia Molina Ferreira, Ludmila Morgado Santos, Kazue Kobari

Keywords: ear, external, foreign bodies, paraffin.

Despite all the risks involved in the extraction of cerumen, there are several common practices so-called “medicinal”, such as paraffin cones, also known as “Ear Candles”. “ Once inserted into the external auditory canal, through the vacuum produced by the heating of the outer cone, cerumen and impurities are supposedly extracted. We report a rare case of foreign body in the external auditory canal caused by the attempted extraction of a cerumen in the ear using these “ear candles” in a 30-year-old patient.

Relapsing polychondritis: a case report

Author(s): Francine Uk Choi, Ana Carolina Simas, George Boraks, Guilherme Sampaio Correia Chiaverini, Marcio Antonio de Souza

Keywords: cartilage, ear cartilage, polychondritis, relapsing.

Introduction: Relapsing polychondritis (RP) is a rare systemic disease of unknown etiology. It manifests itself through recurring inflammation of the cartilaginous tissues, possibly assailing the external ear, nose, joints and the larynx. Structures such as the eyes, inner ear, heart, and blood vessels may also be affected. **Case Report:** I.S.M, 25 years of age, complaining of earaches and edema of the right external ear for months, worsening in the past weeks. He was prescribed ciprofloxacin and NSAID, but his condition did not improve and no changes were found in the tests. **Discussion:** RP is a rare auto-immune disease, with an incidence of 3.5/1,000,000; between the ages of 40-50 years. The case mentioned above is a classic form of manifestation; auricular chondritis, either uni or bilateral, arthritis, and ocular symptoms. Alterations in the nasal cartilage are also common, as well as symptoms related to the bronchial tube and trachea. Symptoms that are less common are hearing loss, nasal deformity, dermatological lesions, other systemic vasculitis and valve dysfunction. The criteria for diagnosis are based on three or more symptoms, two symptoms confirmed with biopsies or three cartilaginous sites, which respond to steroids or immunosuppressants. Treatment varies according to the severity and activity of the disease, in the mild forms, steroids help relieve the symptoms. Methotrexate has also proven effective with refractory patients. **Conclusion:** RP is a disease that has a great variety of clinical manifestations, with a high morbimortality rate. However, once the pathology is suspected, it can be easily diagnosed.

Foreign Body in the tympanic ostium of the Eustachian Tube with spontaneous extrusion - Case Report

Author(s): Ludimila de Oliveira Cardoso, Miguel Eduardo Guimarães Macedo, Wilson Benini Guércio, Amadeu Luís Alcântara Ribeiro, Luiz Augusto Miranda Sanglard, José Felipe Bigolin Filho, Rafael Fernandes Goulart dos Santos, Monik Assis Espindula, Jeronymo Enéas Mescolin, Thiago de Oliveira Barros

Keywords: ear, eustachian tube, foreign bodies, middle, otitis media, suppurative.

Introduction: Foreign bodies (FB) in the ear are common, and are often located in the external ear; they are rare in the middle ear or in the Eustachian tube. **Case report:** female patient, black, 2-years-7-months old, with right-side otorrhea for 4 months, refractory to oral, parenteral and topical antibiotics. The initial procedure was oral antibiotics and topical nasal steroids. After two months, there was right tympanic membrane healing. There were recurrent episodes of ipsilateral acute otitis media in the following 4 months, until, because of a febrile seizure, she was hospitalized. At this point immunodeficiencies were ruled out and the CT scan revealed a FB in the tympanic ostium of Eustachian tube. We inserted a short stay ventilation tube and after about two months, it was spontaneously extruded and the tympanic membrane healed. The patient remained asymptomatic for a long period. At 4 years and 8 months, she was diagnosed with a dry tympanic perforation in the anterosuperior quadrant and small bead-like bodies were seen through. She was admitted for surgery, but progressed to myiasis and extrusion of the FB (beads). **Discussion:** middle ear FB can lead to significant symptoms such as hearing loss, tinnitus, facial paralysis, ear fullness and vertigo. There are few similar cases reported in the literature, such as iatrogenic (molding for hearing aids) and trauma (accidents involving welding or assaults). In this case, there was FB migration through the perforation due to an acute suppurative otitis media. TM healed and, after 2 years of evolution, there was a spontaneous extrusion through a new concurrent tympanic myiasis of the ipsilateral external auditory canal.

Cochlear function monitoring in military personnel exposed to impact noise

Author(s): Monique Antunes de Souza Chelminski Barreto, Fayez Bahmad Junior, Carolina Souza Alves Costa, Lizandra Kely de Sousa Guarita

Keywords: military activities, noise, occupational, otoacoustic emissions, spontaneous.

Introduction: Otoacoustic emissions assessment has shown its importance in detecting small changes in cochlear function that have not been identified in pure tone audiometry in subjects exposed to noise. **Objective:** To use otoacoustic emissions by distortion product (DPOAEs) to study the amplitude, signal-to-noise ratio and occurrence, frequency, before and after exposure to impact noise in subjects from the Brazilian Army. This is an analytical, observational, longitudinal and prospective study. **Methods:** Evaluation of hearing by DPOAEs in 60 military subjects before exposure to impact noise. Subsequently, 30 soldiers were reassessed immediately after exposure (G1) and 30 were reevaluated 24 hours afterwards (G2). All made use of intracanal hearing protection device. **Results:** Statistical analysis showed a significant difference in the occurrence of DPOAEs after noise exposure in the two groups in the frequencies of 6Kz and 8Kz. As to the amplitude, there was a reduction in absolute values, mainly for the G1, the same being true for the signal-to-noise ratio. **Conclusion:** The DPOAEs test was sensitivity enough to detect small changes in amplitude and signal-to-noise ratio, as well as those occurring in military personnel exposed to impact noise.

Prevalence of ENT manifestations in autoimmune rheumatic diseases

Author(s): Tiago Vasconcelos Souza, Diego Rodrigo Hermann, Iulo Sérgio Baraúna Filho, Aldo Stamm, Cassiana Abreu, Gabriela Pascoto

Keywords: aphthous, autoimmune diseases, hearing loss, stomatitis.

Introduction: Autoimmune rheumatic diseases (AIRD) are immune diseases with systemic involvement, which often, throughout their clinical course, affect multiple organs and body systems, causing a series of relevant clinical repercussions in many different medical specialties. ENT manifestations may be present throughout the clinical course of autoimmune rheumatic diseases. **Objective:** The purpose of this study is to assess the prevalence of ENT manifestations in patients with autoimmune rheumatic diseases and a review of the literature. **Study design:** Clinical cross-sectional. **Methods:** Our sample was made up of 22 patients (20-60 years, of both genders) with autoimmune rheumatic diseases, seen in the divisions of rheumatology and otolaryngology of the Complexo Hospitalar Edmundo Vasconcelos. Patients were evaluated by standard clinical exam and audiometry. **Results:** The data obtained showed ENT manifestations in all patients with AIRD (prevalence of 100%). We observed the following prevalence of signs and symptoms in 22 patients with AIRD: Hearing loss (50%), dizziness (45.5%), tinnitus (50%), anosmia (4.5%), rhinorrhea (4.5%), nasal obstruction (18%), pruritus (4.5%), epistaxis (32%), xerostomia (45.5%), TMJ syndrome (18%), peripheral facial palsy (0%); hoarseness (27%), facial hypoesthesia (9%), dysphagia (18%), and 54% had mucosal ulcerations. **Conclusion:** Based on our results, we conclude that ENT manifestations are frequent in patients with AIRD, with mucosal ulceration and audio-vestibular disorders to be the most prevalent signs and symptoms.

Analysis of the quality of life of tinnitus patients and comparative analysis of two methods of measurement

Author(s): Márcia dos Santos da Silva, Renato Telles de Souza, Luiz Carlos Nadaf de Lima, Rafael Siqueira de Carvalho, Renata Farias Santana

Keywords: activities of daily living, quality of life, tinnitus.

Objective: to evaluate the quality of life of patients with tinnitus using the Tinnitus Handicap Inventory and compare the results of this method with a visual analogue scale. **Methods:** In this exploratory descriptive prospective study, the Tinnitus Handicap Inventory was applied to 13 patients with tinnitus of neurotology origin during one year. The reliability of the questionnaire was measured using Cronbach's alpha. The correlation between scores obtained by the questionnaire and the visual analogue scale was performed using Spearman's coefficient. **Results:** Among the 13 patients that participated in this study 84.6% were females, with a mean age of 51.92 years. The average duration of symptoms was 26.38 months. Concerning tinnitus severity, 30.8% of patients had negligible symptoms and 15.4% were mild, with great and good qualities of life, respectively; while 23.1% had moderate symptoms with a reasonable quality of life. At the other extreme, 15.4% of patients had severe and 15.4% had catastrophic tinnitus, with bad and terrible qualities of life, respectively. The reliability of the questionnaire was considered satisfactory ($\alpha=0.920$). There was a positive correlation between

the questionnaire and the visual analogue scale ($p=0.633$). **Conclusions:** Most of the patients had a negligible or mild degree of discomfort and could get used to it without much interference in their routine activities. Visual analog scales have similar efficacy to the Tinnitus Handicap Inventory in evaluating these patients

PS-304

SGP: 8003

Otosclerosis: Epidemiology, stapedotomy results and complications in residency training

Author(s): Marco Antonio Ferraz de Barros Baptista, Gustavo Fernando Tognini Rodrigues, Fernanda Lion Martins Adami, Juliana Frozzoni Lemes, Caio Barbosa Campanholo, Marcos Luiz Antunes, Priscila Bogar Rapoport

Keywords: hearing loss, otosclerosis, stapes surgery.

Introduction: Otospongiosis or otosclerosis is a common degenerative and hereditary disease of the labyrinthine capsule and occurs mainly in women aged between 20 and 30 years of life. In recent decades stapedotomy has increasingly tended to become the most used surgical technique for the treatment of otosclerosis. This study analyzes the results of stapedectomies carried out in a medical residency program at the Mario Covas Hospital. **Study design:** Clinical retrospective. **Materials and Methods:** Retrospective analysis of 16 patients with otosclerosis who underwent stapedotomy performed by otolaryngology third year residents and clinical and audiological follow up. **Results:** Hearing improvement proved by audiogram: air-bone gap closure in 14 patients (87.5%). The complications were dizziness (6 patients - 37.5%); tinnitus (2 patients - 12.5%); dislocation of the joint between incus and malleus (one patient - 6.25%); displaced prosthesis (one patient 6.25%); external otitis (one patient 6.25%), taste alterations (one patient - 6.25%) and Gusher (one patient - 6.25%). **Conclusions:** Stapedotomy has been regarded as a good therapeutic choice to the treatment of conductive hearing loss caused by otosclerosis, considering it has low morbidity and high success rates even in a teaching hospital, providing better quality of life to these patients.

PS-305

SGP: 8005

Squamous cell carcinoma of the middle ear

Author(s): Marcos Antonio Fernandes, Marcia dos Santos da Silva, Renata Farias Santana, Renato Telles de Sousa, Luiz Carlos Nadaf de Lima

Keywords: carcinoma in situ, ear diseases, ear neoplasms.

Squamous cell carcinoma of the middle ear, is a rare tumor, of which the precise origin remains uncertain. Most are preceded by suppurative chronic otitis media, usually affecting patients over 40 years of age. Main symptoms include otalgia, otorrhea and hearing loss. Despite technological advances in the many complementary tests, early diagnosis still poses a challenge, mainly due to difficult access and determining the extent of the injury. This paper reports on a 42-old man who came to our service with a history of otorrhea for more than 2 years and current otalgia, after studying the case, we diagnosed squamous cell carcinoma of ear.

PS-307

SGP: 8020

Atypical manifestation of vestibular schwannoma

Author(s): Rui Carlos Ortega Filho, Guilherme Webster, Antonini de Oliveira e Sousa, Patricia Maria Sens Marques, Mariana Lopes Favero

Keywords: acoustic, hearing loss, neuroma, sudden, tinnitus.

We describe a case report of a patient with an atypical manifestation of vestibular schwannoma. **Case:** Female, 46 years, with vertigo, binaural hearing loss and ear fullness, with an ENT examination suggestive of cochlear injury. After six months, the patient developed a worsening of her previous symptoms and started having right side tinnitus. Further exams maintained the signs of cochlear damage, except for the vestibular test (hyporeflexia). MRI showed an expansive lesion in the right cerebellopontine angle. This report warned us about atypical manifestations of vestibular schwannomas, which must always be considered in investigating and diagnosing hearing loss.

PS-308

SGP: 8034

Destruction of temporal bone by squamous cell carcinoma

Author(s): Renata Farias de Santana, Renato Telles de Souza, Luiz Carlos Nadaf de Lima, Marcos Antônio Fernandes, Márcia dos Santos da Silva, Leandro Tavares Flaiban, Emily dos Santos Franco

Keywords: carcinoma, carcinoma, squamous cell, temporal bone.

The abstract was not sent

PS-309

SGP: 8054

External Auditory Canal Cholesteatoma: Report of 03 cases and Literature Revision

Author(s): Nelson Alvares Cruz Filho, Rogerio Ramos Caiado, Danilo Anunciatio Sguillar, Henrique M. S. Paiva Santos, Karina M. Kanashiro

Keywords: cholesteatoma, ear canal, review literature as topic.

Introduction: Cholesteatoma of external auditory is a rare entity with an incidence of 1:1000 in patients with ear complaints. In Denmark the incidence was reported as 0.3 cases per 100,000 inhabitants per year, sixty times less than the middle ear cholesteatoma. Since 1980 it was possible to distinguish it from other entities, such as keratosis obliterans. **Objective:** We present a series of 03 cases of CEAC and correlate them with studies and reports in the present literature. **Discussion:** In 2006, Owen et al. reviewed the only series of 8 patients that had been published since the first description by Toynebee has 1850. In the present literature, there are only studies mentioning it as differential diagnosis. Cardinal symptoms are unilateral otorrhea, unilateral conductive hearing loss; usually without pain as in keratosis obliterans. The location of the most common presentation is the floor of the EAC, and in idiopathic cases it involves the anterior and posterior regions of the ear canal. Further studies are needed in order to delineate the pattern of clinical presentation, epidemiology and causes of CEAC. Regarding etiology, it was believed that it is related to the inability or reduced migration of the EAC epithelium. Idiopathic cases were associated with malformation of the first branchial arch, recurrent microtrauma, and tobacco. The secondary cases may be explained by obstructive (stenosis, exostoses, nevi, mycetoma) or anatomical defects of the EAC (post traumatic, post-op) The treatment is surgical, with removal of the cholesteatoma. Selected cases may be followed up, with cleaning in an outpatient basis.

PS-310

SGP: 8073

Diagnosis and treatment of labyrinthine fistula

Author(s): Priscila Yukie Aquinaga, José Jarjura Jorge Junior, Amanda Feliciano da Silva, Aden Luigi Castro Testi, Henrique Pedro Magoga Filho, Noelle Kistemarcker do Nascimento Filho, Renato Cardoso Guimarães

Keywords: cholesteatoma, fistula, otitis media.

Labyrinthine fistula is one of the most common complications of chronic otitis media. The lateral semicircular canal is the most affected. Clinical presentation is varied, some fistulas are asymptomatic while others are associated with different degrees of alterations in auditory and vestibular function. Clinical findings are highly suggestive, although not pathognomonic. CT scan is the best exam and it can present suggestive findings. Treatment is done through surgical closure of the fistula with powdered bone, fascia temporalis or bone wax, but there is no a consensus regarding the best technique.

PS-311

SGP: 8076

Characteristics of the patients undergoing treatment at the tinnitus ward of a reference clinic

Author(s): Giuliano Bongiovanni, Suemy Cioffi Izu, Fernando Hirose, Gustavo Ribeiro Pifaia, Ektor Tsuneo Onishi

Keywords: epidemiology, risk factors, tinnitus.

Introduction: Tinnitus is the perception of a noise in the absence of an acoustic stimulus. In the USA, it is experienced by 12-14% of the population, and its prevalence increases with the age. Risk factors include otological, metabolic, cardiovascular diseases, and hearing loss. **Objectives:** to

determine the epidemiological characteristics of the patients undergoing treatment at the Tinnitus Ward in an university hospital. **Methods:** this is a retrospective study, involving 1,033 patients of the tinnitus ward in a university hospital between 1999 and 2010, considering: age, gender, duration of symptoms, tinnitus localization and characteristics, worsening factors, audiometric changes and other associated diseases. **Results:** Among the 1,033 patients, 59.24% were females and 40.56% were males. Prevalence increases with age, most frequently found between 51 and 70 years of age. In 31.10%, the tinnitus was located in the left ear; in 21.71%, in the right ear, and in 37.89%, it was a bilateral symptom. It was described as a shrill sound in 26.38%; as a whistle in 22.11%; as a cicada in 13.77%; as a waterfall in 10.68% and pulsatile in 4.56%. Audiometric alterations were observed in 63% of the patients, hypertension in 43%, diabetes mellitus in 16%, hearing loss in 48% and hyperacusia in 8.24%. **Conclusions:** Most of our patients were women, mostly between 51 and 70 years old. The tinnitus is usually bilateral and described as a shrill sound. Audiometric alterations were observed in 63% of the patients and hypertension and diabetes mellitus in 43% and 16% respectively.

PS-312

SGP: 8078

Surgical Treatment of Chronic Suppurative Otitis Media: Impact on quality of life

Author(s): Juliana Antonioli Duarte, Marcos Luiz Antunes, Ricardo Frazatto, Carlos Eduardo de Abreu, Marília Yuri Maeda, Laila Carolina da Silva

Keywords: evaluation of results of therapeutic interventions, otitis media with effusion, quality of life.

Introduction: Chronic otitis media is the chronic inflammation of the mucous membrane lining the middle ear (OM) and the mastoid cells for more than three months. There is much discussion in the literature concerning the effectiveness of surgical treatment for chronic otitis media (COM). Although there are many articles with objective data on disease recurrence, rates of hearing improvement and the presence of otorrhea, little is discussed about the impact of the disease on the quality of life of patients and their satisfaction after surgical treatment. **Objective:** To evaluate the impact of surgery with or without mastoidectomy and tympanic-ossicular reconstruction on the quality of life of patients with chronic suppurative otitis media, who underwent tympanomastoidectomy surgery and to correlate with hearing quality, disease recurrence and the presence of postoperative otorrhea. **Method:** A longitudinal prospective study, done with clinical evaluation, audiometric exams and a quality of life questionnaire (CSE) in the pre and post operative of patients who underwent surgery with or without mastoidectomy and eardrum-ossicular reconstruction, because of chronic suppurative otitis media at Diadema State Hospital and São Paulo Hospital. **Results:** in progress.

PS-313

SGP: 8118

Hemorrhagic bullous myringitis - case report

Author(s): Vinicius Ribas de Carvalho Fonseca, Denise Braga Ribas, Eliza Mendes de Araujo, Antonio Celso Nunes Nassif Filho, Diego Augusto de Brito Malucelli, Cristiane Popoaski, Suzana Yumi Suzuki, Eduardo Lopes El Sarraf

Keywords: ear diseases, otitis externa, tympanic membrane.

Introduction: bullous myringitis is an inflammation of the tympanic membrane, secondary to viral or bacterial infections. Epidemiology is varied, and some studies have considered the myringitis as part of clinical otitis media, others refer to it as a clinical entity by itself. **Case report:** NP, male, 11 years old, came to the ENT service with right-side otalgia and otorrhea, two days ago, using amoxicillin and otosynalar, without fever, symptoms of nasal obstruction, rhinorrhea, cough, sore throat, ear trauma or barotrauma. Otoscopy showed a collection of hemorrhagic aspect occupying approximately ¼ of the tympanic membrane in the upper quadrant of the right ear. No signs of mastoiditis. After 15 days, he experienced improvements upon clinical and his physical exam showed an intact TM with a clot. After tympanometry (bilateral type A curve) we sealed the diagnosis of hemorrhagic myringitis of probable viral etiology, when we terminated the amoxicillin and maintained him on otosynalar. **Conclusion:** Recognition of the clinical picture is essential for a correct diagnosis, thus reducing the injudicious use of antibiotics, for the treatment is expectant.

PS-314

SGP: 8119

Infantile extensive cochlear osteodystrophy : case report

Author(s): Cristiane Goncalves Cordeiro, Fernanda Resende Silva, Isabele Favoretto Peccini, Lulo Baraúna Filho, Nelson Fabrício Goetten de Lima

Keywords: child, conductive, hearing loss, otosclerosis.

Hearing loss is a common finding in the pediatric population, for it is a relatively common consequence of respiratory symptoms of the upper airway (UA). In rare cases, the etiology of this loss is the result of primary diseases of the middle or external ear like stenosis of the external auditory canal (EAC), chronic infections, abnormalities of the ossicular chain (stapes ankylosis) and congenital malformations. This study reports a case of extensive temporal bone osteodystrophy, which symptoms began at age nine and quickly evolved to a mixed pattern of hearing loss bilaterally.

PS-315

SGP: 8148

Profile of patients with residual perforation after tympanoplasty

Author(s): Joyce Oliveira de Lima, Cecília Pereira Paes, Larissa Magalhães Navarro, Erika Baptista Luiz Badarane, Theago Barros Silva, Renato Valentim Brasil, Diego Costa Farias

Keywords: otitis media, tympanic membrane perforation, tympanoplasty.

Abstract: Otitis media is a worldwide prevalent disease and despite all the scientific advances, is still considered an important public health problem. Tympanoplasty aims to reconstruct the tympanic membrane, restoring protection to the middle ear and improving hearing. **Aim:** To evaluate the profile of patients with persistent perforation after tympanoplasty, at the University Hospital, from January, 2009 to December, 2010. **Materials and Methods:** We had 20 patients with chronic otitis media without cholesteatoma, who underwent tympanoplasty, without achieving closure of the perforation. **Study design:** Retrospective, through analysis of medical records. **Results:** Factors such as gender, age, nasal symptoms associated otological surgery and bilaterality of the disease did not influence the outcome. The size and location of the perforation, duration of disease and low socioeconomic status contributed significantly to the surgical failure. **Conclusion:** Surgery failure was associated to such factors as: central perforation, large size, disease duration longer than one year and low socioeconomic status of patients.

PS-316

SGP: 8152

Wegener's Granulomatosis - Otological Manifestation as first Symptom

Author(s): Carla Fabiane da Costa, Elaine Maria Prandel, Davi Dequech Ferreira, Manoel Shizuo Fugii Junior, José Fernando Polanski

Keywords: hearing loss, otitis media, wegenger granulomatosis.

Wegener's granulomatosis is a systemic vasculitis, affecting small and medium-sized vessels of the upper and lower respiratory tracts and the kidneys. We describe the case of a 50-year-old woman, with otological manifestation as first symptom and favorable outcome after proper diagnoses and treatment.

PS-317

SGP: 8161

Evaluation of patients with Chronic Cholesteatomatous Otitis Media undergoing mastoidectomy

Author(s): Daniel Souza Curi, Henrique Pedro Magoga Filho, Aden Luigi Castro Testi, Noelle Kistemarcker do Nascimento Bueno, Godofredo Campos Borges, José Jarjura Jorge Júnior

Keywords: cholesteatoma, mastoid, otitis media.

Introduction: Cholesteatomatous chronic otitis media (CCOM) is characterized by an aggressive behavior, with serious sequelae. **Objective:** to analyze the signs and symptoms associated with the CCOM, and to assess audiometric results after mastoidectomy. **Method:** the study was retrospective in 100 patients undergoing mastoidectomy, in the period between 2001 and 2009. Of these, 57 featured CCOM with surgical indication. **Results:** the age of

the group at the date of surgery varied between 7 to 57 years (average 29); regarding gender, 30 were men (52.64%) and 27 women (47.36%); all had otorrhea and hypoacusis and only 2 (3.5) had otalgia. Otoscopy showed perforation of the tympanic membrane with purulent secretion. Computed tomography (CT) scan done in 39 patients (68.42%) showed signs of chronic mastoiditis with variable bone erosion. Concerning post-surgical complications, 3 patients (5.25%) had polyps, 1 (1.75) developed a labyrinthine fistula and 1 case (1.75) evolved to a brain abscess. Audiometric comparative analysis between the pre and postoperative care (concerning the average of frequencies 500, 1000 and 2000 Hz) showed that, on average, hearing loss after mastoidectomy did not exceed the limit of 50 dB. The percentage of variation of these average values showed that in almost half (46%) of the sample there were no changes and larger losses decreased gradually. **Conclusion:** data tend to show that on average, there was no reduction in the hearing of the patients in the sample after the procedure.

PS-318

SGP: 8163

Necrotizing external otitis in a 98-year-old diabetic man

Author(s): Márcio Cavalcante Salmito, Maria Carmela Cundari Boccalini, Fátima Regina Abreu Alves, Rui Carlos Ortega Filho, Antonini de Oliveira e Sousa, Patrícia Maria Sens Marques, Lorenzo Bonino do Nascimento

Keywords: facial paralysis, otitis, otitis externa.

Introduction: Necrotizing external otitis is an infection of otological origin, potentially compromising the patient's life. It occurs mainly in elderly, diabetic or immunocompromised persons. The most common causative agent is *Pseudomonas aeruginosa*. Treatment of necrotizing otitis externa includes correction of immunosuppression when possible and local treatment of the auditory canal as well as prolonged antibiotic therapy and, in selected patients surgery. **Case report:** A 98-year-old black man, with insulin-dependent diabetes complained of intense otalgia in the left ear for the past 02 months, with otorrhea. Clinically treated, he developed polyps on the posterior wall of the external acoustic meatus and facial paralysis. We ordered a temporal bone CT scan, which showed opacification of the mastoid, with erosion of the EAM bone wall. He was treated with intravenous antibiotics and a conservative mastoidectomy, ruling out malignancy. He developed persistent otorrhea and otalgia, being treated with antibiotics for 6 weeks in an outpatient basis, with favorable outcome. **Discussion:** this is a typical case of necrotizing external otitis, with good results after clinical treatment.

PS-320

SGP: 8167

Vestibular Evoked Myogenic Potential: reference values in normal subjects

Author(s): Ricardo Schaffeln Dorigueto, Renata Souza Curi, Patrick Rademaker Burke, Paula Ribeiro Lopes, Mateus Claudino Canarella, Mário Sergio Lei Munhoz

Keywords: methods, reference values, vestibular evoked myogenic potentials, vestibular function tests.

Introduction: Vestibular Evoked Myogenic Potential (VEMP) evaluates muscular response to sound stimuli; VEMP recorded in extra-ocular muscles is called ocular VEMP (OVEMP) and evaluates the vestibulo-ocular pathways. Besides being an electrophysiological examination, noninvasive, of low cost and easy implementation, it does not cause discomfort to the subject assessed. **Objective:** to establish reference values in a apparently normal population. **Methods:** twenty two adults, 16 men and 06 women with no neurological complaints were selected. The stimuli was 1,000 Hz tone bursts, at the intensity of 100 dBnHL and band-pass filter ranging from 10Hz to 1500Hz. The tracings were analyzed in relationship to latency, amplitude and N1 and P1 symmetry. **Results:** no significant difference was observed between the sides of stimulation in terms of latency and amplitude. **Conclusions:** OVEMP proved to be a reliable tool in the evaluation of vestibular function, and can be used in clinical applications.

PS-321

SGP: 8170

Lidocaine test for tinnitus: indications and technique

Author(s): Bruno Borges de Carvalho Barros, Gustavo Ribeiro Pifaia, Fernando Kaoru Yonamine, Fernando Takashi Hirose, Ektor Tsuneo Onishi

Keywords: lidocaine, techniques, tinnitus.

Introduction: Tinnitus is an extremely common symptom and has a high prevalence in Western societies. Tinnitus can negatively impact quality of life. There are different treatment modalities, ranging from acupuncture to Pharmacotherapy. The discovery that local anesthetics alter and influence the genesis and perception of tinnitus, pointed to a new perspective of pharmacotherapy. Lidocaine has a membrane-stabilizing effect, reducing spontaneous cochlear activity and modulating neural transmission. This modulation is due to a decrease in sodium influx in ciliated cells and it may have an effect on tinnitus. **Objective:** To describe standardization of the lidocaine test for patients with tinnitus adopted at our Department of Otolaryngology. **Results:** See description of the method. **Conclusion:** We describe a simple and reproducible technique, with low cost due to the use of easily obtained materials, which can assist in the management of patients with tinnitus.

PS-322

SGP: 8175

Facial Paralysis Secondary to Congenital Stenosis of the Internal Auditory Canal

Author(s): Thailise Giroto Ferreira da Silva, Cássio Meinberg Geraige, Jayson Peixoto Machado, Fernanda Marra Martinez, Pedro Rangel Perez, Luiz Carlos Alves de Sousa

Keywords: deafness, facial nerve, hearing loss, unilateral.

Congenital facial paralysis is not easily recognizable, troubling parents and doctors alike, who suspect of neurological problems and predict functional and cosmetic changes. The most common type of congenital facial paralysis is the isolated unilateral paralysis of the lower lip, described in 1974. **Objective:** To report a case of facial paralysis due to congenital malformations of the hearing apparatus - stenosis of the unilateral internal auditory canal. **Case report:** AGC, male, aged 6, brought by his grandmother, complaining of hearing loss in the right ear, with no associated symptoms. He reported facial paralysis on the right side since birth, with a history of prematurity, without complications during childbirth. Otoscopy was unchanged. Audiometry showed severe mixed hearing loss in his right ear. Absence of evoked potentials in RE, and present in LE. Magnetic Resonance of the ears showed stenosis of the internal auditory meatus in RE. **Discussion:** In this case the diagnostic investigation of congenital facial palsy was performed using Evoked Brainstem Response (ABR) which helps because of the proximity of the facial nerve to the nucleus of the auditory centers in the brain stem, and thus it can detect congenital defects affecting both systems. In addition, brain MRI showed stenosis of the internal auditory canal. **Conclusion:** Diagnosis is paramount, and it must be done as soon as possible, especially to distinguish between congenital and acquired lesions, in order to properly manage each case, reducing the possibilities of sequelae.

PS-323

SGP: 8178

Ramsay Hunt syndrome evolving to cerebellitis: case report

Author(s): Maria Carmela Cundari Boccalini, Ana Margarida Chirinea, Waleska Kika Monteiro Aquino, Marcela Gouvea de Oliveira, Franciane Regina Vargas, Andrea Gomes Carreira

Keywords: encephalitis, facial paralysis, herpes zoster oticus.

Objective: To report the case of a patient with Ramsay Hunt syndrome who developed cerebellitis. **Case report:** Patient RSA, 22 years old, male with left ear pain for 4 days, with vesicular eruptions in the ear, left facial paralysis, and dizziness for 3 days. Ramsay Hunt syndrome was diagnosed and treatment was started. After 3 days of treatment, the patient returned with disabling dizziness, gait ataxia and dysdiadochokinesia. Magnetic resonance imaging of the temporal bone showed areas of signal alteration in the brainstem and

in the cerebellar vermis associated with asymmetrical enhancement of the VII / VIII complex on the left, suggestive of local infection/inflammation. Patient improvement in the overall and otological symptoms after 7 days of hospitalization. He was discharged for outpatient follow-up and fully recovered of his facial motor function 50 days after symptoms onset. **Discussion:** Despite the classic symptoms of Ramsay Hunt syndrome, cerebellitis was the differential of this report. This involvement is rare, since the patient is immunocompetent and was treated and followed up early. **Conclusion:** Ramsay Hunt syndrome is a disease that despite being more frequent in the elderly, diabetic and immunocompromised patients, it can affect any healthy individual. Its clinical presentation can be variable depending on the extent of cranial nerve involvement. We must make the diagnosis early so that multidisciplinary treatment is initiated in a timely manner, helping prevent complications.

PS-324

SGP: 8179

Vestibular function in stroke of the carotid territory

Author(s): Anna Paula Batista de Ávila Pires, Heloisa Helena Caovilla, Márcia Maiumi Fukujima, Fernando Freitas Ganança, Maurício Malavasi Ganança, Letícia Aquino

Keywords: dizziness, electronystagmography, stroke, vertigo.

Aim: To evaluate the vestibular function of patients with a history of stroke. **Method:** Cross sectional descriptive quantitative and analytical in 40 subjects after stroke. The patients underwent an evaluation consisting of anamneses, otorhinolaryngological examination, Brazilian version of the Dizziness Handicap Inventory and vector-electronystagmography. **Results:** There were no positional, spontaneous (eyes open and closed) and gaze nystagmus, and the optokinetic nystagmus showed no abnormal findings. Mild abnormalities of latency, accuracy and/or speed of fixed and/or randomized saccadic eye movements, with preserved morphology, were found in 20 patients (50.0%) and 9 patients reported dizziness and imbalance at the time of this study. The smooth pursuit had abnormal gain values in 17 cases (42.5%), while 12 reported an imbalance and dizziness at the time of this study. Rotational nystagmus showed abnormal directional preponderance in the stimulation of the lateral, anterior and posterior canals in one case (2.5%) and in the stimulation of the posterior and anterior canals in one case (2.5%), both cases reported imbalance at the time of this study. The caloric test identified three cases (7.5%) with abnormal labyrinth predominance and two (5.0%) with abnormal directional preponderance of nystagmus, all five cases reported imbalance at the time of this study. Of the 12 patients who did not report dizziness or imbalance at the time of the study, 10 had abnormal saccadic eye movements and five abnormal smooth pursuit tests. **Conclusion:** Patients with history of stroke may present with symptoms and signs of vestibular disorder.

PS-325

SGP: 8184

Facial nerve palsy associated with sudden hearing loss as the initial manifestation of secondary neurosyphilis

Author(s): Antonini de Oliveira e Sousa, Márcio Cavalcante Salmito, Rui Carlos Ortega Filho, Lisandra Megumi Arima, Romualdo Suzano Louzeiro Tiago

Keywords: facial paralysis, hearing loss, sudden, syphilis.

Introduction: otologic syphilis usually includes the middle ear or temporal bone. The goal of this paper is to report an unusual form of secondary neurosyphilis with ENT manifestations. **Case report:** A man, 35-year-old, had an abrupt change in facial movement and hearing loss on the right side with 17 days of duration, preceded by earache and otorrhea. Upon physical exam, he had House-Brackmann II facial paralysis and a normal otoscopic exam. Audiometry showed sensorineural hearing loss on the right. MRI came normal and the treponema test came positive. After treatment for syphilis, the patient improved completely. **Conclusion:** facial paralysis with sudden deafness may be the only manifestations of a patient with secondary syphilis.

PS-326

SGP: 8185

Supralabyrinthine Giant Cholesteatoma: Case Report

Author(s): Marcele Ramos Brandão, Adriana Burgos Senna, José Ney Almeida, Nilavano Aves de Andrade, Loren de Britto Nunes

Keywords: case reports, cholesteatoma, facial paralysis.

Cholesteatoma are keratinized squamous epithelium tumors, which are characterized by slow growth, invasion of adjacent structures, bone erosion and mutilating complications for the patient. These lesions can be congenital or acquired and are located primarily in the tympanic-mastoid segment, petrous apex, cerebellopontine angle, jugular foramen, and between the layers of the tympanic membrane, which has been more recently described. The annual incidence of cholesteatoma is 3 cases per 100,000 in children and 9 cases per 100,000 in adults, being more common in men. These tumors can achieve large sizes, and are called giant cholesteatomas. Its actual prevalence in the literature is still quite controversial and this is a consequence of a small number of cases reported. Giant cholesteatomas can bring several complications such as: intracranial meningitis, abscesses and cavernous sinus thrombosis; and temporal bone - mastoiditis, labyrinthine fistula, facial nerve paralysis and labyrinthitis. The treatment of choice is surgical, aiming at total tumor removal. Because they are rare and poorly reported in the literature, giant cholesteatomas still require further studies. The aim of this study is to present a case report of a patient with a giant supralabyrinthine cholesteatoma and its complications.

PS-328

SGP: 8187

Cerebellopontine angle tumors: clinical aspects, audiometric and MRI findings

Author(s): Lilian Lacerda Leal, Milena Chagas Magalhães, Maria Eudiane, Otavio Marambaia, Patricia Brandão Pantoja, Tatiana Silveira Velasco

Keywords: acoustic, cerebellopontine angle, magnetic resonance imaging, meningioma, neuroma.

Cerebellopontine angle tumors represent 8-10% of intracranial tumors, vestibular schwannoma is the most frequent, meningiomas are the second most frequent. Clinically, lesions of the cerebellopontine angle may show similar signs and symptoms including similar CT scan findings, and sometimes the differential diagnosis can be established by MRI or only by pathological examination of the specimen.

PS-329

SGP: 8192

Internal auditory canal lipoma - Case report

Author(s): Marcos Mocellin, Rita de Cássia Cassou Guimarães, Luiz Guilherme Patrial, Maria Theresa Costa Ramos de Oliveira, Francisco Luis Busato Grocoske, Otávio Pereira Zanini, Renata Mainardes Sawczuk

Keywords: canal, labyrinth diseases, lipoma.

Intracranial lipomas are uncommon congenital malformations that are often asymptomatic. They are very rarely seen in the inner ear and can also be found in the internal auditory canal and in the cerebellopontine angle. We present here a case of an inner ear lipoma in the internal auditory canal, which worsened the hearing loss and tinnitus in a patient with Noise Induced Hearing Loss (NIHL). Intracranial lipomas have characteristic features on CT and MRI, and it must be taken into consideration in the differential diagnosis of inner ear pathologies.

PS-330

SGP: 8193

Unilateral Otorrhea Caused by an External Auditory Canal Cholesteatoma

Author(s): Thailise Giroto Ferreira da Silva, Fernanda Marra Martinez, Jayson Peixoto Machado, Pedro Rangel Perez, Fúlvio Calice Ferreira, Luiz Carlos Alves de Sousa

Keywords: bilateral, cholesteatoma, hearing disorders, hearing loss.

Importance of Newborn Hearing Screening in the Early Diagnosis of Congenital Unilateral Hearing Loss

Author(s): Thailise Giroto Ferreira da Silva, Pedro Rangel Perez, Fernanda Marra Martinez, Jayson Peixoto Machado, Aldo José Bellodi, Luiz Carlos Alves de Sousa, Cássio Meinberg Geraige

Keywords: deafness, hearing loss, neonatal screening.

Pediatric hearing loss has an important impact on the community, considering the economic standpoint - involving high costs for its detection and rehabilitation; and considering the psychosocial point of view, for the individual himself, his family and even society in general. In order to facilitate early diagnosis of hearing loss in childhood, the Joint Committee on Infant Hearing established internationally accepted criteria, considering the risk factors for developing hearing loss. **Objective:** To report the case of newborns diagnosed with congenital hearing loss in the right ear. **Case report:** C. L., male, 2 months. Born at 38 weeks, cesarean birth, weight 3.350g without obstetrical or pregnancy complications, Apgar score of 9 in the first minute and 10 in the fifth. No family history of congenital hearing impairment. We carried out transient otoacoustic emissions (OEA) measurements, which showed failures in the RE. After one month he was re-submitted to the examination, and failed again concerning the RE. We submitted him to Evoked Brainstem Response (ABR), and there were no waves in the RE. In our case, the hearing screening through OEAs suggested a possible hearing impairment. We continued with our ABR testing and confirmed the diagnosis of unilateral congenital deafness in the right ear; the patient was sent to a specialized center for treatment. **Conclusion:** Deaf children are extreme important to ENTs and Pediatricians. Hearing screening tests must be performed for early diagnosis of neonatal congenital deafness.

Primary lesion of an American Cutaneous Leishmaniasis simulating otitis externa

Author(s): Márcia dos Santos da Silva, Renato Telles de Souza, Eucides Batista da Silva, Jorge Augusto de Oliveira Guerra, Renata Farias Santana, Emily dos Santos Franco, Marcos Antonio Fernandes

Keywords: cutaneous, infection, leishmaniasis, otitis externa, staphylococcal infections.

Leishmaniasis is a parasitic infectious disease with diverse clinical presentations. Its presentation in Otolaryngology is usually mucocutaneous and the primary cutaneous lesion is rare in ENT sites. We report a case of a patient with cutaneous leishmaniasis whose primary lesion reached the whole ear pinna associated with a suppurative process due to secondary bacterial infection.

Etiological investigation of hearing loss in a Universal Newborn Hearing Screening program

Author(s): Katia Cristina Costa, Tania Pereira, Mariza A C Pomilio, Edi Lúcia Sartorato

Keywords: genetics, hearing loss, neonatal screening.

Introduction: The Newborn Hearing Screening Program (NHSP) is a way to achieve the diagnosis of hearing loss, 50 to 75% of hearing loss cases are likely to be diagnosed in the nursery. **Aim:** Our aim was to show the results of the etiology study carried out in hearing impaired diagnosed through the NHSP program. **Materials and methods:** retrospective study of the records of 17 hearing impaired patients diagnosed between August 2003 to December 2006. We analyzed the results of laboratory, imaging and genetic tests. **Results:** There were 7 cases of infants who remained in the Newborn Intensive Care Unit (NICU), 4 newborns had history of premature birth and in 3 newborns the hearing impairment was due to prenatal anoxia. Seven patients had a genetic cause. Two newborns had a history of infectious disease. **Conclusion:** The most prevalent etiologies in this study were genetic and perinatal causes. Knowledge about the etiology of hearing loss and its incidence in the population is extremely important because it can be prevented by public health measures. Etiological research on hearing impairment can help patients and their families, as well as the doctor in the prognosis of hearing loss.

Effects of the occlusal appliance and acupuncture in the treatment of patients with dizziness, tinnitus and headaches related to temporomandibular dysfunction

Author(s): Eduardo Affonso dos Reis, Edson Zangiacomini Martinez, Miguel Angelo Hyppolito

Keywords: acupuncture, dizziness, headache, temporomandibular joint dysfunction syndrome, tinnitus.

Dizziness, tinnitus and headache associated with temporomandibular dysfunction (DTH/tmd) have been fiercely studied. Their anatomical and neurophysiological interactions are important, because they often constitute a set of concomitant symptoms. In recent years, acupuncture has increasingly participated in the treatment of TZC/tmd. The aim of this study was to diagnose, assess and treat TZC/tmd through a multidisciplinary approach - ENT, dentistry and acupuncture. We carried out a clinical prospective study in individuals with chronic TZC/tmd, of more than six months of evolution. Three groups were selected - gral = experimental group; grle = control group; grle/al = group control/experimental. Patients were treated with acupuncture and an occlusal appliance. After 12 consultations of placebo acupuncture without the occlusal appliance (placebo-appliance), received the effective treatment with the appliance (acupuncture + appliance). There was symptom improvements in all groups. The results from the acupuncture + appliance treatment was better than the placebo + appliance. The results from the grle proved the placebo effect of acupuncture. However, when they received the acupuncture + appliance treatment, there was a marked improvement ($p < 0.05$). The acupuncture + appliance showed an early improvement for headache and dizziness. Tinnitus needed a higher number of acupuncture sessions in order to improve. the results from the acupuncture + appliance treatment is effective in improving DTH/tmd symptoms, being better than the placebo-appliance treatment.

Epidemiological correlation between neurotological and vector-electronystagmographic diagnoses

Author(s): Luiz Henrique Schuch, Rita de Cassia Cassou Guimarães, Roberta Weber Werle, Lummy Caroline Yagushita, Otávio Pereira Lima Zanini, Luiz Guilherme Patrial

Keywords: dizziness, ear, inner, labyrinth diseases.

Introduction: is a nonspecific symptom, with varied characteristics, caused by different pathophysiological mechanisms. It may be a common complaint in many diseases. Both dizziness and vertigo may result from primary or secondary functional disorders of the vestibular system. The vestibular function has been investigated in recent times and vector-electronystagmography (VENG) is a major contributor to the exploration of vestibular semiology. **Objectives:** To reveal possible statistical correlations between neurotological diagnoses and changes in VENG. To determine the percentage of patients with labyrinthine disorders that have changes in VENG. Find out how much we can rely on VENG to establish a neurotological diagnosis. **Methods:** This is a retrospective, cross-sectional study carried out through the analysis of 186 medical records during the period of 2003 to 2008. **Results:** One hundred and seventy-two patients had symptoms of vertigo/dizziness; among them, 117 had abnormalities in VENG and only 40 had normal results despite having labyrinthine symptoms. The most common abnormality found in the VENG was peripheral vestibular irritative syndrome (SVP). **Discussion:** The most common neurotological diagnoses is benign paroxysmal positional vertigo. Most patients with vertigo/dizziness have changes in VENG testing. Statistical significance was found associating VENG (irritative peripheral vestibular syndrome) with vascular abnormalities, with a P -value=0.026. **Conclusion:** VENG proved to be an important complementary exam to confirm labyrinthine disorders. However, alone, it did not help find the patient's pathology. Therefore, the following are still essential: anamnesis, ENT exam, neurological and cardiovascular studies, associated with investigation of the auditory system for a precise neurotological diagnosis.

Comparative analysis of 2,140 audiograms of workers from five different industries

Author(s): Alexandre Scalli Mathias Duarte, Alexandre Caixeta Guimarães, Guilherme Machado de Carvalho, Laiza Araujo Mohana Pinheiro, Marcelo H. Sampaio, Everardo Andrade da Costa

Keywords: audiometry, hearing loss, noise-induced, occupational health, working environment.

Noise is considered the third largest cause of environmental pollution, and more damaging when it happens in the workplace. When exposure to noise is intense and continuous, it may cause NIHL (noise induced hearing loss). **Objectives:** To evaluate the distribution of the mean audiometric thresholds in the frequencies of 3, 4 and 6 kHz of workers from different industries, according to the duration of exposure. **Materials and Methods:** Retrospective data obtained from seven companies, from five different industries, a footwear company, a brewery, two ceramic factories, two steel works and two cargo transportation companies. 2,140 audiograms were analyzed and we calculated the mean audiometric thresholds in the frequencies of 3, 4 and 6 kHz for each ear. **Results:** Comparing the categories, the mean audiometric value for each ear was higher among the cargo transportation workers. In all industries the left ear showed worse values than the right ear. We found an association between the duration of noise exposure and audiometry values ($p < 0.0001$). **Conclusion:** There was significant worsening in the mean values of frequencies 3, 4 and 6 kHz considering duration of exposure in all occupational categories analyzed. The left ear hearing thresholds were worse than the right, regardless of the person's occupation.

Concurrent diseases in the same patient: Otosclerosis in the right ear and viral-related deafness in the left ear

Author(s): Thalisse Giroto Ferreira da Silva, Jayson Peixoto Machado, Fernanda Marra Martinez, Antonio de Pádua Aquisti Junior, Luiz Carlos Alves de Sousa

Keywords: bilateral, hearing loss, mumps virus, otosclerosis.

Otosclerosis is a hereditary degenerative disease of the labyrinthine capsule, where there are pockets of new bone formation with increased local blood supply. Hearing loss is unilateral in approximately 80% of the patients. Deafness caused by mumps is a cause of acquired hearing loss. The onset is usually sudden and results in permanent hearing damage. This paper aims to report a patient who has bilateral hearing impairment of different etiologies: otosclerosis in her right ear and deafness in her left ear of viral etiology. **Case report:** KAMA, female, 36 years, has had long standing bilateral hearing loss, worse in left ear. Without other complaints. She reports having had mumps in adolescence. Normal otoscopy in both sides. Audiometry showed complete hearing loss in the left ear and conductive hearing loss in right ear. Immittance showed a reduced type A curve in the right ear and no stapedius reflexes on the same side; the left ear had a type A curve. Evoked potential brainstem response (ABR) had no signs suggestive of retrocochlear disorder. **Discussion:** Through the patient's history associated with her physical exam and laboratory tests, we found we were facing two different ear diseases in the same patient. In the right ear, otosclerosis is the most likely diagnosis due to normal otoscopy and audiometric changes. **Conclusion:** It should be noted that hearing loss is a major otological complaint and its causes are various, but the coexistence of diseases in the same patient is rare.

Maintaining the high pass filter at 100Hz to capture the frequency-specific ABR

Author(s): Mariana Lopes Fávero, Maria Cristina Moreno Pássaro, Patrick Burke, Paula Lopes, Fernando Leite de Carvalho e Silva, Alfredo Tabith Júnior

Keywords: auditory, brain stem, evoked potentials, hearing, protocols.

Introduction: During the recordings of frequency-specific ABR, reducing the high pass filter to 30Hz increases the amplitude of wave V, making it more visible on the threshold, but it increases artifacts and hampers trace recording. **Objective:** To determine the electrophysiological threshold for frequency-specific ABR and establish the frequency variations in wave V latency while maintaining the high pass filter at 100Hz. **Methods:** A prospective study of 14 normal-hearing children was performed. ABR in response to 500Hz, 1000Hz and 2000Hz tone bursts were recorded bilaterally in the intensities of 80dBHL, 60dBHL, 40dBHL, 30dBHL and 20dBHL. High pass filter at 100Hz was used. The electrophysiological threshold and the wave V average latency for each variable were analyzed. **Results:** Wave V was present in response to the three stimuli tested bilaterally at 30dBHL in almost 100% of the subjects. Only one patient showed thresholds at 40dBHL to 1000Hz tone bursts in the right ear. Wave V was detected in 78.57% of the subjects at 20dBHL 1000Hz and 2000Hz tone bursts, and in 64.18% at 20dBHL 500Hz tone bursts in the left ear. At the same intensity, for the right ear, 91.66% of the subjects showed wave V for 2000Hz tone bursts, 84.61% for 1000Hz tone bursts and 61.53% for 500Hz tone bursts. **Conclusion:** The protocol was efficient in predicting hearing thresholds of the subjects and was consistent with the literature.

Auditory and vestibular complaints associated or not with systemic diseases in elderly patients.

Author(s): Claudia Maria Barbosa Souto, David Campos Wanderley, Tiago Brito Barroso, Therezita M. Peixoto Patury Galvão Castro

Keywords: auditory perception, frail elderly, postural balance.

Introduction: communication is a fundamental tool for humans fundamental tool, and we suffer from a gradual degenerative processes, such as auditory and vestibular dysfunction due to the aging, which affects life quality. **Aim:** to characterize the prevalence of auditory and vestibular complaints which result in bio-psychosocial disorders in elderly patients. **Materials and Methods:** 58 volunteers with age between 60 and 104 years were submitted to an interview with a default questionnaire. The data was analyzed with Epi Info and Microsoft Excel Softwares. Study Design: cross-sectional prospective study; **Results:** 43 were included to the study, corresponding to 74.14% of

the initial sample. Considering the included patients, their mean age was 75.86%, median of 73 years and standard deviation of 12.12 years. 12% of the patients had no complaints; 26% had just auditory complaints; 25% had just vestibular complaints and 37%, auditory and vestibular complaints together; **Conclusion:** It's important to establish an appropriate type of questionnaire in order to facilitate the physician's approach toward the elderly.

PS-341

SGP: 8225

Superior semicircular canal dehiscence syndrome

Author(s): Gabriel de Castro Figueiredo, Pedro Ivo Antoniazzi Paulin, Ana Cláudia Dias de Oliveira, Antonio Issa, Tácito Elias Sgorlon

Keywords: dizziness, hearing loss, nystagmus, pathologic, sensorineural.

Introduction: Superior semicircular canal dehiscence is a pathology which was first described in 1998 by Minor et al; it is a rare disease characterized by discontinuity of the bone walls of this canal in its upper border, due to congenital causes, trauma, or secondary to some diseases. Most patients would look for medical help for vestibular symptoms, such as dizziness, nystagmus, hearing loss and chronic imbalance. They may also have oscillating vision, dizziness and / or nystagmus triggered by high intensity sounds (Tulio's phenomenon), or triggered by increased pressure within the middle ear (Henneberg's phenomenon). **Case report:** A 51-year-old patient diagnosed with superior semicircular canal dehiscence. **Conclusion:** Although considered uncommon, otolaryngologists are required to master its signs and symptoms in order to properly diagnose and treat the patients and avoid medical errors in these regards.

PS-342

SGP: 8228

Video-otoscopy: creation of an image database and a critical review of its application

Author(s): Vitor Guo Chen, Juliana Antonioli Duarte, Alexandre Augusto Kroskisque Palombo, Fernando Freitas Ganança

Keywords: otoscopy, teaching, teaching materials.

Otoscopy is an integral part of the otorhinolaryngologist's physical exam, representing an excellent method for evaluating the external and medium ears. Video-otoscopy makes it possible to generate enlarged images of the external ear and of the tympanic membrane allowing them to be appraised by more than one specialist at the same time, stored for a subsequent re-evaluation and used for didactic ends. In the present paper we present the experience of installing video-otoscopy in our service.

PS-343

SGP: 8230

Bilateral agenesis of the cochlear nerves

Author(s): Vitor Yamashiro Rocha Soares, Pedro Ivo Machado Pires de Araújo, Gustavo Subtil Magalhães Freire, Rafaela Aquino Fernandes Lopes, André Luiz Lopes Sampaio, Carlos Augusto Costa Pires de Oliveira

Keywords: cochlear implants, cochlear nerve, vestibulocochlear nerve diseases.

Imaging of the cochlea and internal auditory canals are increasingly important nowadays because of the growing number of cochlear implants being performed throughout the world. We report a case of a 4-year-old boy who was born deaf and was being evaluated in our service for a possible cochlear implantation. Audiometry showed profound bilateral deafness. Brainstem evoked auditory potentials and evoked otoacoustic emissions were absent in both ears. The magnetic resonance imaging revealed only two nerves in each inner auditory canal, one in the anterior superior quadrant, identified as the facial nerve, and one on the posterior quadrants, representing both the superior and inferior vestibular nerves. The semicircular canals were not seen and the vestibule had a dysplastic morphology. The diagnosis was bilateral agenesis of the cochlear nerves and semicircular canals. The cochlear implant was formally contraindicated because of low success rates.

PS-344

SGP: 8233

Sudden hearing loss: first symptom of vertebral artery dissection

Author(s): Débora Cipriani Dias, Inesângela Canali, Luiza Baptista Mallmann, Denise Rotta Rutkay Pereira, Renata Siciliano Scalco

Keywords: dissection, hearing loss, sudden, vertebral artery.

Introduction: Sudden sensorineural hearing loss (SSHL) is an important medical emergency. We report a case of bilateral vertebral artery dissection with bilateral sudden hearing loss as first symptom and a review of the literature. **Case report:** A 31-year-old man presented with bilateral sudden hearing loss, nausea, vertigo and tinnitus at the emergency room. First brain magnetic resonance imaging (MRI) and neurological physical examination were normal. Audiometric evaluation documented a severe and profound sensorineural hearing loss. With probable diagnosis of Cogan syndrome, and the patient was started on prednisone. During the next days his neurological exam changed abruptly. A second MRI showed bilateral cerebellar and brainstem stroke. The diagnosis of bilateral vertebral artery dissection (VAD) was made by arteriography. Treatment involved stenting and anticoagulation. **Discussion:** Deafness of vascular etiology is usually unilateral and is associated with others neurological symptoms. Bilateral deafness is a rare symptom of VAD and SSHL must always be considered a medical emergency. An MRI must be considered early on if there is a suspicion. **Conclusion:** There are few reports similar to ours. It is important to detect sudden deafness caused by vascular disease as soon as possible. Thus, we must pay attention to neurological signs in case of bilateral sudden hearing loss.

PS-345

SGP: 8235

Unilateral hearing loss as first sign of superficial siderosis

Author(s): Carlos Alberto Mauricio Junior, Roberta L. V. Bezerra, Patricia Araujo de Andrade, Fernando de Freitas Vilela, Lizandra Kelly Guarita

Keywords: hearing loss, hearing loss, hearing loss, hemosiderosis, sensorineural, siderosis, unilateral.

Introduction: Superficial siderosis of the central nervous system (SS) is a condition that occurs in the extracellular and intracellular deposition of hemosiderin on the surface of different CNS structures. **Case Report:** Patient JF, male, 51 years old, seen at the otorhinolaryngological ward of the Brasilia University Hospital with complaints of tinnitus in the right ear for 10 years associated with ipsilateral progressive hearing loss, confirmed by audiometry. Had a diagnosis of superficial siderosis in MRI. Although superficial siderosis of the central nervous system was first described in 1908, it is likely that many physicians still are unfamiliar with this disease because it is rare and not generally described in ENT texts. Sensorineural hearing loss and cerebellar ataxia are the most relevant clinical changes. The first step in the treatment of SS of the CNS is to locate and eliminate the source of bleeding. To date, medical treatment by iron chelation has been proven to be effective. **Conclusion:** It is important that otolaryngologists suspect of superficial siderosis of the nervous system in their clinical practice in order to avoid delays in diagnosis and start treatment as soon as possible. Even mild changes on MRI consistent with an initial degree of SS should not be underestimated in order to avoid serious and irreversible damage to the CNS.

PS-346

SGP: 8244

Paroxysmal Nocturnal Hemoglobinuria: Cause of Vertigo

Author(s): Thailise Giroto Ferreira da Silva, Jayson Peixoto Machado, Maitê Bazetti Basso, Tassiane Bonotto Horvatic, Luiz Carlos Alves de Sousa

Keywords: anemia, hemoglobinuria, vertigo.

Introduction: Dizziness is one of the most common reasons for consultations in otolaryngology and it may be a manifestation of many systemic diseases. Paroxysmal nocturnal hemoglobinuria is one of them and it should be considered in the etiological diagnosis especially in patients with hematological disorders such as anemia and thrombocytopenia. **Objective:** To report a patient with Paroxysmal Nocturnal Hemoglobinuria (PNH) and

recurrent vertigo. **Methodology:** FCT, 36, house maid, with asthenia and intense vertigo for 2 months. On examination: pale + + / +4, acyanotic, anicteric. Otoscopy was normal; oroscopy showed mild gingival bleeding. Additional tests: hemoglobin: 9.0 g / dl; Ht: 31%; Platelets: 110,000; WBC: 2.900. Faced with these hematological results, we consulted with the Hematologist, who ordered: Hamm test; 5% sucrose test and analysis of proteins attached to the glycosylphosphatidylinositol in erythrocytes by flow cytometry which showed changes consistent with PNH. **Discussion:** PNH is an acquired clonal disorder at the level of stem cells, which leads to the production of subpopulations of granulocytes, platelets and red blood cells which are hypersensitive to complement, resulting in hypercoagulability and thrombogenesis, which increases the propensity for thrombotic events and may lead to cellular hypoxia in the inner ear causing dizziness. In our case, the patient had no otolaryngological causes for dizziness and reported improvement after allogeneic bone marrow transplant, we confirmed that the PNH was the cause of recurrent vertigo. **Conclusion:** Facing a patient with vertigo and hematological abnormalities such as anemia, thrombocytopenia and granulocytopenia, one must consider PNH as a causal factor.

PS-347

SGP: 8247

Ear pinna lesion as the only manifestation of amyloidosis

Author(s): Cátia Rodrigues Domingos, Rubiana Ferreira Sousa, Helena Maria Gonçalves Becker, Roberto Eustáquio Santos Guimarães, Paulo Fernando Torrin Borges Crosara

Keywords: amyloidosis, biopsy, ear pinna, hearing loss.

Amyloidosis represents a group of disorders characterized by the deposition of protein fibrils with typical microscopic features. Head and neck amyloidosis may represent a local or systemic disease and can also be associated with plasma cell dyscrasias. Because of the severity of the systemic diseases and the 20% association of plasmacytomas with amyloidosis, it is very important to distinguish these two from the local form of the disease. Protein electrophoresis and abdominal fat aspiration or mucosal lip biopsy must be performed in these cases. The aim of this study is to present an extremely rare case of bilateral amyloidosis involving the external ear in a 42 year-old woman who complained of bilateral hypoacusis and pain. After histopathological analysis of the biopsy specimen and others exams, we diagnosed localized amyloidosis of the EAC. In this rare case, it is crucial to rule out systemic amyloidosis.

PS-348

SGP: 8248

Comparison hearing recovery criteria in idiopathic sudden sensorineural hearing loss

Author(s): Daniel Paganini Inoue, Eduardo Amaro Bogaz, Flávia Barros, Viviane Maria Guerreiro da Fonseca, Norma de Oliveira Penido

Keywords: audiometry, audiometry, hearing loss, pure-tone, speech, speech intelligibility, sudden.

Introduction: The lack of uniformity in most clinical analysis methods for idiopathic sudden sensorineural hearing loss prevents a proper comparison of the different treatment modes found in the literature. The aim is to compare different criteria for hearing recovery in the existing literature using our patients. **Materials and methods:** we carried out a retrospective study in patients with idiopathic sudden sensorineural hearing loss, treated between 2000 to 2010. Our sample was analyzed using various criteria for hearing recovery found in Literature. After determining the most stringent hearing recovery criteria, were added speech audiometry parameters. **Results:** We found a statistically significant difference, among these criteria ($p < 0.001$). Considering the significant hearing recovery percentage distribution, by various criteria, we discovered that the change in functional category for at least one mild degree, showed the lowest significant hearing recovery percentage. By adding the significant hearing recovery criteria through speech audiometry, no differences were found. **Conclusions:** In general, there is a lack of uniformity among the criteria for hearing recovery. The use of speech audiometry parameters wasn't essential to define significant hearing recovery when one uses the method based on the change of functional category in, at last, a mild degree.

PS-349

SGP: 8250

Auditory screening in school-aged children: methodological difficulties

Author(s): Andrea Arantes Braga, Tassiana do Lago, Camila Carrara Yassuda, Lucas Rodrigues Carezzi, Elaine Cristina Cabrini Banda, Myriam de Lima Isaac

Keywords: audiometry, child health (public health), hearing loss.

Introduction: Hearing screening in school-aged children is able to detect hearing impairment at an early age avoiding sequelae in the child's development. **Materials and Methods:** 1st year students of Elementary Education from Batatais, aged 6 years, were assessed through tonal audiometry. The schools were informed of the children who presented abnormal test results and were responsible for referring them to an otolaryngologist. **Objectives:** to examine a large number of individuals, without apparent symptoms, in order to identify those who could have hearing loss, and refer them to specialized services in order to achieve accurate diagnoses and appropriate treatment. **Results:** we examined 591 children and identified changes in 90 of them; but only 16 completed evaluation consisted of otolaryngology consultation, audiometry and tympanometry. 68.7% (11) of the children had a history of ear infections, hearing loss or speech delays, 31% (5) had altered otoscopic exams; 56.2% (9) had alterations in audiometry or tympanometry. **Conclusion:** Hearing assessment is considered a basic health action for school children, and may prevent sequelae in children's learning processes. However, screening is a complex and costly method that in this case was affected by the failure of communication between parents and school officials, and by poor compliance of the population concerning this preventive method. Faced with this, the campaign to be held this year proposes changes in the way parents and schools are informed about hearing screening.

PS-350

SGP: 8251

Superior Canal Dehiscence: occasional finding

Author(s): Jayson Peixoto Machado, Thailise Giroto Ferreira da Silva, Pedro Rangel Perez, Fernanda Marra Martinez, Marcelo Ribeiro de Toledo Piza

Keywords: deafness, nystagmus, pathologic, vertigo.

Introduction: The Superior Semicircular Canal Dehiscence Syndrome, described in 1998 by Minor et al., is defined as the absence of bone covering the superior semicircular canal in the area closest to the dura mater in the middle cranial fossa. **Objective:** To report a case of an accidental finding of the superior semicircular canal dehiscence. **Methods:** IRB, female, 47 years, complaining of fetid otorrhea and hearing loss in her right ear (RE) 3 years after trauma caused by using a cotton swab. She did not have dizziness nor tinnitus. On examination: Otoscopy: RE: central perforation, purulent discharge, LE: normal. Audio and impedance tests showed no change. Computed Tomography of the ear: lack of bone coverage on the superior semicircular canal bilaterally. **Discussion:** The round and oval windows are the two physiological openings of the inner ear hydraulic system. Through a third window, the system is broken and changes happen to the physiology of the labyrinth, causing auditory and vestibular signs and symptoms. Our patient was previously neurologically asymptomatic before the trauma caused by using a Q-Tip, she did not have dizziness, tinnitus, ear fullness, even after intense noise exposures, showing that in some cases patients may be asymptomatic and its discovery is an occasional finding. **Conclusion:** Although the vast majority of patients with superior semicircular canal dehiscence have dizziness associated with nystagmus when exposed to intense sound stimuli, some patients may be asymptomatic because there are still many still unclear pathophysiological aspects.

PS-351

SGP: 8259

Middle ear barotrauma associated with dehiscence of the mastoid and sternocleidomastoid muscle hematoma - case report

Author(s): Janaina Medina da Rocha Berto, Maria Carmela Cundari Boccalini, Ana Margarida Bassoli Chirinéa, Renata Almeida Boucault, Franciane Vargas, Daniele de Lima Soares

Keywords: barotrauma, ear, hematoma, middle.

Barotrauma is defined as an acute or chronic traumatic inflammation caused by changes in atmospheric pressure and the inability of individuals to equalize middle ear pressure with the new atmospheric pressure. Upper airway infections and allergic rhinitis are the most common causes. It can cause edema, transudate, bruising and bleeding in the middle ear, and eventually perforate the tympanic membrane. The middle ear and temporal bone are frequently injured in accidents involving head trauma. The most common cause of temporal trauma in the adult population is automobile accidents. The objective of this study is to report a case of barotrauma, caused by an episode of upper airway infection, leading to a cervical hematoma. According to Teed's classification of middle ear barotrauma, the patient had a grade 4 barotrauma. We conclude that in spite of the otorrhagia and cervical hematoma, no bleeding disorders or previous associated pathologies were found. The hematoma was a result exclusively of the intense barotrauma combined with a dehiscence of the temporal bone that had occurred in a previous accident, which was asymptomatic until then.

PS-352

SGP: 8261

Post-traumatic bilateral facial paralysis - case report

Author(s): Marília Pinheiro Vasconcelos, Nilvano Alves de Andrade, José Ney Almeida, Loren de Brito Nunes, Thiago Alves Alcântara, Adriana Burgos Senna

Keywords: decompression, diagnosis, facial paralysis, surgical.

Introduction: trauma is the second cause of facial paralysis (19-40%) and temporal trauma is presented in 40% of transverse fractures and in 20% of the longitudinal ones. A bilateral case is a rare clinical entity, with an annual incidence of approximately 1 case per 5,000,000. The diagnosis must be made through clinical history, physical examination (House-Brackmann scale), audiological and vestibular assessments, CT scan and electroneurography (ENoG). The latter shows that when over 90% of the nerve is injured, it presents a strong indication for surgical decompression. **Case report:** UAS, 24 years old, victim of a motorcycle accident with severe cranial trauma. The patient developed immediately left facial palsy (grade VI) and after 2 days it affected his right side (grade V). The CT scan revealed longitudinal fracture of the right temporal and a suggestive line of fracture on the left side. ENoG showed 75% degeneration on the right side and 86% on the left. After 15 days of corticosteroid treatment, a new ENoG revealed degeneration of 67% at the right side and 82% on the left one. We chose to decompress the facial nerve on the left side and the patient had progressive improvement on the degree of facial palsy. Now, on the 8th month of follow up, he shows grade I in the House-Brackmann scale. **Discussion:** In the case reported, despite the clear CT evidence of a fracture line on the right but not on the left side and ENoG lesion <90% (82%), we opted for surgical decompression of the left facial nerve, because the patient had total facial paralysis, immediate, on this side, without improvements after 30 days of the trauma and with meaningless development upon electroneurography.

PS-353

SGP: 8262

Universal newborn hearing screening program implementation in a university hospital in a city in southern Brazil: preliminary results

Author(s): Marina Faistauer, Tássia Alicia Marquezan Augusto, Marilise Floriano, Camila Côrrea Tabajara, Claudia Mahfuz Martini, Viviane Bom Schmidt, Renato Roithmann

Keywords: cross-sectional studies, hearing tests, neonatal screening.

Introduction: Newborn hearing screening (NHS) provides early identification of hearing loss in the first months of life, which enables diagnosis and intervention in these children. **Objective:** to describe the epidemiological profile of infants undergoing NHS in a university hospital. **Methods:** Cross-sectional study in a university hospital in the period of October 2009 to September 2010. Newborn hearing screening test was performed on all newborns in the maternity ward. **Results:** The total number of patients was 2,165 children; 17% of these infants failed in the first otoacoustic emissions test; 4% failed the retest; 0.2% had hearing impairment. One newborn received a hearing aid. **Conclusion:** The data in this study is consistent with the current literature. These programs are essential to bring about improvements in the management of children affected by hearing loss.

PS-354

SGP: 8267

Inflammatory myofibroblastic tumor of the temporal bone

Author(s): Gustavo Latorre Samencatti, Felipe Costa Neiva, Jose Ricardo Gurgel Testa

Keywords: ear, granuloma, middle, plasma cell, temporal bone.

The inflammatory myofibroblastic tumor (IMT) is a benign pseudoneoplastic proliferation of unknown etiology that primarily affects the gastrointestinal tract, liver and lung. Differential diagnoses are malignant otitis externa, necrotizing bacterial osteomyelitis, cholesteatoma, granulomatous diseases and other malignancies. This paper reports a female patient, 59 years old, with IMT in the left temporal bone with vertigo and sudden hearing loss. She underwent a thorough investigation showing brain involvement by the neoplasm, developing headache with episodes of seizures caused by the cerebral edema. We chose to treat her conservatively with Deflazacort and azithromycin in an anti-inflammatory dose. The diagnosis of IMT is one of exclusion, CT and MRI scans help in targeting, but only a histopathological study confirms the pathology. There are rare reports in the literature about this type of tumor in the temporal bone; this is the second report of brain involvement and the first reporting survival of more than one year. There is no consensus on the best treatment for IMT of the temporal bone; however, surgical removal of the tumor is the choice whenever possible, reserving corticosteroid treatment for inoperable cases. We have seen an increase in the number of cases of this tumor in the temporal bone in the last 10 years, and its etiology remains uncertain. The temporal bone IMT is rare and represents a clinically distinct pathological entity. Despite being benign, it often has destructive characteristics, with involvement of the middle and inner ears, leading to bone erosion of the mastoid tegmen and consequent intracranial invasion.

PS-355

SGP: 8270

Clinical characteristics of patients with Benign Paroxysmal Positional Vertigo

Author(s): Érika Pérez Iglesias, Renata Botelho Frota, Alexandra Kolontai de Sousa Oliveira, Lília Pereira Abreu Ferro, Mariana Rocha Tetilla, Leticia Boari

Keywords: diagnosis, epidemiology, vertigo.

Introduction: BPPV is a common cause of dizziness and is characterized by brief episodes of vertigo associated with head movement. The diagnosis is based on clinical history and physical examination, especially positioning diagnostic maneuvers. The treatment is highly effective with particle repositioning maneuvers and medication is not usually effective. **Objective:** The objective of this study is to evaluate the clinical characteristics of patients diagnosed with BPPV treated at our service, and determine the elapsed time between symptom onset and the diagnosis of the disease. **Results:** The sample consisted of 55 patients. Regarding gender, there was a predominance of females with BPPV, occurring in 83.6% (46) of the cases. Only 9 patients were men (16.4%). The mean age was 56.6 years (26-84). We observed an increased occurrence of the disease in patients over 60 years. In the sample, it was observed that there was a higher incidence of posterior semicircular canal BPPV (91%). All patients diagnosed with BPPV underwent one or more sessions of particle repositioning maneuvers. 86% of patients were asymptomatic or had significant improvement after treatment. **Conclusion:** BPPV is more common in women after 40 years of age. The posterior semicircular canal is the most affected, as well as the right labyrinth. Nystagmus and positional vertigo was found in almost all cases. The diagnosis of BPPV is still delayed in most cases, impairing the quality of life of patients.

PS-356

SGP: 8283

Surgical treatment of glomus tympanicum

Author(s): Anna Milena Barreto Ferreira Fraga, Luis Francisco de Oliveira, Raíssa Vargas Felici, Paola Scotoni Levy, Mirella Tabachi Vallorini, Jane Maria Paulino, Marcela Estrela Tavares

Keywords: glomus tympanicum, hearing loss, tinnitus.

Glomus tumors represent the most common benign neoplasms of the middle ear and the second in the temporal bone (after vestibular schwannomas). The objective is to report a case of glomus tumor submitted to surgical excision. Female patient, 58 years of age, with pulsatile tinnitus and hearing loss on the right ear with a few months of onset. Right Otoscopy: tympanic membrane was intact, shaded by a reddish lesion. Audiometry: sensorineural hearing loss, mild to moderate in both sides. CT image showing soft tissue lesion near the carotid sinus, invading the tympanic sinus, without bone erosion on the right side. The tumor excised under general anesthesia in a transcanal approach and went uneventful. The patient did well postoperatively with improvement of pulsatile tinnitus. Pathological anatomy of the tympanic glomus. Glomus are also called paragangliomas or chemodectomas. They originate from the growth of paraganglia. It predominates in females (75%) in the ratio of 4 to 6:1, the peak incidence is in the fifth decade. They are slow-growing, destructive tumors and there are metastases in 4 to 6.5% of cases, and they can recur within five years after removal. The most common symptoms are hearing loss and throbbing tinnitus, usually unilateral. The diagnosis is confirmed by computed tomography (CT), arteriography and retrograde jugular study, and the high-resolution CT scan of the temporal bones is the main complementary test because it shows bone destruction. Therapeutic options are palliative for glomus (radiotherapy, embolization, or both) or definitive (surgery alone or combined with radiotherapy or embolization). We emphasize the importance of considering the extent and location of the tumor for treatment purposes. We presented a case of a favorable surgical excision, the preferred treatment modality in small lesions.

PS-357

SGP: 8287

Bilateral necrotizing external otitis associated with bilateral facial palsy: case report

Author(s): Edson Junior de Melo Fernandes, Claudiney Candido Costa, Marina Neves Rebouças, Fabiano Santana Moura, Mikhael Romanholo El Cheikh

Keywords: facial asymmetry, otitis, otitis externa.

Introduction: Necrotizing external otitis (NEO) is a severe and invasive infection that begins in the external auditory canal (EAC), which main etiologic agent is *Pseudomonas aeruginosa*. It occurs mainly in marasmic patients, the elderly, immunocompromised and diabetic patients. **Objective:** To report the case of a patient with bilateral NEO associated with bilateral peripheral facial palsy. **Case report:** a male patient, 71 years old, with uncompensated type II diabetic, sought medical attention complaining of difficult to control bilateral otalgia, beginning three months ago, associated with swelling of the external ear canal. Otoscopy showed a granulation tissue, abundant secretion and an intact membrane. Computed tomography of the temporal bones showed the presence of hypodense material filling the mastoid antrum bilaterally with osteolytic lesions. The patient evolved with bilateral peripheral facial palsy, and was started on ciprofloxacin, with no clinical improvement. We corrected her insulin and glucose rates with oral hypoglycemic agents. Culture showed a resistance strain of *P. aeruginosa* to cefepime, ciprofloxacin and gentamicin, and sensitivity to meropenem. The antibiotic was changed to meropenem then, and the patient improved in her otitis, but paralysis remained. **Conclusion:** NEO is a serious disease with high morbidity and mortality. Knowledge of this pathology, early diagnosis, appropriate treatment and patient cooperation, will lead to better cure rates.

PS-358

SGP: 8290

Imaging Findings in patients submitted to cochlear implants

Author(s): Renata Santos Bittencourt Silva, Julia Maria Olsen, Lucas Bevilacqua Alves da Costa, Renata de Aquino Pereira Nunes Périco, Osmar Mesquita de Sousa Neto

Keywords: cochlear implants, magnetic resonance imaging, radiology, tomography.

Introduction: Patients being considered for cochlear implantation have to undergo a wide-range of tests, of which imaging of the temporal bone to assess cochlear patency is an important part. In the literature, we can find that the most common abnormalities reported were: 32% of cochlear abnormalities, 30% of modiolus abnormalities, 23% of vestibular abnormalities, 16% of endolymphatic duct abnormalities and 12% of endolymphatic sack abnormalities. A retrospective study of preoperative radiographic studies,

CT and MRI scans, obtained from 84 cochlear implant patients was performed. **Results:** 39.3% of the tomographies were altered and 32% of the MRI scans showed changes. The most frequent abnormalities were inflammatory mastoid disorders and labyrinthitis ossificans. The MRI had better accuracy in showing labyrinthitis ossificans than CT scans. **Conclusion:** More studies are needed to analyze whether there is a difference in patients with labyrinthitis ossificans regarding their age or cause of deafness. As well as if images as CT or MRI have any repercussion in cochlear implant surgery outcomes.

PS-359

SGP: 8295

Sudden deafness after treatment with Interferon and Ribavirin

Author(s): Ana Cecília Cavalcante de Macedo, Rodrigo Ubiratan Franco Teixeira, Luciana Campoy Giro Basile, Luana Gonçalves Oliveira, Carlos Eduardo Monteiro Zappellini, Fábio Silva Alves, Hardynn Wesley Saunders Rocha Tavares

Keywords: chronic, hearing loss, hepatitis c, interferon-alpha, ribavirin, sudden.

Introduction: Ototoxicity is an iatrogenic disease that affects the auditory function and/or the peripheral vestibular system. Pegylated interferon associated to ribavirin is the therapy of choice for patients with chronic hepatitis C. There are various side effects associated with the use of these medications, but there are rare reports of sudden hearing loss after using them. It is an irreversible sequela and the best management is prevention. This report refers to a patient with hepatitis C who developed a worsening of hearing loss and tinnitus after previous hospitalization for the use of interferon and ribavirin. Our goal is to stress the prevention of this important side effect of these and other drugs commonly used in clinical practice. **Discussion:** The ototoxicity is related to drugs extensively used in medical practice, often in conditions related to poor prognosis with few therapeutic alternatives. This paradigm reflects the need for studies on mechanisms of ear protective drugs that enable clinicians to treat these diseases more safely.

PS-360

SGP: 8296

Pulsatile tinnitus

Author(s): Renato Cardoso Guimarães, Rubem Swensson, Henrique Pedro Magoga Filho, Aden Luigi Castro Testi, Noelle Kistemarcker do Nascimento Bueno, Amanda Feliciano da Silva, Priscila Yukie Aquinaga

Keywords: carotid stenosis, stents, tinnitus.

Introduction: Tinnitus is the perception of a sound without an external stimulus. It usually arises from vascular structures and results from turbulent blood flow, which can be caused by increased blood volume, luminal stenosis or dilatation. The goal here is to describe the case of unilateral pulsatile tinnitus from the diagnosis of common carotid artery stenosis, and the importance of evaluating pulsatile tinnitus. **Objectives:** To report a case of pulsatile tinnitus. **Discussion:** In our case, the patient had clinical pulsatile tinnitus with normal otoscopy. Previous history of cardiovascular pathologies guided the etiology of pulsatile tinnitus confirmed by angio-MRI. Tinnitus is a challenge, and in the present case we found another form of treatment with carotid stenting. **Conclusion:** Otolaryngologists must be prepared for the specific etiological challenges and treatment, thus improving the overall health of their patients.

PS-361

SGP: 8305

Petrous apex cholesteatoma associated to bilateral vestibular schwannoma

Author(s): Juliana Frozoni Lemes, Marcos Luiz Antunes, Caio Barbosa Campanholo, Priscila Bogar Rapoport, Fernando Luis Balderi Pacheco, Marcos Antonio Baptista Ferraz

Keywords: acoustic, cholesteatoma, hearing loss, middle ear, neuroma.

Cholesteatomas are cystic structures lined by stratified squamous epithelium on a stroma of variable composition that develops within the middle ear or in any pneumatized part of the temporal bone. They have independent and progressive growth, which causes destruction of adjacent tissues, and tendency to recur. Acoustic neuromas are benign lesions arising from the sheath of Schwann cells. They are more common in the cerebellopontine

angle. We report a patient of 56 years who presented the two associated diseases: bilateral acoustic neuromas and petrous apex cholesteatoma on the right side. Both diseases showed no correlation. In the literature we found only one similar case: a patient with unilateral cholesteatoma and a neurinoma. Our case is the only one described in the literature, thus of utmost importance to stress the likelihood of concomitant lesions in this site.

PS-362

SGP: 8321

ENT manifestation in relapsing polychondritis

Author(s): José Antonio Pinto, Rodrigo Kohler, Henrique Wambier, Elcio Izumi Mizoguchi, Renata Coutinho Ribeiro

Keywords: autoimmune diseases, ear auricle, ear cartilage, polychondritis, relapsing.

Relapsing Polychondritis is a rare inflammatory systemic disease. All types of chondro tissues can be affected, mainly the ear, nasal, joint and tracheal cartilages. Its diagnosis is a challenge because the patients may present with a wide spectrum of clinical symptoms. Clinical criteria described by McAdam et al. and the biopsy are important in this situation. The treatment choice is prednisone, however, other drugs have an additional value. The authors review the literature and report on a case which was well controlled with steroids.

PS-363

SGP: 8322

Vestibular Migraine: Case Series

Author(s): Waner Josefa de Queiroz Moura, Larissa Magalhães Navarro, Lorena Gonçalves Rodrigues, Samara Noronha Cunha, Diego Costa Farias, Joyce Oliveira de Lima, Theago Barros Silva

Keywords: dizziness, patient participation, vertigo.

Introduction: Vertigo-associated migraine was first described by Aretaeus of Cappadocia approximately 100 years BC. Many other descriptions been published since then. Other used terms are vestibular migraine, infantile benign paroxysmal vertigo, and recurrent benign vertigo in adults. Despite one thousand years of its discovery very little is known concerning its pathophysiology and treatment. **Materials and Methods:** retrospective study, from the data contained in medical charts, concerning age, gender, neurotological and auditory symptoms and clinical treatment. **Results:** We selected 29 patients with a potential diagnosis of migraine, followed for at least 1 year without associated vestibular disorders, after ruling out any another central disorder. Of the 29 individuals, 25 (86%) were women, in the age range of 41-60 years (55.17%). The predominant neurotological symptoms were headache and imbalance, ad among the auditory ones, we have: tinnitus, hearing loss and ear fullness. **Discussion:** we found a high prevalence of migraine in the general population, estimated to be between 5.7-20% for males and 17.6-29% for females. our study found a predominance of females, at a peak incidence in older ages. In most cases, treatment included diet changes and prophylactic therapy. **Conclusion:** The vestibular migraine term is a frequent disorder and has an important negative impact in the quality of life.

PS-364

SGP: 8328

Case report: external auditory canal infection by *Cryptococcus neoformans*

Author(s): Ana Cristina da Costa Martins, Mateus Pereira Bom Braga, Marcia Lazera, Adriana da Silva Pinto, Marco Antonio Salles Danta de Lima, Antonio Xavier de Brito, Fernando Augusto Bozza, Claudia Valet, Armando Schubach

Keywords: cryptococcus gattii, cryptococcus neoformans, otitis externa.

Cryptococcosis is an opportunistic infection caused by *Cryptococcus neoformans*. It is often associated with HIV infection and other immunological diseases. When the infected patient has no immunological deficiency, and the organism usually involved is the *Cryptococcus gattii*. Both agents of cryptococcosis are basidiomycetes, that in their asexual reproduction phase, they have a non-encapsulated yeast, and are heat tolerant at 35-37 C; and they produce melanin. The initial site of infection is the lung, where it can remain latent or oligosymptomatic for long periods of time. Hematogenous

dissemination happens in 10% of infected patients, with a special preference for the central nervous system, with a 40% death rate. Bone, skin and eyes involvement are less frequent.

PS-365

SGP: 8355

Electro-acoustic stimulation of the auditory system: experience and results in four patients using the MED-EL Cochlear Implant Mand FlexEAS at UNICAMP, Brazil

Author(s): Guilherme Machado de Carvalho, João Paulo Peral Valente, Alexandre Scallii Mathias Duarte, Eder Barbosa Muranaka, Marcelo Naoki Soki, Alexandre Caixeta Guimaraes, Walter Adriano Bianchini, Arthur Menino Castilho, Agrício Nubiato Crespo

Keywords: cochlear implantation, hearing disorders, rehabilitation of hearing impaired.

Objectives: To evaluate the rate of perception and hearing preservation in patients with hearing loss in the high frequencies and hearing in low frequency, who underwent implantation of the MED-EL Mand FlexEAS device - we were the first center to perform such treatment in Brazil. **Methods:** Analysis of data / patient records, prospective case report. **Patients included:** four patients implanted by the Cochlear Implant Group of the University Hospital, Campinas University (UNICAMP), Brazil. Variables: audiometry, speech perception tests, location and electrode depth of insertion. **Results:** see tables. **Conclusion:** Despite the pioneering initiative in our country the results are still preliminary and require a longer follow-up and more cases. We are entering a new era in hearing rehabilitation.

PS-367

SGP: 8364

Case Report: Surgical management of a traumatic otological cerebrospinal fluid fistula in an adult patient, using the retroauricular approach

Author(s): Ana Carolina de Menezes Simas, Rachel Catão Lucena, Ricardo Silva Chiabai Loureiro, Marina de Sá Pittondo

Keywords: advanced treatment, cerebrospinal fluid otorrhea, otorhinolaryngologic surgical procedures.

The choice of surgical access for the treatment of otological cerebrospinal fluid leak is mandated by the injury's location. There is very little data in the literature about the exclusive retroauricular approach for these pathologies. This approach seems to be a safe method, easy to perform, comparatively less invasive and with less risk of postoperative complications. The objective of this study is to describe the retroauricular surgical management in a patient with otological traumatic cerebrospinal fluid leak.

PS-368

SGP: 8365

Tumor of the carotid glomus

Author(s): Priscila Carvalho Miranda, Pedro Ivo Machado, Vitor Yamashiro Rocha Soares, Rafaela Aquino Fernandes Lopes, Luiz Augusto Nascimento, Gustavo Subtil Magalhães Freire, Daniel de Sousa Michels

Keywords: carotid body tumor, extra-adrenal, paraganglioma, paraganglioma.

The choice of surgical access for the treatment of otological cerebrospinal fluid leak is mandated by the injury's location. There is very little data in the literature about the exclusive retroauricular approach for these pathologies. **Background:** Carotid body tumors arise from a cellular cluster located at the carotid bifurcation. Progressive enlargement can involve the arterial wall and neighboring cranial nerves. **Case report:** A male patient, 56 years old, was admitted with a history of right neck mass for 12 years, with progressive growth, painless, mobile and pulsatile, 8 cm in its largest diameter. Imaging exams (Computed Tomography - CT - and MRI - MRI scans) revealed an expansive lesion extending to the right carotid bifurcation, 49 x 49 x 51 mm, with intense enhancement after contrast, suggesting a carotid paraganglioma. Patient underwent embolization of the lesion and posterior surgical approach, without complications. **Discussion:** Paragangliomas are rare tumors, with an estimated incidence of 1:30,000 to 1:100,000 in the general population. Symptoms result from compression of adjacent structures. Paragangliomas of the carotid body can be diagnosed in clinical

grounds, requiring vascular imaging. A needle aspiration or biopsy are contraindicated. These infrequent lesions are generally benign (90%) and early surgical removal avoids neurological and or vascular complications. **Conclusion:** The carotid glomus tumor is a rare tumor and its diagnosis requires a high degree of suspicion. Imaging studies are of vital importance for the diagnosis and surgical approach.

PS-369

SGP: 8393

Capillary Hemangioma in the auricular region: case report

Author(s): Daniela Pereira Ferraz, Rebecca Esperidião S.C. Oliveira, Larissa Roberta Souza Campos, Tatiana Carneiro da Cunha Almeida, Francisco José Motta Barros de Oliveira, Mirella Melo Metidieri, Hugo Fernandes Santos Rodrigues

Keywords: capillary, ear auricle, head and neck neoplasms, hemangioma.

Hemangioma is the most common of all tumors of vascular origin. It is the most frequent tumor in childhood, with about 73% of cases diagnosed in the first year of life. Hemangiomas are more common in the head and neck, but they may also affect any body segment. Case presentation: We report a case of a capillary hemangioma in the auricular region with diagnosis confirmed by pathology and surgery to excise the lesion.

PS-370

SGP: 8397

Meningioma and schwannoma associated in an elderly patient

Author(s): José Felipe Bigolin Filho, Camila Andrade da Rocha, Raimundo Célio da Rocha, Luiz Augusto Miranda Sanglard, Ludimila de Oliveira Cardoso, Amadeu Luis Alcantara Ribeiro, Rafael Fernandes Goulart dos Santos, Monik Assis Espindula, Miguel Eduardo Guimarães Macedo

Keywords: Meningioma; Neuroma, Acoustic; Hearing Loss.

Introduction: Tumors of the acoustic nerve histologically derived from the Schwann sheath, are made of elongated cells, stockade-like in small tumors. Intracranial meningiomas are benign as far as histological findings are concerned. They constitute about 20% of all intracranial tumors. **Case report:** DBV, 68 years old, came to our clinic complaining of tinnitus and progressive hearing loss for 10 years; tingling in the form of squeaks and a slight loss of body balance. **Audiometry:** bilateral sensorineural mild hearing loss in the right ear and profound hearing loss on the left side, with a descending-shape curve. Auditory brainstem response showed an increased I-III interpeak latency in the left ear; electrophysiological thresholds of wave V of up to 60 dB SPL (30 dB HL) in the right ear and up to 95 (65 dB HL) in the left ear, morphological analysis of waves: bad in both ears, shown by negative cranial magnetic polarity. Skull MRI showing an expansive lesion of the left cerebellopontine angle, pointing to a schwannoma of the eighth pair and extra-axial expansive mass in the right temporal fossa, suggestive of a cavernous sinus meningioma. **Discussion:** Meningiomas are derived from arachnoid cells, and are among the most common intracranial tumors, often causing dizziness and other neurotological changes. The acoustic neuroma (AN) is the most common tumor of the cerebellopontine angle, accounting for 92% of the tumors in this area. **Conclusion:** The association between meningioma and acoustic neuroma is not common, there are but a few cases described in the literature.

PS-371

SGP: 8406

Bilateral sudden hearing loss: Case Report

Author(s): Ricardo Kunde Minuzzi, Aline Gaiotto Maluta, Naize G. de Lima, Luzia G. Lague, Marcela Weber Pasa, Hamilton Leal Moreira Ferro

Keywords: hearing loss, hearing loss, sensorineural, sudden, tinnitus.

Sudden hearing loss is a controversial issue in otolaryngology, both concerning its pathogenesis and management. the goal of the present paper is to describe a case of sudden hearing loss of unilateral onset, later affecting both ears. The patient complained of tinnitus and hearing loss on the right ear for about a week. Examinations were performed, and other diagnostic possibilities were discarded when sensorineural hearing loss was confirmed. We prescribed acyclovir, pentoxifylline and Meticorten with no results. The patient developed similar condition after six months, also without response

to treatment. He was referred to a cochlear implant, for he could be conditioned to wear a hearing aid.

PS-372

SGP: 8408

Cochlear Implantation In Patient With Enlarged Vestibular Aqueduct Syndrome

Author(s): Mariana Alves dos Santos Brito, Larissa Diniz Carvalho, Alexandre Jorge Barros de Moraes, Rosauo Rodrigues de Aguiar, Carlos Augusto de Sousa Borba

Keywords: cochlear implantation, deafness, vestibular aqueduct.

The vestibular aqueduct is a bony canal located in the otic capsule containing the duct and part of the endolymphatic sac. The large vestibular aqueduct syndrome is a congenital malformation of the temporal bone that may be associated with sensorineural or mixed hearing loss. The aim of this study is to report on a patient undergoing cochlear implant diagnosed with large vestibular aqueduct syndrome and review of the medical literature. A female patient was admitted in our cochlear implant program with a history of bilateral progressive hearing loss. Radiography, MRI and CT scans showed dilatation of the ear endolymphatic sac and of the vestibular aqueduct. She underwent cochlear implant surgery without complications. This surgery has shown good audiometric and speech perception results.

PS-373

SGP: 8410

Evaluation of the etiological profile of patients undergoing cochlear implantation

Author(s): Mariana Alves dos Santos Brito, Larissa Diniz Carvalho, Gilson Meirelles Campos Junior, Rosauo Rodrigues de Aguiar, Marcos Roberto Bahnhara, Carlos Augusto de Sousa Borba, Davi Sandes Sobral

Keywords: cochlear implantation, hearing loss, meningitis.

Introduction: Hearing loss is one of the most disabling disorders in humans, it represents a real public health problem. To understand the various causes of this pathology is fundamental to the establishment of more effective preventive and therapeutic measures. The purpose of this study was to evaluate the etiologic profile of patients undergoing cochlear implant surgery. **Materials and Methods:** Retrospective analysis of the medical records of 68 patients undergoing cochlear implantation in Salvador, Bahia, from February 2009 to May 2011 . We collected data such as gender, age and hearing loss cause. **Results:** The most frequent etiology was idiopathic (27.94%); followed by meningitis (19.12%); ototoxicity (16.18%); genetics (14.71%); congenital (8.82%); otosclerosis (7.35%), and other causes encompassing a smaller percentage. **Conclusion:** According to other studies in the scientific literature, idiopathic remains the most prevalent among the causes of deafness in patients undergoing cochlear implant surgery. It is worth highlighting the important presence of meningitis in this study, and to stress the need for programs for early detection of deafness.

PS-374

SGP: 8417

Retrospective study of 46 cases of "inlay" tympanoplasty in children

Author(s): Claudia Pereira Maniglia, Ricardo Arthur Hübner, Ana Gabriela Gonçalves Torisan, Mauricio Pereira Maniglia, Fernando Drimel Molina, José Victor Maniglia

Keywords: audiometry, cartilage, tympanic membrane perforation, tympanoplasty.

Introduction: Tympanoplasty is a surgery used to reconstruct the ossicular-tympanic integrity. Different materials have been used as graft along time. **Objective:** The purpose of this study was to assess the anatomic and audiometric results of tympanic reconstructions using tragus perichondrium, in children. **Study design:** A retrospective review of all "inlay" tympanoplasty procedures carried out in children by otolaryngology resident doctors in a tertiary hospital, performed in the years of 2002 to 2009. **Materials and Methods:** We assessed 46 cases of children who had undergone tympanoplasty using the perichondrium from the ear tragus as graft to repair a tympanic membrane perforation smaller than 40% of the total surface area, with intact ossicular chain and no mastoid disease. **Results:** The success rate on the restitution of the tympanic membrane

integrity was 80.4% (37 of 46 cases); tonal audiometry results showed an improve of 10dB. **Conclusions:** The use of tragus cartilage perichondrium to rebuild the tympanic membrane has a high index of anatomic success and good audiometric results.

PS-376

SGP: 8434

Facial paralysis in a temporal bone fracture in a child

Author(s): Andy de Oliveira Vicente, Franciane Regina Vargas, Claudio Trevisan Junior, Wilian Maduell de Mattos, Andrea Gomes Carreira, Giuliano Aquino

Keywords: bone, facial nerve injuries, facial paralysis, fractures.

Objective: To report the case of a child with facial paralysis after trauma and fracture of the temporal bone. **Case Report:** GFS, 5 year-old-male came to our service because of a right facial paralysis immediately after falling 15 days ago. Physical examination showed right-side grade VI paralysis. Otoscopy right side: Clots in the external auditory canal + hyaline secretion. Audiometry showed severe mixed hearing loss on the right ear. Computed tomography revealed a longitudinal fracture of the temporal bone. The patient underwent transmastoid surgery for facial nerve decompression, where the same section was visualized. New surgery was done four days later in order to graft the facial nerve, using the great auricular nerve. **Conclusion:** Temporal bone fracture in children happens in 3% to 14% of traumatic head injury. This fracture is considered serious because it can lead to sequelae such as hearing loss and facial paralysis (FP). FP occurs in 3-9% of cases of head injuries, and may be immediate or late. Early surgical treatment (up to 3 weeks) in cases of facial nerve injury have better outcomes, which may be decompression or grafting, as in our case. There are many reports in the literature on facial nerve grafts in pediatric patients. FP post temporal bone fracture is much more common in adults. This difference is attributed to increased mineralization of the temporal bone of adults, causing greater force transmission during trauma.

PS-378

SGP: 8463

Ramsay Hunt syndrome: Report of a case without evidence of skin lesions

Author(s): Pauliana Lamounier, Jamille Lima Wanderley Ribeiro, Denise da Silva Calvet, Ivan Carlos Orensztajn, Christiano de Assis Buarque Perlingeiro

Keywords: facial paralysis, herpes zoster, herpes zoster oticus.

Introduction: Ramsay Hunt syndrome is characterized by facial paralysis, ear pain and vesicular eruptions in the external ear, resulting from acute inflammation of the facial nerve by the varicella zoster virus (VZV). It may occur involving the vestibulocochlear nerve in 20% of patients. The diagnosis is basically clinical. The treatment of the syndrome is controversial, but most studies suggest treatment with steroids and acyclovir. **Objective:** To report the case of a patient with Ramsay Hunt syndrome without vesicular rash and erythema. **Case report:** DNS, 19 year old, male, with complaints of vertigo for 5 days, associated with nausea, vomiting, hearing loss and tinnitus in his right ear. Presented facial palsy on the right side, grade IV of the House-Brackman scale, no signs of lesions in the external ear. Audiometric testing showed moderate to severe sensorineural hearing loss in the right ear and normal hearing in the left ear. Treatment was started with prednisone, acyclovir and symptomatic drugs. The serologic test was positive for recent infection for VZV. **Discussion:** We described an atypical case of Ramsay Hunt syndrome because of the absence of skin lesions. It is very rare when skin lesions do not precede the facial paralysis. These cases of facial paralysis without skin manifestations have been known as Zoster Sine Herpete. **Conclusion:** The Ramsay Hunt syndrome may have variable clinical presentations. Clinical suspicion, early initiation of treatment and laboratory confirmation of infection provide for a favorable treatment framework.

PS-379

SGP: 8466

Audiometric analysis in tympanic membrane scars

Author(s): Marcelo Scapuccin, Gil Junqueira Marçal, Fernão Bevilacqua Alves da Costa, Edson Ibrahim Mitre, Fernando de Andrade Quintanilha Ribeiro

Keywords: ear, ear ossicles, ossicular prosthesis.

The inflammatory process causes a hyaline degeneration in the collagen fibers of the tympanic membrane or those of the middle ear, which may affect the joints of the ossicles. This process generates plaques which acquire the typical whitish appearance, usually arising from calcium deposition³. When involving the tympanic membrane, it may be diagnosed upon otoscopy, with varied extension. **Goal:** this paper aimed at assessing the existing correlation between tympanosclerosis and the tympanic scar, together or alone, with the hearing loss. **Materials and Methods:** Assessment of the patients in the chronic ear ward of the Santa Casa de Sao Paulo hospital with tympanosclerosis and/or tympanic scar and report on the audiometric findings. **Discussion/Conclusion:** this paper showed that, most tympanosclerotic or scar tissue lesions, being alone or small, do not cause any type of relevant auditory involvement.

PS-380

SGP: 8482

Topiramate in the prophylactic treatment of migraine: case series

Author(s): Patricia Brandão Pantoja, Lucia Joffilly, Patrick Rademaker Burke, Mateus Claudino Cannarella, Roberta Ribeiro de Almeida, Fernando Freitas Ganança

Keywords: anticonvulsants, migraine disorders, therapeutics, vertigo.

Background: Migraine and vertigo are common disorders, affecting approximately 14% and 10% of the population, respectively. Recent studies indicate that 3.2% of the general population have associated migraine and vertigo. Although several studies suggest this association, it is still underdiagnosed. **Presentation of cases:** We report three cases of female patients aged 35, 38 and 45, with typical history of migraine associated with vertigo. The episodes were associated to head movements, poor eating habits, stress and sleep deprivation. They underwent neurotological physical examination, vector-electronystagmography and metabolic screening, without significant alterations. Following a randomized treatment protocol for vestibular migraine, each patient received one of the following: propranolol, amitriptyline, flunarizine and dietary counseling. After a minimum of two months they had significant side effects and none of the patients showed remarkable improvement, according to data from clinical history and visual analogue scale (VAS) for dizziness and headache. We decided then to move them to topiramate 50mg/day, twice a day. All patients showed striking improvements in vertigo and migraine assessed by VAS, without noteworthy side effects. **Discussion:** Patients with frequent, intense and long lasting episodes require prophylactic treatment. Topiramate has been recommended for migraine prevention. **Final comments:** Topiramate seems to be a promising drug for the prophylactic treatment of migraine. Placebo-controlled studies in different populations are needed to confirm these observations.

PS-381

SGP: 8484

Cutaneous ulceration and device exposure after cochlear implantation - Case report

Author(s): Osmar Mesquita de Souza Neto, Mônica Alcantara de Oliveira Santos, André Fanhani Lopes, Yumi Tamaoki, Carlos Alberto Herrerias de Campos, Renata Nunes Périco, Luiz Augusto de Lima e Silva

Keywords: cochlear implants, infection, postoperative complications.

Objective: to report on a cutaneous ulceration in a cochlear implant case, treated without success with myocutaneous flap. **Discussion:** skin infections are not frequent, especially the late ones, but they are relevant because they can lead to skin dehiscence and the exposure of the internal portion of the implant. Factors such as skin status, systemic diseases, age, and the presence of biofilm may be related to this situation. The most common infection agent is *Staphylococcus aureus* and the treatment can range from clinical support and antibiotics to surgery. **Conclusion:** the treatment of late skin infections must be individualized, and the exposure of the internal component may require the removal of the implant.

Recurrent facial palsy - set of 18 cases

Author(s): Davi Sousa Garcia, Marcel Menon Miyake, Melissa Ferreira Vianna, Paulo Roberto Lazarini

Keywords: facial nerve, facial paralysis, melkersson-rosenthal syndrome.

Peripheral facial palsy (PFP) may be due to the involvement of the facial nerve from its nuclear origin in the brain stem or along the path of its peripheral fibers, which can occur in individuals with known diseases or as idiopathic Bell's palsy. In idiopathic facial paralysis there can be recurrence in 7% to 15% of the cases. This is a retrospective study on the profile of 18 patients treated between February 2008 and May 2011. We observed that in a minority of patients (27.7%) the paralysis was contralateral to that of the 1st episode. One patient was also diagnosed with Melkersson-Rosenthal syndrome. There was no association with trauma or the appearance of herpes lesions in any patient. The high initial House-Brackmann score was prevalent among the patients (76% were V, V or VI) Unlike the literature, our study found a higher prevalence of ipsilateral recurrence. According to the House-Brackmann classification, over 70% of patients were severe at admission (IV, V or VI), confirming data from previous papers. One case had the Melkersson-Rosenthal Syndrome. This study traced the profile of patients with PFP seen in a tertiary otolaryngology center, concerning the patients' epidemiological characteristics, location of paralysis (based on the Schirmer test and acoustic reflex thresholds), the initial House-Brackman classification and time interval between episodes, highlighting a case that fit into known etiology (Melkersson-Rosenthal).

Decompression of the endolymphatic sac in Ménière's disease

Author(s): Mirella Melo Metidieri, Sandro Torres, Milton Pamponet, Antônio Fausto de Almeida Neto, Francisco José Motta Barros de Oliveira Filho, Tatiana Carneiro Cunha de Almeida, Daniela Pereira Ferraz

Keywords: endolymphatic hydrops, endolymphatic sac, meniere disease.

Ménière's disease or endolymphatic hydrops is a disorder of the inner ear, caused by increased endolymph pressure. Treatment consists of physical exercise, dietary salt restriction, chlorthalidone and labyrinth depressant agents. Surgery is indicated in patients refractory to medical treatment, when the endolymphatic sac is decompressed in order to control vertigo, tinnitus and hearing. We conducted a retrospective study by chart review during the period from 1998 to 2010. A total of fourteen patients underwent this surgery. We had 03 years of follow up on the symptomatology of these patients.

New selective ventilation syndrome in middle ear disease

Author(s): João Paulo Saraiva Abreu, Moises Ximenes Feijão, Daniel Nogueira Cruz, João Flávio Nogueira Júnior, Daniele Marchione, Livio Presutti, Arthur Chaves Gomes Bastos

Keywords: otitis, otitis media, video-assisted surgery.

Epitympanic primary cholesteatoma represents a challenge for ENT surgeons. Its exact pathogenesis is still unknown because of the very complex anatomy of this region. Until now, only a few authors have described this region and tried to hypothesize the causes that could lead to the cholesteatoma genesis. We hypothesize the existence of a selective ventilation impairment of the epitympanic region based on the presence of various mucosal folds occluding air passage from the middle ear to the epitympanum, through the epitympanic isthmus, causing a negative epitympanic pressure and consequently cholesteatoma formation. All the anatomical findings were obtained with the aid of 0° and 45° angled surgical endoscopes. From our findings, patients affected by an epitympanic cholesteatoma often have a total isthmus blockage that completely isolates the whole epitympanum from the middle ear, causing a deficit of oxygenation of the mucosa that normally should be guaranteed by the Eustachian tube and which always works physiologically in these patients. This is confirmed by tympanometry where we observed

that the pressure at the level of the tympanic cavity was normal, whereas the epitympanic pressure was selectively negative. In conclusion, selective epitympanic ventilation impairment syndrome consists of the concomitant presence of a series of complete or incomplete epitympanic diaphragms and ME isthmus blockage causing negative epitympanic pressure, leading to formation of a retraction pocket or cholesteatoma associated with normal Eustachian tube function.

Facial Palsy and Diabetes: Review of the Literature

Author(s): Viviane Nunes da Costa, Thaís Knoll, Thaís Sanematsu, Fernanda Madeiro Leite Viana, Thaís Dória Barbosa

Keywords: bell palsy, diabetes complications, facial nerve, facial paralysis.

Introduction: Facial palsy is a common disorder that affects the facial nerve and has a sudden onset, affecting individuals of all ages, causing functional and aesthetic disorders, leaving sequelae in 30% of the cases. Several diseases can affect the facial nerve function such as diabetes mellitus, HIV, Herpes Zoster, among others. The most common presentation is Bell's palsy or idiopathic FP, accounting for 60-80% of cases. In the clinical evaluation of the patient, we used the general House-Brackmann (HB) scale, which classifies the degrees of paralysis into I-VI. **Objective:** To review the literature correlating facial paralysis and diabetes, its clinical course and prognosis. **Methodology:** We analyzed the papers published in the past 10 years correlating facial paralysis and diabetes, using the following databases: MEDLINE, SciELO and BIREME. **Results:** In the literature, there seems to be no quantity difference in the HB scale between diabetic and non diabetic patients at the beginning of treatment. However, the return of facial movement was worse in diabetics compared with non diabetic patients. In general, the rate of recovery from paralysis was lower in diabetics than in non diabetics at 6 months of progressive paralysis. **Conclusion:** There were no significant differences between diabetic and non diabetic patients at the beginning of treatment (the second level of HB), suggesting that being diabetic does not influence the severity of facial paralysis in the beginning. However, the rate of recovery from paralysis tended to be slower in diabetic patients, indicating that diabetes may indeed influence recovery.

Relapsing polychondritis: confusion concerning differential diagnosis

Author(s): Patricia Araujo de Andrade, Lizandra Kely de Sousa Guarita, Carlos Alberto Maurício Júnior, Fernando de Freitas Vilela, Ronaldo Campos Granjeiro, Luciana do Nascimento Marques Carneiro, Isaac Laurent Baldoino de Barros

Keywords: clinical diagnosis, diagnosis, differential, polychondritis, relapsing.

Introduction: Relapsing polychondritis is a rare systemic inflammatory disorder, very likely autoimmune. It affects hyaline cartilage structures such as nose, ear, trachea, joints and eyes. The diagnosis is clinical. **Report:** Woman, 61 years of age, nasal obstruction, rhinorrhea, cough, dyspnea and dysphonia for 30 days, she developed periorbital cellulitis, episcleritis, erythema and edema in the ear - sparing the lobe, otalgia, hearing loss, tinnitus, hoarseness, vertigo, spontaneous nystagmus, fever, headache and vomiting. Previously treated as pneumonia, she was evaluated by a neurologist, who ruled out meningitis, and she was diagnosed with acute sinusitis complicated with orbital cellulitis and ear chondritis. She was started on ampicillin-sulbactam and dexamethasone, with marked clinical improvement. Audiometry showed sensorineural hearing loss. Radiologic evaluation ruled out ocular complications related to sinusitis and showed normal mastoid. After tapering her steroids corticosteroids, she relapsed. Rheumatologists confirmed the suspicion of relapsing polychondritis, and she was started on methotrexate and prednisone, with good response. **Discussion:** The diagnosis of relapsing polychondritis is difficult for those not familiar with its characteristics. The otological manifestations usually lead a later systemic disease. In this case, manifestations appeared after otologic symptoms suggestive of infection of the upper and lower airways, delaying diagnosis. Treatment is with oral corticosteroids or immunosuppressants, when many organs are affected. In

this case, there was remission with combination therapy of systemic steroids and immunosuppressive agents. **Conclusion:** Relapsing polychondritis is a difficult disease to diagnose because its manifestations mimic several other possible differential diagnoses. It should be considered when the patient presents a broad spectrum of these complaints.

PS-388

SGP: 8508

Longitudinal temporal bone fracture with ipsilateral hearing loss and contralateral neural

Author(s): Antonio Fausto de Almeida Neto, Sandro Torres, Milton Pamponet, Kleber Almeida, Tatiana Carneiro da Cunha Almeida, Mirella Melo Metidieri, Hugo Fernandes Santos Rodrigues

Keywords: bilateral, hearing loss, hearing loss, sensorineural, skull fractures.

Temporal bone trauma can be classified as blunt and penetrating. Penetrating injuries are almost exclusively due to firearms, while blunt traumas are more commonly a result of car accidents. Fractures can be longitudinal, transverse or mixed. A case of longitudinal fracture of temporal bone in which the patient had ipsilateral sensory hearing loss and contralateral neural hearing loss, facial paralysis, intraparenchymal hematoma and pneumocephalus.

PS-389

SGP: 8513

Facial Nerve Peripheral paralysis as a complication of tympanoplasty

Author(s): Diogo Vasconcelos Silva, Gabriel Antônio Oliveira Dias, Sandra Mara Andrade Guerra, Rubens Ribeiro da Costa Júnior, Raquel Salomone

Keywords: facial nerve injuries, tympanic membrane perforation, tympanoplasty.

Facial nerve damage during tympanoplasty surgery is relatively uncommon (about 1%), being the most common area of iatrogenic injury to the tympanic segment. Among other complications are the lateral displacement of the flap, secondary cholesteatoma, re-perforation, stock shrinkage, deterioration of hearing threshold, dizziness, taste changes. We report a case of male, 16 years, coming from Estiva-MG, who underwent tympanoplasty for treatment of chronic otitis media progressing to facial palsy postoperatively. Electroneuromyography study was performed showing severe degeneration of motor fibers in the frontal, orbicularis oculi and orbicularis oris nerve branches and the patient underwent surgical decompression of the facial nerve. He is in clinical monitoring, evolving with slight improvements. Given the high prevalence of chronic otitis media and the number of simple tympanoplasties performed, it is important to have anatomical knowledge of the facial nerve and its relations with the middle ear in an attempt to prevent possible iatrogenic injuries to it.

PS-390

SGP: 8529

Otoacoustic Emissions in Patients with tinnitus and normal hearing

Author(s): Konrado Massing Deutsch, Christine Cioba, Lucas Pires Stocker Ries, Vanessa Belline, Bruna Fornari Vanni, Celso Dall'Ina, Leticia Petersen Schmidt Rosito

Keywords: hearing, otoacoustic emissions, spontaneous, tinnitus.

Introduction: Tinnitus is defined as a perceived sound in the absence of external sound stimulus. This symptom is highly associated with hearing loss, although 10% of patients with tinnitus have normal hearing. **Objective:** To assess otoacoustic emissions in patients with tinnitus and normal hearing; and to associate them to lipid profile and fasting glucose. **Materials and Methods:** 24 patients with chronic tinnitus and normal hearing were selected for this study. The criterion defined as the threshold of hearing loss, according to the classification of Davis and Silverman, was recorded as less than 25 dB in air, conduction at all frequencies in either ears. We evaluated otoacoustic emissions in the patients and considered them normal when there were no changes in all frequencies, except the 1,000 Hz. We evaluated the differences in serum concentrations of fasting glucose, total cholesterol, HDL, LDL and triglycerides among the patients. **Results:** The otoacoustic emissions were altered in 62.5% of the patients. Lab tests were

not statistically different between the normal emissions test group and the altered emissions test group. There was no correlation between the location of the cochlear lesion and the side of the tinnitus.

PS-391

SGP: 8535

Hearing impairment in patients with peripheral vestibular dysfunction

Author(s): Gisela Andrea Yamashita, Ricardo Landini Lutaif Dolci, Mônica Alcantara de Oliveira Santos

Keywords: audiometry, hearing loss, vestibular diseases, vestibular function tests.

Hearing loss is very common in the world. Several are the factors which can cause hearing loss and, not rarely, these factors are also potential assailers of the vestibular system. **Objective:** To evaluate the presence of cochlear impairment - hearing loss - in patients with peripheral vestibular dysfunction. **Materials and Methods:** A retrospective study, which evaluated 56 patients who underwent vestibular testing, with results suggesting a peripheral vestibular deficiency syndrome, with their audiometry and tympanometry in the period of 2005 to 2011. **Results:** Hearing loss was observed in 40 patients (72%). It was unilateral in 24 patients (60%), and the side affected by hearing loss was the same side of the peripheral vestibular syndrome in 100% of cases. The stapedius reflexes were present in 44.6% and absent in 55.4%, in the absent cases 48.4% were bilateral absence and 51.6% were unilateral absence. In all cases where the stapedius reflex was unilaterally absent, the side affected was the same side of the vestibular deficit. **Conclusion:** We found 72% of cochlear changes - hearing loss- in patients with vestibular syndrome suggestive of peripheral vestibular deficit.

PS-392

SGP: 8538

Adenoid Cystic Carcinoma of the External Auditory Canal

Author(s): Danielle Leite Cunha, Eduardo Tanaka Massuda, Miguel Angelo Hyppolito, Carolina Sponchiado Miura, Emanuel Capistrano Costa Junior, Carolina Brotto de Azevedo, Luiz Henrique Carboni Souza

Keywords: adenoid cystic, carcinoma, ear, external, neoplasms.

The adenoid cystic carcinoma of the external auditory canal is a rare disease, with slow growth and locally invasive. The pattern of this disease is perineural invasion and metastasis. Diagnosis occurs by histology and the treatment should be performed by surgery associated with radiotherapy. This paper reports a case of adenoid cystic carcinoma of the external ear canal without perineural invasion, which was treated with petrosectomy and adjuvant radiotherapy. The patient was followed up in the oncology ward and did not have disease recurrence.

PS-393

SGP: 8539

Profile of 530 patients with chronic tinnitus

Author(s): Alice Lang Silva, Konrado Massing Deutsch, Miguel Bonfitto, Lucas Pires Stocker Ries, Alice Castro Menezes Xavier, Celso Dall'Ina, Leticia Petersen Schmidt Rosito

Keywords: hearing, hearing loss, tinnitus.

Tinnitus is the perception of a noise in the absence of an external source producing a sound stimulus. It is a common complaint in the medical practice, affecting approximately 10-14% of the general population. The Tinnitus Clinic of our institution received, September 2002 to April 2011, 530 patients with this complaint. This study retrospectively analyzed the profile of these patients in relation to the characteristics of their tinnitus and their medical history from a database. Among the most frequent causes of tinnitus are noise-induced hearing loss, presbycusis and Ménière's disease. The average age of these patients was of 58.8 years on the date of the first evaluation and the most prevalent gender was female, which accounted for 62.7% of patients. The most frequent location of tinnitus was in both ears and the situations that most frequently impacted the perception of tinnitus were silence, at night and an emotional situation. Regarding the comorbidities reported by the patients, highlights are cardiovascular, gastrointestinal, psychiatric, endocrine and rheumatic disorders.

PS-394

SGP: 8540

Benign Paroxysmal Positional Vertigo - Ear affected issues

Author(s): Gerusa Pereira, Márcia Maria do Carmo Bilecki, Raquel Mezzalira, Juliana Monteiro de Abreu, Bárbara Bianchi

Keywords: dizziness, labyrinth diseases, semicircular canals, vertigo.

Benign Paroxysmal Positional Vertigo is the most common cause of vertigo of a peripheral origin, representing 20 to 30% of all patients with dizziness. Theoretically, it is assumed that this disease affects both ears equally. However, in a meta-analysis carried out in 2004, they found a predominance of right labyrinth involvement. The objective of this study was to describe the profile of our population in relation to the difference or not in frequency concerning the side affected. We carried out a retrospective analysis of patients with Benign Paroxysmal Positional Vertigo undergoing vestibular testing since January 2010 to April 2011. In the population studied, Benign Paroxysmal Positional Vertigo was more frequent in the right labyrinth.

PS-395

SGP: 8543

Study of the symptoms experienced by patients with suspected BPPV in the neurotology ward of the Hospital Otorrinolaringológico de Feira de Santana

Author(s): Mirella Melo Metidieri, Sandro Torres, Milton Pamponet, Tatiana Carneiro da Cunha Almeida, Larissa Roberta Campos de Sousa, Anaildes de Freitas Queiroz, Hugo Fernandes Santos Rodrigues

Keywords: nystagmus, pathologic, signs and symptoms, vertigo.

Benign Paroxysmal Positional Vertigo (BPPV) is one of the most common disorders of the peripheral vestibular system. It is the most common cause of vertigo of peripheral origin, predominantly in patients aged between 50 and 55 years. In this study were analyzed, 186 patients with typical symptoms of BPPV in the period between 2009 and 2011. Patients underwent videonistagmography through the Digital Video Frenzel associated with the Dix-Hallpike maneuver. The objective of this association is to correlate the positivity of the maneuver with the symptoms. We can see that when we associate a greater number of symptoms we obtain a high positive predictive value for BPPV. However an isolated symptom is not very sensitive to the positiveness of the maneuver.

PS-396

SGP: 8546

Effectiveness of the BPPV treatment at the neurotology clinic of the Hospital Otorrinolaringológico de Feira de Santana

Author(s): Hugo Fernandes Santos Rodrigues, Mirella Melo Metidieri, Sandro Torres, Tatiana Carneiro da Cunha Almeida, Larissa Roberta Campos de Sousa, Anaildes de Freitas Queiroz Cintra, Milton Pamponet

Keywords: primary treatment, semicircular canals, vertigo.

Introduction: First described by Bárány, in 1921, Benign Paroxysmal Positional Vertigo (BPPV) is characterized by intense paroxysms of vertigo associated with nystagmus provoked by changes of head position relative to gravity. **Methods:** We analyzed the period between 2009 and 2011, 186 patients with typical symptoms of BPPV. Patients underwent videonistagmography through the Digital Video Frenzel. **Results:** Patients with positive Dix-Hallpike test underwent repositioning tests, which were performed for the treatment of disease. Repositioning tests were conducted, and 85.9% of patients underwent the Epley maneuver. During the present study was to correlate the number of tests required for the patient to presenting symptom remission. It was observed instantaneous remission of symptoms in 58.3% of cases. **Discussion:** The treatment of BPPV can be accomplished with the application of tests, which would move the Statocone debris back to the utricle. The Epley maneuver is a treatment for BPPV most commonly used lately. In this study 85.9% of patients underwent the Epley maneuver as a result of the positive Dix-Hallpike. At the performed study we observed the instantaneous remission of symptoms in 58.3% of cases. **Conclusion:** We conclude that the Epley test is an effective treatment for patients with BPPV, since a large number of patients show remission of symptoms in short time.

PS-397

SGP: 8550

Vestibular evoked myogenic potential during acute vertigo spell

Author(s): Ricardo Schaffeln Dorigueto, Rodrigo César Silva, Ana Maria Almeida de Sousa, Paula Ribeiro Lopes, Renata Souza Curi, Mário Sérgio Lei Munhoz

Keywords: dizziness, vertigo, vestibular evoked myogenic potentials, vestibular neuritis.

Introduction: Dizziness is a highly prevalent symptom worldwide. Expenditures of healthcare systems with patients with this condition and its complications are huge, reaching billions of dollars. It is difficult to document and differentiate the etiology, whether central or peripheral, due to the cost of exams; and symptoms often worsen when patients are submitted to higher availability tests. **Aim:** To describe the electrophysiological findings by means of vestibular evoked myogenic potential (VEMP) in patients with acute vertigo. **Methods:** Cross sectional diagnostic intervention through VEMP were evaluated in individuals who had vertigo spells associated with spontaneous nystagmus. **Results:** The VEMP frequency change in patients with acute vertigo was 75%. Changes were found regarding the lack of response and asymmetry index (AI). There were no changes in the of p13 and n23 parameters. **Conclusion:** Vestibular Evoked Myogenic Potential identified signs of impairment of the vestibulo-colic reflex in 75% of patients with acute vertigo.

PS-398

SGP: 8552

Analysis of the postoperative results and complications of radical mastoidectomy in an outpatient medical residency clinic in otolaryngology in Feira de Santana - BA

Author(s): Francisco José Motta Barros de Oliveira Filho, Sandro de Menezes Santos Torres, Antonio Fausto de Almeida Neto, Tatiana Carneiro da Cunha Almeida, Milton Pamponet da Cunha Moura, Daniela Pereira Ferraz, Mirella Melo Metidieri

Keywords: cholesteatoma, cholesteatoma middle ear, otitis media suppurative.

Cholesteatoma result from the proliferation of stratified keratinized epithelial tissue in the middle ear, mastoid or temporal bone. The definitive treatment of this condition is mastoidectomy, with toppling of the external auditory canal (canal wall down) or its preservation (canal wall up). We led a prospective study on patients with chronic otitis media who underwent radical mastoidectomy in medical residency in otolaryngology program in Feira de Santana - BA during the period of 2008 to 2010. In both types of mastoidectomy, the hearing improvement was significant. However, the difference in results between the techniques was not statistically significant.

PS-399

SGP: 8554

Asymmetry of the optokinetic nystagmus as an isolated finding upon vector-electronystagmography in a case of meningioma

Author(s): electronystagmography, meningioma, nystagmus, optokinetic.

Keywords: electronistagmografia, meningioma, nistagmo optocinético.

The study of optokinetic nystagmus is little affected by inattention or medication and its asymmetry in the absence of spontaneous nystagmus or semi-spontaneous with the eyes open, suggests involvement of the central nervous system. **Case report:** A 72-year-old female, born in Campinas-SP, complaining of dizziness in the absence of an aggravating or triggering factor. She reported bilateral tinnitus and had hypertension, but it was controlled. On ENT examination there were no relevant signs, and we ordered basic vestibular test. In pure tone audiometry we found a moderate sensorineural hearing loss, with an irregular audiometric curve, without compromising logaudiometry results. Analogue vector-electronystagmography for positional nystagmus yielded asymmetry of the horizontal optokinetic nystagmus on the right, justifying an MRI. The MRI showed an extra-axial mass in the posterior fossa on the left side, likely to be a meningioma. **Discussion:** Considered a common symptom in clinical medicine, dizziness always warrants an investigation of the vestibular function. The oculomotor tests are key in this investigation, because of the test's sensitiveness in CNS involvement. **Conclusion:** In this case, the optokinetic nystagmus asymmetry, as the only finding of the present evaluation led to an investigation by imaging, which was of singular importance for the final diagnosis.

Gradenigo's syndrome: a case report

Author(s): Mirella Melo Metidieri, Sandro Torres, Milton Pamponet, Tatiana Carneiro da Cunha Almeida, Francisco José Motta Barros de Oliveira Filho, Hugo Fernandes Santos Rodrigues, Antônio Fausto de Almeida Neto

Keywords: abducens nerve, mastoiditis, otitis.

Gradenigo's syndrome comprises a triad of symptoms: complicated otitis media with purulent otorrhea, pain in the area of innervation of the first or second branch of the trigeminal nerve, and abducens nerve palsy. It is considered to be a rare complication of otitis media, and its differential diagnosis must be done against intracerebral abscesses, aneurysms, cholesteatoma, petrous apex tumors, meningioma, neuroma or metastases, and ear disease hydrocephalus. It is important to remember that despite the drop in incidence seen for this syndrome, morbidity and mortality rates for are still high, and we must be ever vigilant in diagnosing complications of otitis media.

Steatosis in the External Auditory Canal - Case Report

Author(s): Gustavo Henrique Marques de Sá, Pedro de Oliveira Cavalcanti Filho, José Diniz Júnior, Daniel Paiva de Oliveira, Pedro Guilherme Barbalho Cavalcanti, Jericefran de Moraes Souza, Maximiano da Franca Trineto

Keywords: adipose tissue, ear canal, ear external, hearing loss mixed conductive-sensorineural, subcutaneous fat.

Introduction: steatosis is the diffuse accumulation of lipids in an organ. It is rarely seen in the ear canal, and no cases have been reported in the literature to date. **Objective:** this paper aims to describe the clinical findings and correlate them to hearing parameters. **Materials and methods:** the patient was submitted to clinical examination, imaging, full workup, and hearing tests. **Result:** the patient's parents had metabolic disorders such as hyperlipidemia and both had ischemic heart disease. The patient complained of bilateral hypoacusis, purulent secretion, and partial stenosis of both ear canals; mild phlogosis was also observed. He was treated with a topical solution of fluocinolone, polymyxin B, neomycin, and lidocaine, plus oral amoxicillin. The patient came back to our service and the secretion was under control. He was submitted to aural suction and no stenosis by otitis media was found in the ear canals; but the patient had permanent stenosis with preserved eardrums and flaccid ear canal walls. Temporal bone CT scans were made and the patient was diagnosed with bilateral ear canal steatosis, as bilateral periauricular and intracanal fat infiltration was observed, leading to a reduction in ear canal gage. Workup showed the patient's glucose was at 144, TSH = 7.1, T3 = 61.4, T4L = 4.6, total cholesterol = 367, HDL = 66, VDL = 210 and triglycerides = 288. He had mild to moderate bilateral mixed hearing loss. **Conclusion:** findings are indicative of an undefined metabolic disorder. The patient was referred to a multidisciplinary assessment. Surgery is ruled out for now; stenosis is only partial and success rates for meatoplasty are not encouraging. He will be managed clinically.

The association between cobalamin deficiency and tinnitus severity

Author(s): Alice Castro Menezes Xavier, Konrado Massing Deutsch, Alice Lang Silva, Miguel Bonfitto, Lucas Pires Stocker Ries, Celso Dall'Ina, Letícia Petersen Schmidt Rosito

Keywords: tinnitus, vitamin b 12, vitamin b 12 deficiency.

Tinnitus is a highly prevalent condition consisting of noise originated in the ear regardless of external sources of sound. Its pathophysiology is unclear, but studies have related it to nerve fiber demyelination and a possible deficiency of vitamin B12 (cobalamin). This study aims to analyze different cobalamin blood levels in tinnitus patients. **Materials and methods:** the study enrolled 293 patients seen between 2001 and 2011, with a mean age of 58.62; 62.1% were females, 88.4% were Caucasian, and 37% complained of hypoacusis. Data collection was performed through a standardized protocol followed by cobalamin level measurements. **Results:** thirty one (10.58%) of the 293 enrolled patients had cobalamin deficiency. The mean age in this subgroup was 59.48 ±18.27 years, 71.0% were females, 90.3% were Caucasians and 20% had hypoacusis. Patients with normal levels of

cobalamin had a mean age of 58.54 ±13.15 years, 60.9% were females, 91.2% Caucasians and 38.23% had hypoacusis. No difference was found between these groups in terms of how long they have had tinnitus and quality-of-life indicators. No differences were found for presence of gastrointestinal tract disease, neurologic disease, or hematocrit/hemoglobin blood levels. No correlation was found between cobalamin deficiency and time with tinnitus or cobalamin deficiency and impact on quality of life impact. **Conclusion:** prevalence rates of patients with tinnitus and cobalamin deficiency are low and similar to the rates found in the general population. There is no difference in patient profile and tinnitus severity between patients with and without cobalamin deficiency.

Analysis of results and postoperative tympanomastoidectomy complications in an ENT in Feira de Santana - BA

Author(s): Francisco José Motta Barros de Oliveira Filho, Sandro Torres, Milton Pamponet, Tatiana Carneiro da Cunha Almeida, Mirella Melo Metidieri, Daniela Pereira Ferraz, Antônio Fausto de Almeida Neto

Keywords: ear, mastoiditis, middle, otitis.

Tympanomastoidectomy is a simple mastoidectomy combined with a tympanoplasty. The two main indications for this procedure are chronic suppurative otitis media, COM with minor cholesteatoma in children or in patients with a pneumatized mastoid. The main purpose of this procedure is to expose the disease, remove the affected tissue, and repair the hearing conduction mechanism while keeping the middle ear structures practically untouched. Chronic suppurative otitis media is characterized by chronic inflammation of the middle ear and persistent ear discharge. It is caused by pathologic alterations in the middle ear originated locally or systemically not allowing for improvement from symptoms. This is a prospective study done with chronic suppurative otitis media patients submitted to tympanomastoidectomy at an ENT service in Feira de Santana - BA between 2008 and 2011.

Profile of the hearing aid users

Author(s): Diego Costa Farias, Waner Josefa de Queiroz Moura, Ana Paula Sirotheau Correa Rodrigues, José Cláudio de Barros Cordeiro, Theago Barros Silva, Samara Noronha Cunha, Renato Valentim Brasil

Keywords: hearing aids, hearing loss, prevalence.

Introduction: hearing is one of the most important senses for the establishment of relations between individuals in any given society. According to the Brazilian Census Service (2002), 5.7 million Brazilians have some sort of hearing loss. Hearing aids are the main resource they can use to minimize the impact of hearing loss. **Materials and methods:** this is a retrospective study comprising the charts of 155 hearing aid users seen between 209 and 2011. Patients were analyzed for their age, gender, unilateral/bilateral involvement, type and grade of hearing loss, probable etiology, and type of hearing aid. **Results:** the group had equal representation of males and females (50% each) and more individuals aged 60 or more (43%) with bilateral hearing aids (99%), sensorineural hearing loss (78%), moderate levels of hearing loss (43%), unknown etiology (48%), BTE aids (100%), of type A (43%). **Conclusion:** there was no clinical or epidemiologic disagreement between this study and the literature. Longitudinal studies may be developed to better establish the etiology of hearing loss for each age range.

Epidemiologic profile of chronic ear patients at the ent clinic of the Feira de Santana Hospital

Author(s): Mirella Melo Metidieri, Sandro Torres, Milton Pamponet, Antonio Fausto de Almeida Neto, Francisco Jose Motta Barros de Oliveira Filho, Tatiana Carneiro da Cunha Almeida, Hugo Fernandes Santos Rodrigues

Keywords: cholesteatoma, epidemiologic research design, otitis media, suppurative.

Chronic otitis media (COM) is a chronic inflammatory process involving the middle ear and the mastoid that may or not be associated with eardrum perforation and otorrhea. It may evolve to mild to severe conductive or

mixed hearing loss. This is a prospective study done on patients with chronic cholesteatomatous and non-cholesteatomatous otitis media submitted to surgery at an ENT service in Feira de Santana - BA between 2008 and 2011. The study enrolled 199 patients; 131 were females and 68 were males. As mentioned previously, the diseases considered in this study were chronic cholesteatomatous otitis media (CCOM) and chronic non-cholesteatomatous otitis media (CNCOM); 53 patients had CCOM and 146 had CNCOM. The age of the 107 patients with chronic otitis media ranged between 6 and 67 years. Sixty-nine were females and 38 were males. One hundred and six underwent tympanomastoidectomy and only one was submitted to tympanoplasty. Chronic otitis media is a highly prevalent disease in the world. Research has shown that the yearly incidence rate of cholesteatomatous otitis media is of about 3 cases for every 100,000 children and of 9,2 for every 100,000 Caucasian adults; males are more affected than females. Nelson et al. (2002) reported incidence rates 1.4 times greater in males than in females.

PS-407

SGP: 8575

Profile of dizziness patients treated in a university hospital

Author(s): Lorena Gonçalves Rodrigues, Renato Valentim Brasil, Rafael Carvalho Pereira, Renato Valério Rodrigues Cal, Diego Costa Farias, Samara Noronha Cunha, Paulo Marcos Fontelles de Lima Araújo

Keywords: dizziness, meniere disease, vertigo.

The vestibular system serves the bodily functions of balance and equilibrium. It combines with the somatosensory and visual systems to promote proper static and dynamic spatial orientation, movement, and postural control. Vertigo is the most common form of dizziness and presents rotational characteristics. Vestibular involvement accounts for most of the causes of dizziness. **Materials and methods:** this is a retrospective study performed upon the analysis of the charts of 76 patients seen at the otoneurology ward of a university hospital between January and March of 2010. **Results:** sixty-three (83%) patients were females and 13 (17%) were males. Mean age was 48 years for females and 51 for males. The most prevalent diseases were migraine and BPPV, both at 38.15%, followed by undefined dizziness (15.78%), Ménière's disease (6.57%), and vestibular neuronitis (1.31%). Female patients had higher prevalence rates in all studied diseases; 26 (89.6%) of the 29 patients diagnosed with vestibular migraine were females and 3 (10.4%) were males; 25 (86.2%) of the 29 patients with BPPV were females and 4 (13.8%) were males. **Conclusions:** vestibular migraine and BPPV were the most prevalent diseases and females the most affected gender.

PS-408

SGP: 8579

Cough incidence during hearing aid pre-fitting at a hearing rehabilitation center in Bahia, Brazil

Author(s): Carolina Cincurá Barreto, Tamara Thiala Santos de Jesus, Fernando Pena Gaspar Sobrinho, Hélio Andrade Lessa

Keywords: audiology, cough, vagus nerve.

Coughing can be triggered by manipulation of the external auditory canal (Arnold's reflex), as observed during the pre-fitting of hearing aids. Other unrelated causes of coughing include infection, allergy, respiratory conditions and high blood pressure medication. The objective of this study is to determine the incidence of coughing in patients enrolled at the Bahia hearing rehabilitation center during hearing aid pre-fitting. We attempted to determine the frequency of known causes of coughing to compare the degree of discomfort among patients who coughed and those who did not. We studied 73 patients undergoing hearing aid pre-fitting. Patient age ranged from 18 to 96 years. Under direct observation, twenty patients (27.4%) coughed during the pre-fitting process. One patient had nausea. Among those who coughed, twelve patients (60%) were taking high blood pressure medication. Of these, seven were using Captopril, an ACE inhibitor, which has been associated with increased incidence rates of coughing during hearing aid pre-fitting ($p = 0.001$). Discomfort, assessed on a visual scale (ranging from 0 to 10), was notably higher among those who coughed (mean \pm SD: 2.5 ± 2 vs. 1 ± 2 , $p = 0.01$). Although cough related to hearing aid pre-fitting is self-limited, it is relatively common and may be associated with symptoms such as nausea, and may even influence the degree of discomfort experienced by the patient during the molding procedure. Therefore, the importance of Arnold's reflex

should not be underestimated, especially when considering the possibility of complications arising from this procedure, such as aspiration of foreign bodies from the oral cavity or syncope.

PS-409

SGP: 8584

Electro-acoustic stimulation of the auditory system: description of surgical technique UNICAMP

Author(s): Guilherme Machado de Carvalho, João Paulo Peral Valente, Alexandre Scalli Mathias Duarte, Eder Barbosa Muranaka, Marcelo Naoki Soki, Alexandre Caixeta Guimarães, Walter Adriano Bianchini, Arthur Menino Castilho, Agrício Nubiato Crespo

Keywords: cochlear implantation, cochlear implants, hearing disorders, minor, surgical procedures.

Objectives: this paper aims to describe the surgical procedure for MED-EL Mand FlexEAS cochlear implant placement to improve the hearing capabilities of patients with high frequency hearing loss while maintaining hearing at lower frequencies. Ours is the first center in Brazil to offer this procedure. **Materials and methods:** this paper describes the procedure as performed in four patients implanted by the Cochlear Implant Group of the University Hospital at UNICAMP in Brazil. **Results:** all procedures were uneventful. **Conclusion:** this is a pioneering effort in Brazil, and only early results are presented herein. Longer follow-up analysis and more cases are required. This is the beginning of a new era in hearing rehabilitation. Some steps of the surgical procedure have no scientific evidence.

PS-410

SGP: 8585

Analysis of results and postoperative tympanoplasty complications at an ENT service in Feira de Santana - BA.

Author(s): Francisco José Motta Barros de Oliveira Filho, Sandro de Menezes Santos Torres, Milton Pamponet da Cunha Moura, Antonio Fausto de Almeida Neto, Tatiana Carneiro da Cunha Almeida, Mirella Melo Metidieri, Hugo Fernandes Santos Rodrigues

Keywords: eardrum perforation, otitis, otitis media, tympanoplasty.

Tympanoplasty is a surgical procedure performed to close chronic tympanic membrane perforations and/or repair the ossicular chain. Tympanic membrane perforation secondary to chronic otitis media (COM) is still a common problem in ENT practice. The most important etiology is undoubtedly infection. Simple COM is the most common form of COM. It is characterized by chronic inflammation of the middle ear and eardrum perforation combined with otorrhea. Middle ear and mastoid mucosal alterations are not permanent. Symptoms are generally mild and the ear tends to stay dry for prolonged periods of time. This is a prospective study on patients with chronic otitis media submitted to tympanoplasty at an ENT service in Feira de Santana - BA between 2008 and 2011.

PS-411

SGP: 8586

Neurofibromatosis type II: Multiple injuries

Author(s): Larissa Magalhães Navarro, Cecília Pereira Paes, Joyce Oliveira de Lima, Henderson de Almeida Cavalcante, Waner Josefa de Queiroz Moura

Keywords: acoustic, hearing loss, neurofibromatosis 2, neuroma, sensorineural.

Introduction: neurofibromatosis type II is a rare autosomal dominant syndrome characterized by peripheral neuropathy, skin and eye lesions, and growth of multiple benign tumors involving the skull and spine (schwannomas, meningiomas, and ependymomas). Vestibular schwannoma is the main factor indicative of this disease; it is accompanied by other symptoms such as tinnitus, hearing loss, and balance disorders. **Case report:** R.S.F, 44, male Caucasian hearing aid user, with history of bilateral dysacusis dating to 18 years prior, sought care at our ENT service complaining of significantly worsening hypoacusis. Tone audiometry showed presence of severe sensorineural hearing loss; skull MRI revealed neurogenic lesions involving both ear canals consistent with acoustic nerve schwannoma. The patient underwent stereotactic radiosurgery and his tumors reduced in size. **Conclusion:** despite the small number of reports in the literature, it is important to learn more about the pathophysiology of this disease so that

early diagnoses is done and the main associated tumor is identified - vestibular schwannoma - to allow for satisfactory management of the patient's auditory and vestibular function.

PS-413

SGP: 8593

Brain abscess due to acute otitis media: a case report

Author(s): Edmara Laura Campiolo, Fernando Arruda Ramos, Lina Ana Me-deiros Hirsch, Vanessa Bonfanti, Samuel Antonio Freitas, Ricardo Rath de Oliveira Gargioni

Keywords: abscess, cerebrospinal fluid otorrhea, otitis media.

Objective: this paper describes a case of acute otitis media in which the patient was offered inadequate follow-up, thus allowing the onset of brain abscess and severely impacting the patient's quality of life. **Case report:** brain abscesses are the most common complications of acute otitis media (AOM), affecting between 0.13% and 1.97% of the patients according to Penido et al. Brain abscesses also present high morbidity and mortality rates. A 19-year-old patient presented signs of poorly treated left ear AOM. He admitted on account of neurologic symptoms - sensorial loss and cranial hypertension. Skull CT scans revealed an encapsulated tumor in the left temporal-parietal region. A craniotomy was performed and the tumor was removed. Pathology tests indicated presence of *Streptococcus sp.* The patient was treated with specific antibiotics, had an epileptic episode after hospitalization but no other evident neurologic manifestations, and was prescribed continuous phenytoin. **Conclusion:** AOM is more prevalent among children and is uncommon in adults. Complications must be identified in the clinical examination, as delays in identifying complications worsen patient prognosis. Follow-up must be meticulously managed and the proper antibiotics administered to the patient. Developing countries have higher complication rates by otitis due to self-medication and tardiness in seeking medical care. These may lead to increased morbidity and mortality rates associated with complications and greater numbers of children and adults impaired by significant sequelae, and possibly more people on disability leave because of a treatable condition.

PS-414

SGP: 8610

Peripheral facial palsy and hidden parotid tumor

Author(s): Gisela Andrea Yamashita, Ricardo Landini Lutaif Dolci, Julia Maria Olsen, Paulo Roberto Lazarini, Alexandre Suehara

Keywords: facial palsy, neoplasms, wound infection.

Peripheral facial palsy (PFP) is a relatively common condition that may be caused by infection, tumors, neurologic and congenital diseases, trauma and idiopathic factors. Facial palsy is rarely caused by parotid tumors. Parotid malignancies account for 1% to 3% of all head and neck malignant tumors. This study aims to describe the case of a patient with PFP and swelling in the parotid and preauricular regions diagnosed with skin squamous cell carcinoma, in whom a hidden parotid tumor was found, and to perform a literature review on hidden parotid tumors.

PS-415

SGP: 8613

Squamous cell carcinoma of the external ear: case report and literature review

Author(s): Carolina Santos Bosaipo, Eduardo Pereira Bosaipo, Luciana Oliveira Sousa, Maria do Desterro Soares Brandão Nascimento, Dulcelena Ferreira Silva

Keywords: carcinoma, ear, ear neoplasms, external, medical oncology, squamous cell.

Introduction: this paper describes a case of external ear squamous cell carcinoma (SCC). **Case report:** the patient is a 44 year-old man of dark complexion, carpenter by trade, smoker, originally from São Bento - MA and now a resident of São Luís - MA, with history of ear pain and inflammation. He was admitted at an oncology care center because of a lesion in his external ear that extended towards the neck, diagnosed as undifferentiated squamous cell carcinoma. **Discussion:** ear and temporal bone

tumors are rare. Pinna tumors are the most common among ear tumors and are usually found to be basal-cell carcinomas associated to prolonged exposure to sunlight, while tumors involving the ear canal and middle ear are most often squamous cell carcinomas usually associated with eczematous otitis, although such combination is not perfectly established. They usually manifest as painless wounds that bleed very little and do not heal, and gradually destroy adjacent tissues, often producing secondary infection. Treatment is surgical for small, early tumors. Radiotherapy and chemotherapy are reserved for inoperable cases or situations in which surgery would be disfiguring. **Conclusion:** these are rare tumors with symptoms indicative of other diseases. Early diagnosis and proper treatment must be offered to external ear tumors, particularly squamous cell carcinomas, given that they progress significantly when left untreated.

PS-416

SGP: 8617

Labyrinthitis: myth or reality?

Author(s): Gerusa Pereira, Raquel Mezzalira, George Eduardo Câmara Bernarde, Marcia Maria do Carmo Bilecki, Juliana Monteiro de Abreu

Keywords: dizziness, labyrinthitis, otitis media.

The abstract was not sent.

PS-418

SGP: 7639

Plexiform Schwannoma of the nasal tip: surgical approach.

Author(s): Renata Caroline Mendonça Ferraz, Juliana Antonioli Duarte, Fernanda Pires Gallardo, Reginaldo Raimundo Fujita, Shirlei Shizue Nagata Pignatari

Keywords: neurofibroma plexiform, nose, schwann cells.

Introduction: schwannomas account for 25% to 45% of all head and neck tumors. Four percent of these involve the nasal cavity and paranasal sinuses. They are rarely seen in the nasal tip, and only four cases have been reported to date in the literature. **Objective:** this paper aims to describe a case of nasal tip plexiform schwannoma and discuss the possible surgical approach. **Case report:** a 6-year-old patient has had a nasal tip deformity for two years. MRI scans showed a bright spot on the patient's nasal tip on T2. A rhinoplasty using Rethi's approach was carried out. Pathology and immunohistochemistry tests done on the specimen were a match for plexiform schwannoma. **Conclusion:** nasal tip plexiform schwannomas are extremely rare. Plexiform tumors are not encapsulated and are diffusely located. Broad, non-cosmetic excisions are unnecessary as malignancy evolves slowly. The procedure produced good cosmetic results.

PS-419

SGP: 7723

Endoscopic approach in bilateral vocal cord paresis in a syndromic children: case report and presentation of surgical approach.

Author(s): Gustavo Polacow Korn, Tatiana Del Debbio Vilanova, Antonio Augusto de Lima Pontes, Paulo Augusto de Lima Pontes

Keywords: child, respiratory failure, vocal cord paresis..

Vocal cord paresis in children is the second most common congenital anomaly of the larynx after laryngomalacia, which accounts for 10% of the cases of congenital lesions of the larynx. Möbius syndrome was first described in 1888 by German neurologist Paul Julius Möbius, who suggested that congenital facial diplegia and sixth cranial nerve palsy constitute a clinical entity. Currently there is no consensus around diagnostic criteria, and some authors consider that the classification should also include congenital dysfunction of other cranial nerves, mainly bulbar ones. This paper describes the case of a patient probably with Möbius syndrome with history of tracheostomy due to respiratory failure secondary to bilateral vocal cord paresis, and proposes posterior flap rotation laryngoscopy as a surgical approach. The patient evolved well postoperatively and had the tracheostomy tube removed, resulting in improved quality of life.

PS-420

SGP: 7784

Tonsillar asymmetry: when to consider malignancy - a case report of primary lymphoma

Author(s): Carlos Eduardo Monteiro Zappellini, Hardynn Wesley Saunders Rocha Tavares, Luana Gonçalves Oliveira, Fábio Silva Alves, Luciana Campoy Giro Basile, Rodrigo Ubiratan Franco Teixeira

Keywords: lymphoma, oral manifestations, tonsillar neoplasms.

Introduction: in any part of the body, abnormal growth may be indicative of a wide range of neoplastic and inflammatory conditions. Lesions of various types come to mind when adult patients present asymmetric tonsils. Many authors have reported that in 75% of such cases their patients had malignant tumors. **Discussion:** primary non-Hodgkin's lymphomas are rarely seen in the realm of ENT. They are predominantly located in the tonsil, followed by the cavum. The tonsils are also involved by squamous cell carcinomas. Alcohol, tobacco, and HPV infection are associated to this type of tumor. **Conclusion:** non-Hodgkin's lymphomas respond well to chemotherapy. Early diagnosis and aggressive chemotherapy are linked to high patient survival rates.

PS-421

SGP: 7797

Pleomorphic adenoma of the soft palate

Author(s): David Augusto Rodero, Kazue Kobari, Danielle Candia Barra, Ludmila Morgado Santos, Flávia Molina Ferreira

Keywords: adenoma, palate, pleomorphic, salivary glands, soft.

Salivary gland tumors account for approximately 3% to 10% of all head and neck tumors. They occur mainly in the parotid glands, but may also be seen in the submandibular, small, and sublingual salivary glands. Pleomorphic adenoma has become the most common benign salivary gland tumor and accounts for 40% to 70% of all salivary gland tumors. Soft palate tumors are malignant in their majority.

PS-422

SGP: 7804

Dermoid cyst of mouth floor

Author(s): Cassiano Ricardo Dantas Moreti, Fábio de Arruda Mesquita, Matheus Sgarbi Vergaças, Danúbia Domingos Souza, Cláudia Pereira Maniglia

Keywords: dermoid cyst, mouth, mouth floor.

Introduction: dermoid cysts usually appear in people aged between 15 and 50 years and affect both genders equally. They grow slowly and symptoms are only perceived as they become large and impair mastication, swallowing, and phonation. Only 1-2% of them are found in the mouth. Dermoid cysts are elastic nodular lesions and may induce secondary infection. Surgical removal of the cyst is the treatment of choice. **Objective:** this paper describes the case of a child with a mouth floor dermoid cyst. CT scans and pathology tests were ordered with diagnostic purposes. Surgical treatment was successful.

PS-423

SGP: 7811

Pleomorphic Adenoma of the Soft Palate

Author(s): Carlos Eduardo Monteiro Zappellini, Fábio Silva Alves, Hardynn Wesley Saunders Rocha Tavares, Luana Gonçalves Oliveira, Luciana Campoy Giro Basile, Luis Miguel Chiriboga

Keywords: adenoma, adenoma, palate, pleomorphic, soft.

Pleomorphic adenoma, or benign mixed tumor, is the most common benign salivary gland tumor and accounts for 40-70% of all salivary gland neoplasms. It involves the parotid gland more frequently, followed by the submandibular and small salivary glands. Small salivary gland pleomorphic adenomas are seen more frequently in the palate, followed by upper lip, cheek mucosa, mouth floor, tongue, tonsils, pharynx, retromolar space, and nasal cavities. Tumors involving the small salivary glands usually have under two centimeters in diameter. Palatal tumors are more commonly found in the posterior-lateral region, in the border between soft and hard palate. They manifest initially as sessile, well-bordered, painless nodules that feel

firm when palpated. Pleomorphic adenomas call for proper histopathology tests, once malignant tumors may be very similar to benign ones. Surgeons play a key role in the treatment of this neoplasm, as recurrence may occur if fragments of the capsule or of the tumor itself remain in place.

PS-424

SGP: 7857

Oral mucosa tumor: tonsil polypoid hemangioma

Author(s): Carlos Augusto Ferreira de Araújo, Mary Laura Garnica Perez Villar, Fausto Rezende Fernandes, Flávio Ribeiro Lana

Keywords: hemangioma, mouth, mouth diseases, otorhinolaryngologic neoplasms, palatine tonsil.

Introduction: hemangiomas are benign vascular tumors made up of a blood-filled pouch of endothelium. They may appear during or soon after birth, and even throughout adult life. They are more frequently seen in female Caucasians by a ratio of 1:3. Hemangiomas are the most common tumor seen during childhood. Etiology is unknown. Specific growth factors such as endogenous hormones may impact the biological behavior of hemangiomas. Single lesions occur in most of the cases, whereas multiple lesions are seen in less than 20% of the cases. **Case report:** a 26-year-old Caucasian male patient came to our service complaining of nonspecific longstanding discomfort in the oropharynx that evolved to dysphagia - mainly for solid foods - sensation of foreign body, and odynophagia. He did not report bleeding or fever. Videolaryngoscopy confirmed the presence of a tumor consistent with hemangioma in the right tonsil. The tumor was surgically removed. **Discussion:** the patient had no complications in the immediate postoperative period, and was discharged from hospital 10 hours after surgery. In the follow-up visit no signs of phlogosis or secretion were seen in the surgical wound. The patient was allowed to return to his normal diet as he was asymptomatic. **Conclusions:** pathologic angiomatous growth in adults could stem from previous venous vascular malformations that expand rapidly from local trauma, infection, or hormone disorders. Treatment for hemangiomas varies and must be individualized.

PS-425

SGP: 7864

Risk factors for acute otitis media in children seen at a primary health care unit

Author(s): Sophia Monteiro Amorim, Leandra Campos Barbosa, Laís Monteiro Amorim, Andreia Miriam Lopes Sansoni, Viviane Imaculada do Carmo Custodio, Rodrigo José Custodio

Keywords: cultural characteristics, risk factors, social conditions.

Introduction: acute otitis media (AOM) is a common disease during childhood and poses some risk factors. **Objective:** this paper aims to assess the occurrence of some risk factors associated with the onset of AOM in children seen at UBS. Materials and methods: this is a cross-sectional descriptive study. Questionnaires were handed to 100 mothers to 100 children (48 boys and 52 girls) aged between 0 and 13 years (mean: 4.6 years). The questions looked into the number of children the interviewees had, the position of the child about whom the questions were answered in relation to order of birth of his/her siblings, current second-hand smoking status and status during pregnancy, breastfeeding, use of pacifier, mother's level of education, mother's occupational status, access to public household waste collection system, and water utility services. **Results:** the interviewed mothers had a mean 2.08 children. Fifty-four of the children targeted by the study were firstborns (42 of them were single children) and 40 were either the second or third child. Twenty-eight mothers smoked during pregnancy. Sixty-one children are second-hand smokers currently (and 21 of these mothers also smoked during pregnancy). Fourteen mothers were still breastfeeding (the mean age of children in this group is 6.7 months); on average, breastfeeding was suspended as the child got to be 6.0 months old. Fifty-eight children used pacifiers. Twenty-nine mothers had gone to school for ≤ 8 years, and 68 worked outside their homes. Nine mothers reported they did not have access to public household waste collection services and 100 had access to water utilities. **Conclusion:** many risk factors for AOM are present in this population, some of which preventable - such as second-hand smoking and use of pacifiers. Aside from improving their overall standards of living, breastfeeding should be encouraged as on average this population is ceasing it well before their children are two years old - age recommended by the WHO.

Postoperative complications in children and adolescents submitted to tonsillectomy combined or not with adenoidectomy

Author(s): José Franklin Gomes Dantas, Otávio Marambaia dos Santos, Kleber Pimentel, Lílian Lacerda Leal, Manuella Martins, Maria Eudiane, Milena Magalhães

Keywords: adenoidectomy, postoperative complications, tonsillectomy.

Introduction: tonsillectomy - combined or not with adenoidectomy - is the most common procedure in the daily practice of ENT surgeons, and is historically one of the oldest and most performed surgical procedures in medical practice. In spite of the vast experience amassed on this procedure, adenotonsillectomy is not risk/complication-free; one of the most feared complications is bleeding, while other common adverse events are nausea, vomiting, ear pain, oropharyngeal pain, dysphagia, fever, and airway obstruction. **Objective:** this study aims to describe the immediate postoperative complications seen in adenotonsillectomy performed at an ENT care center. **Materials and method:** this retrospective study comprises data from the charts of patients under the age of 20 submitted to tonsillectomy and/or adenoidectomy between April of 2004 and December of 2008. **Results:** The charts of 170 tonsillectomy and/or adenoidectomy patients were analyzed. Ninety-five (55.9%) were males and 75 (44.1%) were females. Primary bleeding was seen in three (1.8%) cases, nausea in 23 (13.5%), vomiting in 21 (12.4%), and oropharyngeal pain in 55 (32.4%). Other complications occurring between postoperative care and hospital discharge such as ear pain, fever, and airway obstruction were not reported. **Conclusion:** the most commonly reported complication was oropharyngeal pain, followed by nausea and vomiting. Primary bleeding occurred in 1.8% (n=3) of the cases as also reported in the literature.

Palate repair using platysma myocutaneous flap: a simple and effective option

Author(s): Marcos Antonio Nemetz, Fabiane Miura Ogg de Salles, Ana Beduschi Nemetz, Alessandra Kraus, Maria Gabriela Ortiz de Noronha

Keywords: head and neck neoplasms, mouth, palate, surgical flaps.

Platysma muscle myocutaneous flaps can be used to repair the mouth and oropharynx. Platysma muscle flaps offer a good match in terms of color and thickness for the palate region, pose minimal morbidity to the donor site, are easy to handle, and are located within the repair procedure operating field. Platysma flaps can be collected before or after neck dissection. They are a viable option in cases where there is minor surgery failure and free flaps are not available. This paper aims to report on a case of palate repair surgery using platysma muscle myocutaneous flap and describe the procedure as seen in the literature, as it is worthy of further consideration within the realm of head and neck repair surgery.

Treatment of salivary fistula with botulinum toxin

Author(s): Marcos Antonio Nemetz, Fabiane Miura Ogg Carneiro Salles, Ana Beduschi Nemetz, Addressa Caroline Carneiro Pinheiro, Luiza Dadan Perini

Keywords: botulinum toxins type a, parotid gland, recurrence, salivary gland fistula.

Salivary fistula is one of the most common complications secondary to parotidectomy. It increases the risk of infection and losses of free/pedicled grafts, augments the chances of reoperation, raises treatment costs, and lead to higher death rates. With such aspects in mind, a number of alternate therapies have been studied. Therefore, this paper presents a case of treatment of persistent salivary fistula among using botulinum toxin and offers a brief review of the literature on this particular therapy

Pediatric Recurrent Parotitis

Author(s): Ana Amelia Soares Torres, Fabiano Bleggi Gavazzoni, Katsumi Takaya Junior, Matheus Piassi Mulbak, Ian Selonke

Keywords: parotid gland, parotitis, pediatrics.

Pediatric recurrent parotitis (PRP) is a rare disease characterized by repeated inflammation of the parotid gland. The disease's etiology is unknown in most of the cases, but it has been related to recurrent infection, allergy, glandular congenital/structural defects, and genetic factors. PRP occurs during childhood and tends to subside after puberty. It is characterized by repeated cycles of parotid gland swelling and shrinking back to normal size. Clinical diagnosis can be confirmed through ultrasound examination; invasive diagnostic procedures are unnecessary. After the etiology has been defined, an expectant approach may be adopted. More invasive procedures have been described with higher complication rates. As this is a comprehensive and controversial topic, we present two PRP cases to discuss the possible approaches and therapies. **Discussion:** this paper describes two PRP cases with similar clinical findings. Sitheequ M. et al have noted that the most common symptoms in PRP patients are edema, pain, and fever. Most patients had more than seven episodes of parotitis as also found in our study. Etiology is multifactorial. Our patients had different etiologies: the first case was suggestive of rheumatic disease while the second related to idiopathic disease. We decided to look into Sjögren's syndrome, IgA deficiency and lymphoma. Often times etiology is not defined, as was the case of the second patient. Diagnosis is clinical and it is recommended to perform parotid ultrasound examination. Another option is sialography, a questionable test if the diagnosis has been confirmed by ultrasound. As most authors did, we chose a conservative approach. Although PRP is uncommon and benign, it is to be considered in our daily practice so as to allow for better patient management.

An analysis of the main complaints related to Waldeyer's tonsillar ring and recommendations of surgical treatment for pediatric patients

Author(s): Giuliano Enrico Ruschi e Luchi, Thais Camporez Pimentel

Keywords: adenoidectomy, nasopharynx, tonsillectomy.

Adenotonsillectomy is one of the most common surgical procedures performed in children. Indication is mostly based on the physician's clinical experience. Patients are referred to surgery mainly because of recurrent infection and sleep respiratory disorders. Cavum X-ray imaging and nasal endoscopy are the most frequently diagnostic complementary tests. **Objective:** this paper aims to look into indications of adenotonsillectomy for patients aged between 1 and 18 years with complaints related to Waldeyer's tonsillar ring. **Materials and methods:** this retrospective study included 683 charts of patients seen between 2006 and 2008. We gathered data on patient complaints, X-ray images, nasal endoscopy findings, clinical management, and surgery. **Results:** Waldeyer's tonsillar ring was mentioned in 62.39% of all charts. Main complaints were mouth breathing, snoring, and repetition tonsillitis. Cavum S-ray was ordered for 74.51% of the patients, and most of the images showed narrowing of the posterior airway. Nasal endoscopy was offered to 19.36% of the patients. Adenotonsillectomy, adenoidectomy, and tonsillectomy were performed in 88.83%, 6.60% and 4.57% of the patients respectively. **Conclusion:** complaints related to Waldeyer's tonsillar ring are highly prevalent in the pediatric ENT outpatient practice. Clinical treatment offered symptom improvement to 42% of the non-operated patients. Surgery is still broadly offered to patients with complaints related to Waldeyer's tonsillar ring.

Foreign Bodies in Children: Experience at the ENT Service of the Alagoas General Hospital

Author(s): Therezita M. Peixoto Patury Galvão Castro, Vanessa Mont'Alverne Lopes Angelim

Keywords: children, emergency service, foreign bodies, hospital.

Introduction: Foreign bodies are a common problem in emergency services. **Objective:** this paper aims to evaluate the incidence of foreign bodies in children, describing parameters such as gender, age, type of FB and location. **Materials and methods:** this is a retrospective cross-sectional study on 277 patients aged 0-12 years with diagnosis of foreign body in the ears, nose or throat, seen at the Alagoas General Hospital in 2009. **Results:** ear foreign bodies amounted to 137 cases, nose FBs to 123, and throat FBs to 18. Female patients accounted for 51.3% of the sample. Most cases were seen in the range of patients aged between 1 and 5 years. Seeds were the most common FBs found in the ears - 20 cases (15%) - and nose - 30 cases (22%). Fishbone was the most common FB in the oropharynx with 14 cases (83%). In 25% of all cases the type of foreign body was not identified. One percent of the cases required surgical removal of the foreign body. Thirty percent of the patients had been at another service prior to coming to ours. **Conclusion:** There is a high number of cases of foreign bodies in the pediatric ENT practice. Parents need to be more vigilant and physicians must be aware of how to approach those cases.

Mouth breathing: etiology, age range, climatic influences and maxillofacial anatomic development found in the patients at the ENT ward of the Medical School of Petropolis - RJ

Author(s): Carlos Augusto Ferreira de Araújo, Mary Laura Garnica Perez Villar, Fausto Rezende Fernandes, Flávius Ribeiro Lana

Keywords: adenoids, allergic, hypertrophy, outpatient care, perennial, rhinitis, rhinitis.

Introduction: mouth breathing is a deviation from what is regarded as normal nasal breathing associated with partial or total obstruction of the nasal cavities and the use of the mouth for supplemental purposes. Etiology ranges from anatomic predisposition to physical obstruction, such as adenoid/tonsil hypertrophy, obesity, nasal septum disorders, allergic rhinitis, and nasal polyps. This paper aims to compare the main etiologies connected to mouth breathing found at our service against those reported in the literature. **Materials and methods:** we analyzed the charts of 103 patients seen at our ENT ward between January of 2006 to February of 2010. Fifty-four patients met the enrollment criterion of charts given an ICD R.065. **Results:** the 54 charts analyzed attributed multifactorial causes to the disease. The most prevalent causes were adenoid hypertrophy associated with allergic rhinitis, and adenoid hypertrophy associated with tonsil hypertrophy. Tonsil hypertrophy was the most prevalent isolated cause. Various anatomic variations were described. **Discussion:** most mouth breathers in our study were males under the age of 10 years. Given the wet and cold climate of our municipality, we found a combination of two or more diseases as the causes for mouth breathing. **Conclusion:** mouth breathers present a number of variations in maxillofacial development patterns. According to our study, the main cause for mouth breathing in our municipality is hypertrophic allergic rhinitis; and most patients are affected by this condition at the age of 10. Multifactorial causes must be explored by medical specialists, and care is multidisciplinary and individualized.

Mikulicz disease in a young patient: a case report

Author(s): Marcos Antonio Nemetz, Maria Gabriela Ortiz de Noronha, Ana Beduschi Nemetz, Alessandra Kraus, Luiza Dadan Perini, Gabrielle Cordeiro de Oliveira

Keywords: mikulicz disease, parotid gland, salivary glands.

Mikulicz disease is a benign lymphoepithelial lesion that is characterized by idiopathic, persistent, bilateral, painless swelling of lacrimal and salivary

glands. Diagnosis usually involves the following steps: visual confirmation of symmetrical and persistent swelling of more than two major salivary or lacrimal glands, prominent mononuclear infiltration of the salivary and lacrimal glands, and exclusion of other diseases presenting gland enlargement. This paper presents the description of an atypical case of Mikulicz's disease, as the patient was male and young, and offers a review of the literature. We have decided to publish this case report because this is a rare disease in our area affecting a patient in an unusual age range, diagnosis is not easy, and very few cases have been published to date.

Fiberoptic Endoscopic Evaluation of Swallowing - Protocol and Case series

Author(s): Miguel Leal Andrade Neto, Loren de Britto Nunes, Pedro Simas Moraes Sarmiento, Epifanio José Pereira Filho, Fernanda Martins de Andrade, José Higinio Santos Cartaxo

Keywords: deglutition, endoscopy, protocols.

Introduction: Swallowing disorders are common to a range of pathologies. They are very frequent in neurological patients and in patients with diseases or sequelae of head and neck surgery. They also account for significant morbidity and mortality. **Materials and Methods:** We reviewed medical records of 17 adult patients who have undergone Fiberoptic Endoscopic Evaluation of Swallowing (FEES) between September 2010 and May 2011; all examinations were performed by the same otolaryngologist. **Results:** Eight of the 17 patients were females and 9 were males. Their age ranged from 30 to 98 years. Neurological patients accounted for 41.18% of the total. **Discussion:** Despite the small size sample, we observed a predominance of neurological patients (41.18%), as seen in the literature. The severity of dysphagia was more evident in hospitalized patients whose underlying diseases or comorbidities made them more susceptible even to a fatal outcome. **Conclusion:** FEES is a proven method to evaluate patients with dysphagia. Today it is considered to be as important as fluoroscopy. Only a few publications have looked into FEES and compared it to video fluoroscopy, but given its practicality and numerous advantages, it will certainly be more studied and widely used, thus gaining the preference of more otolaryngologists.

A retrospective study of 149 patients treated at the Stomatology ward: Prevalence of oral lesions and patient profile

Author(s): Marco Antonio Ferraz de Barros Baptista, Daniel Stelin, Marisa Homem de Melo Maciel Campilongo, Carlos D'Apparecida Santos Machado Filho, Priscila Bogar Rapoport

Keywords: diagnosis, epidemiology, oral, oral, oral medicine, pathology.

Introduction: epidemiologic studies help reveal the prevalence rates of numerous diseases and their statuses within the studied environment. Systemic diseases, eating disorders, pigmentation disorders, trauma, and physical/chemical/biological agents play an important role in the pathogenesis of stomatological diseases. This study aims to determine the prevalence rate of mouth lesions among the individuals seen at our Stomatology service. **Materials and methods:** this is a retrospective study that looked into the charts of 149 patients seen at our Stomatology service between January of 2008 and December of 2010. The following parameters were studied: age, gender, risk factors for mouth disease, and diagnosis. **Results:** the study included 149 patients, 40.2% of whom were males and 59.8% were females. Mean age was 56 years. Fifty-five (37%) patients were smokers and 14 (76.5%) wore dental prosthesis. The most prevalent diagnoses were leukoplakia (14%), candidiasis (13%), actinic cheilitis (12%), reactive fibrous hyperplasia (10%), lichen planus (8%), glossodynia (7%), mucosal hyperpigmentation (6%), squamous cell carcinoma (6%), other cheilitis (5%). **Conclusion:** there is significant agreement in the literature as to the most common mouth mucosal disorders. Most patients assessed were females. This study will aid in the identification of the most commonly diagnosed lesions and their associations in the stomatology practice, thus allowing for more accurate diagnosis and treatment.

Atypical manifestation of essential palatal myoclonus

Author(s): Antonini de Oliveira e Sousa, Guilherme Webster, Rui Carlos Ortega Filho, Fátima Regina Abreu Alves, Mariana Lopes Favero

Keywords: deglutition disorders, dysphonia, myoclonus, tinnitus.

This paper describes an atypical case of essential palatal myoclonus. **Case report:** a 52-year-old patient came to our service complaining of dysphonia and choking associated with involuntary muscle contractions in her soft palate - active even during her sleep - associated with tongue fasciculation. She was normal under neurologic examination. Full workup, auditory brainstem evoked response, EEG, limb electroneuromyography, CT and MRI scans were normal. Although essential palatal myoclonus is rare, it must be included in differential diagnosis.

Can the terms 'reflex' and 'voluntary' be scientifically used?

Author(s): José Luiz de Souza, Maria de Lourdes Monteiro Baptista de Souza

Keywords: awareness, deglutition disorders, reflex.

Introduction: the terms 'reflex' and 'voluntary' are usually used as scientific concepts; physiologists use these words routinely in their publications, as do most laymen in their daily lives. **Objective:** are the terms 'reflex' and 'voluntary' pre-scientific? Should they be removed from scientific jargon? **Materials and methods:** in the workshop 'Where there is will, there is reflex' held during a meeting on 'Neural Motion Control' in Key West, FL, in 1998, renowned neuroscientists were invited to discuss the meaning of the words 'reflex' and 'voluntary' and whether or not they should be used scientifically. The authors have correlated these difficulties to the scientific use of the words 'reflex' and 'voluntary' in deglutition neurophysiology. **Results:** there is no consensus yet on the scientific meaning of words 'reflex' and 'voluntary' although they are used in over 1,000 scientific papers every year. **Conclusion:** words 'reflex' and 'voluntary' are routinely used as scientific concepts, but if you ask various neuroscientists to provide you with an exact definition for these terms, you will get various different definitions as well, meaning that these terms, even today, lack scientific meaning. The oral phase of deglutition is voluntary and conscious; the pharyngeal is involuntary and unconscious. The same way we use words 'voluntary' or 'involuntary' - knowing all scientific restrictions applicable to them - we also use the term 'reflex,' as it carries significant historical meaning both for laymen and scientists, even if it lacks a clear definition.

Treatment of positional sleep apnea with a tennis ball

Author(s): Sandra Doria Xavier, Marcel Menon Miyake, Ricardo Landini Lutaif Dolci, Vanessa Ferreira Salvia, Gil Marçal

Keywords: apnea, obstructive sleep apnea, polysomnography, sleep disorders.

Positional Obstructive Sleep Apnea Syndrome (OSAS) is defined as an increase of 50% on apnea and hypopnea rates when the patient is lying on his/her back in comparison to when he/she is in lateral decubitus. An alternate therapy for positional apnea consists of placing an object such as a tennis ball on the back of the patient so he/she cannot comfortably lie on his/her back. **Case report:** SSR, 58, female (patient 1) and MCC, 45, male (patient 2). Both patients complained of nocturnal snoring, fatigue and excessive diurnal sleepiness; neither reported witnessed apnea episodes. On polysomnography both were found to have severe OSAS with obstruction episodes occurring exclusively when they were in the supine position. After 5 months with a tennis ball attached to their backs during sleep, both patients had normal polysomnography test results. **Discussion:** careful polysomnography allows the identification of cases in which positional therapy may be used as the sole treatment for positional OSAS. The tennis ball, when properly indicated, can be an effective, inexpensive and suitable alternative to the reality of public Brazilian hospitals.

Neglected odontogenic tumor: two cases of aggressive evolution

Author(s): Guilherme Machado de Carvalho, Leopoldo N. Pfeilsticker, Eliane M. I. Amstalden, Albina M. A. Alternani, Carlos T. Chone

Keywords: ameloblastoma, jaw cysts, odontogenic cysts.

Odontogenic cysts are aggressive benign maxillo-mandibular bone lesions that may produce severe sequelae if neglected. This is a report on two cases of advanced odontogenic lesion (ameloblastoma and keratocyst).

Infected Branchial Cyst in a newborn

Author(s): Fernanda Sobreira Cesar Valença, Denise de Abreu Durão, Marcelo Nogueira da Silva, Paulo Araújo, Priscila Castricini Mendonça Pimentel, André Bezerra de Pinho

Keywords: branchioma, cysts, infant, newborn.

Objective: this paper describes the early evolution of a branchial cyst in a newborn and discusses the relevance of differential diagnosis. **Case report:** M.C.F.A., female, born for 48 hours, had respiratory distress when crying and perioral cyanosis. Physiological history: patient was born from a C-section, had an Apgar score of 8/9, weighed 3.265g, and measured 47cm; she was discharged 24 hours after birth. Prenatal history: parents are young and without comorbidities; no complications recorded in this period. Clinical examination: subcostal contraction, inspiratory stridor and perioral cyanosis when crying; left neck tumor, levels II, III and IV, in the anterior border of the sternocleidomastoid muscle; it is a moving mass of elastic consistence; no signs of phlogosis. Neck US: thickened cystic formation pushing on the trachea. Neck CT scan: tumor with defined borders ranging from the oropharynx to the left supraclavicular region, located anteriorly to the vessels of the carotid sheath, with cystic characteristics and internal septations, producing laryngotracheal deviation. The tumor was punctured and 15 ml of purulent fluid were drawn. Culture showed presence of *Citrobacter freundii*. The patient was started on cefepime and vancomycin; the cystic lesion was removed 10 days later. The patient had respiratory distress in the immediate postoperative care but evolved well, being discharged 6 days after surgery. Histopathology tests confirmed the diagnosis. **Conclusion:** the vast majority of branchial cysts are second arch lesions and are usually diagnosed during childhood. Branchial cysts require time to accumulate fluid and are rare in newborns. Clinical and physical examination, aided by US and CT scans, are required in differential diagnosis and treatment.

Rhabdomyosarcoma of head and neck in childhood and immunohistochemistry

Author(s): Priscila Castricini Mendonça Pimentel, Denise de Abreu Durão, Marcelo Nogueira da Silva, Fernanda Sobreira Cesar Valença, André Bezerra de Pinho

Keywords: child, immunohistochemistry, rhabdomyosarcoma.

Rhabdomyosarcoma (RMS) is a malignant tumor derived from primitive mesenchymal cells. It is the most common soft tissue sarcoma in children, with head and neck as the most frequently affected sites. It peaks during the first and second decades of life, the most affected age range being between 5 and 9 years and males are predominantly involved. The most common histological type is embryonic. Most tumors are located in the parameningeal region (50%) and account for the worst prognosis. Histological type, location, operability, vascularization, and tumor size determine the prognosis. Immunohistochemistry helps elucidate the tissue of origin of undifferentiated neoplasms, determine the organ of origin in differentiated tumors, and prognosis and therapy-related factors. This paper aims to stress the importance of immunohistochemistry in the diagnosis and choice of approach to deal with infratemporal fossa rhabdomyosarcomas.

Stomatology - ENT at Unicamp: a multidisciplinary approach

Author(s): Patrícia Bette, Alexandre Caixeta Guimarães, Guilherme Machado de Carvalho, Thiago Pires Brito, Priscila Leite Silveira, Alexandre Scalli Mathias Duarte, Ana Cristina Dal Rio, Maria Elvira Correa, Albina M. A. M. Altemani, Ester Maria Danielli Nicola

Keywords: ambulatory health services, leukoplakia, oral, oral medicine.

Introduction: this paper looks into the multidisciplinary ENT-stomatology care provided at our school as of the second semester of 2009. **Materials and methods:** this study presents below the data concerning the period between October of 2009 and March of 2011 for our combined ENT-stomatology service. **Results:** the patients seen at our service had a mean age of 52 years; their symptoms had been installed on average for 38 months. The most frequent complaint was mouth lesions, followed by xerostomia, and burning mouth pain. Ten (24%) of the 41 patients were smokers and 6 (14%) were former smokers. Fifty-four percent of the patients used dental prosthesis. The most commonly diagnosed diseases were candidiasis, pharyngeal-laryngeal reflux, poor denture fit, leukoplakia, and burning mouth syndrome. **Discussion:** combined ENT-stomatology care in tertiary hospitals is essential for the proper evaluation, follow-up, and treatment of patients with specific diseases in this area. **Conclusion:** there is a wealth of clinical situations at our service. Special attention must be paid to factors such as smoking and use and maintenance of dental prosthesis.

Pyogenic nasopharyngeal granuloma in children, after adenotonsillectomy - first case described in the literature

Author(s): Vinicius Ribas de Carvalho Fonseca, Marcelo Charles Pereira, Denise Braga Ribas, Antonio Celso Nunes Nassif Filho, Diego Augusto de Brito Malucelli, Thanara Pruner da Silva, Guilherme D'Agostini Spanhol, Cristiane Popoaski, Anna Cristina Silvestri

Keywords: adenoidectomy, granuloma, nasal obstruction.

Pyogenic granuloma is a relatively uncommon proliferative fibrovascular benign lesion that evolves quickly, affecting skin and mucosa. **Case report:** G.C.D.A, 4, female, underwent adenotonsillectomy and two months after the procedure presented complaints of progressive bilateral nasal obstruction associated with snoring and nocturnal apnea. A cavum X-ray was ordered and the patient was found to have a tumor obstructing her nasopharynx. Nasal endoscopy was performed initially, and a smooth, pinkish cystic tumor occupying 100% of the cavum lumen was visualized. CT scans of the paranasal sinuses were ordered and a non-invasive pedicled tumor was seen in the nasopharynx without adjacent bone lysis. The patient was referred to surgery to get the tumor removed. **Results:** segments of pyogenic granuloma. **Conclusion:** recurrent obstruction symptoms after adenotonsillectomy allowed for the diagnosis of an uncommon nasopharyngeal disease.

Adenocarcinoma of the palate - case report

Author(s): Carlos Roberto Ballin, Cristiano Roberto Nakagawa, Rodolfo Toledo, Rowilson Melo, Susanne Edinger, Luiz Eduardo Nercolini

Keywords: adenocarcinoma, palate, palate hard.

Introduction: according to the literature, small salivary gland tumors are malignant in 50% of the cases. This study aims to describe a variant to the surgical procedure used to prevent oropharyngeal fistulas. **Case report:** this paper describes the case of a 31-year-old patient who complained of progressive swelling of her hard palate. She had no dysphagia or weight loss and the lesion was evolving for 5 months. She had a rosy smooth exophytic lesion in the left posterior portion of her hard palate. An excisional biopsy was done and tests indicated the presence of a well-differentiated hard palate adenocarcinoma probably originating in the small salivary gland with free microscopic lateral margins and involved deep microscopic margins. The margins in the primary site were broadened. Surgical approach: infiltration seen in the nasal cavity floor mucosa; bilateral nostril inferior incision; bilateral mucoperiosteal detachment, production of a mucosal tunnel having the nasal mucosa floor as basis; placement of a mouth spacer and injection

of xylocaine and vasoconstrictors in the lesion. The lesion was removed along with some bone; surgery wound was kept open to prevent the establishment of an oronasal fistula. One month later the surgical wound was fistula-free. **Discussion:** unlike most cases, this study reports on a female patient without risk factors for palate adenocarcinoma. Treatment is basically surgical through removal of the lesion and assessment of the ganglia; radiotherapy may also be used.

Mandibular distraction osteogenesis in a neonate: a case report

Author(s): Osteogênese por Distração; Recém-Nascido; Mandíbula; Traqueostomia

Keywords: infant, mandible, newborn, osteogenesis distraction, tracheostomy.

Distraction osteogenesis is a method designed to induce neoformation between two bone segments by means of progressive traction. The indication for mandibular distraction is reserved for cases of airway obstruction that do not improve with conservative treatment as an alternative to glossectomy and/or prior indication of tracheostomy in patients with micrognathia. The Pierre Robin sequence is characterized by micrognathia, glossoptosis, cleft palate and may occur in isolation or as part of other syndromes. We describe the case of a newborn patient with Pierre Robin sequence and other malformations who underwent mandibular distraction osteogenesis.

Tonsillar lymphoma in children with tonsillar asymmetry: report of two cases with different presentations

Author(s): Alexandre Caixeta Guimarães, Guilherme Machado de Carvalho, Reinaldo Jordão Gusmão

Keywords: child, lymphoma, palatine tonsil.

Introduction: palatine tonsil (PT) asymmetry may be caused by previous infection, anatomical variations or tumors. In children, lymphoma is the most common malignant tumor of the head and neck and is usually presented in the form of swollen PT. **Objective:** this paper aims to show the importance of physical examination and stress the relevance of PT alterations and careful interview in the early identification of patients with tonsillar lymphoma. **Case Report:** Case 1: a 5-year-old child was taken to our service with a muffled voice, noted by her mother and "feeling a strange sensation in the throat" for two weeks. The child had been taken to another service prior to coming to ours at the onset of the symptoms and was prescribed amoxicillin, to no avail. The PT was significantly swollen but its surface was smooth and free of crypts. The patient had a non-Hodgkin lymphoma (NHL) diagnosed after surgery. Further ahead involvement by lymphoma was found in the mesenteric lymph nodes. Case 2: an 11-year-old child was brought to our service's emergency unit to have a painless nodule looked at in the left palatine tonsil that had been growing for one year; the patient complained of no other symptoms. The child had been seen by other physicians who neglected the patient's complaints. Oroscopy showed that the left PT was swelling beyond the midline and had a nodule in the tonsil upper pole. This patient also had NHL as found in the pathology tests. **Final Comments:** A thorough examination of the oral cavity and neck is essential to identify suspicious lesions for tonsillar lymphoma. Patients with tonsillar asymmetry and other findings suggestive of malignancy should undergo tonsillectomy.

Methotrexate-related epistaxis and gingival bleeding.

Author(s): Jayson Peixoto Machado, Thailise Giroto Ferreira da Silva, Pedro Rangel Perez, Fernanda Sequeira Bittante, Luiz Carlos Alves de Sousa

Keywords: epistaxis, methotrexate, nose diseases.

Epistaxis is defined as bleeding of the nasal mucosa, usually associated with predisposing factors such as hypertension, trauma and coagulopathies. The etiology of epistaxis is divided into local and systemic causes, and refractory patients may require surgery. Conservative treatment is based on cauterization and nasal packing. The association with blood dyscrasias is more frequent in patients using NSAIDs, drugs that alter the arachidonic acid

metabolism and platelet function, predispose patients to bleeding. Methotrexate is a folic acid antagonist which acts on cell proliferation; it may cause leukopenia, thrombocytopenia, and megaloblastic anemia. **Objective:** To stress that methotrexate may cause pancytopenia with epistaxis and gingival bleeding. **Case report:** TOMN, female, 63, admitted to the emergency department with progressive malaise, anorexia, weight loss (3kg), epistaxis and gingival bleeding for 15 days. On treatment for Rheumatoid Arthritis with methotrexate 7.5 mg for 3 months. Physical examination: Pale (+++/4 +), anterior epistaxis and gingival bleeding. Laboratory tests: Hb: 7.5g/dl; Ht: 29%; 1.500/ml Leukocyte; Platelets: 30.000/ml. The hematologist discontinued the methotrexate because of the pancytopenia. **Discussion:** Some studies show that patients with severe bleeding undergo coagulopathy investigation, but the changes are more frequent in patients using aspirin and NSAIDs. Methotrexate has been widely used in autoimmune diseases, as in our case, and oncology. **Conclusion:** we must look for hematological changes that culminate in complications for these patients.

PS-452

SGP: 8231

Peritonsillar abscess in a 3-year-old child: a case report

Author(s): Thais Yuri Hashimoto, Bruno Massanori Aoki, Ana Margarida Bassoli Chirinea, Marcela Gouvea Oliveira, Juliana Saab de Faria, Adriana Rossi

Keywords: peritonsillar abscess, tonsillectomy, tonsillitis.

Introduction: Peritonsillar abscess is the most common complication of acute palatine tonsillitis and often occurs in adolescents and young adults. It presents with symptoms such as intense odynophagia, trismus, and fever. Upon examination we found unilateral peritonsillar edema and hyperemia, shifting the uvula to the contralateral side. **Objective:** To report a case of peritonsillar abscess in a 3-year-old child, which is rare in our clinical practice. **Case report:** Patient FZF, 3 years old, with a history of recurrent tonsillitis, was admitted to the hospital with peritonsillar abscess. He underwent abscess drainage in the operating room, with tonsillectomy in the same surgical procedure. The result was satisfactory, with full remission of symptoms and he was discharged one day after surgery. **Conclusion:** This is a rare case, because it occurred in a very young child, and most cases occur in adolescents and young adults.

PS-453

SGP: 8236

Foreign body in the nasopharynx: case report

Author(s): Carolina Cincurá Barreto, Fernando Pena Gaspar Sobrinho, Hélio Andrade Lessa

Keywords: adult children, foreign bodies, nasopharynx.

Introduction: nasopharynx foreign bodies are relatively rare, and may remain undetectable for long periods of time. Its diagnosis is difficult and the risk of shifting with consequent aspiration is high. Most of the cases is reported in children. We, hereby, report a case of a foreign body in a 16-year-old patient, lodged between the nose and the nasopharynx. **Case presentation:** 16-year-old black female patient came to the ER complaining of pain in the nose, worse in the left side, for 1 day. She did not have rhinorrhea, nasal obstruction, dyspnea or fever. Anterior rhinoscopy and oropharyngoscopy did not show any changes, except for a moderate hypertrophy of the inferior nasal conchae. We found a round, radiopaque foreign body located between the nose and the nasopharynx in the side-view X-ray. The foreign body was a coin and was removed through the left nasal cavity, with the patient under sedation. **Conclusion:** nasopharyngeal foreign bodies are rare, and mostly found in children, and they can be asymptomatic. When suspected, proper radiological assessment must be carried out, and whenever possible one must submit the patient to endoscopy. These foreign bodies may be swallowed or aspirated, and they are associated with high morbidity rates.

PS-454

SGP: 8246

Stridor in neonates

Author(s): Paulo Tinoco, José Carlos Oliveira Pereira, Flavia Rodrigues Ferreira, Vânia Lúcia Carrara, Lara Bonani de Almeida Brito, Marina Bandoli de Oliveira Tinoco, Saulo Bandoli de Oliveira Tinoco

Keywords: congenital abnormalities, larynx, neonatology.

Airway abnormalities often present with stridor. The main cause in neonates and infants are congenital defects of the larynx, especially laryngomalacia and subglottic stenosis. Stridor is a symptom, not a diagnosis, being the most predominant characteristic of airway obstruction in children, caused by turbulent air flow during air passage through a partially blocked way. But there are other changes that cause airway stridor, hence the need for endoscopy in the initial evaluation.

PS-455

SGP: 8252

Paraneoplastic Pemphigus: initial manifestation of lung cancer

Author(s): Rui Carlos Ortega Filho, Márcio Cavalcante Salmito, Patrícia Maria Sens Marques, Antonini de Oliveira e Sousa, Lorenzo Bonino do Nascimento, Guilherme Webster

Keywords: deglutition disorders, dysphonia, pemphigus, skin diseases, vesiculobullous.

Introduction: paraneoplastic pemphigus (PNP) is an autoimmune disease associated with a neoplasia; with the differential diagnosis of pemphigus vulgaris, erythema multiforme, Stevens-Johnson syndrome and lichen planus. **Case Report:** Female 68 years old with epistaxis, and painful lesions in the mouth for 30 days, associated with dysphagia and unmeasured weight loss. She reported no skin lesions. She was a smoker and had hypertension, diabetes and dyslipidemia. On examination she had ulcerated and blister lesions on the palate, oral mucosa and lower lip in addition to ulceration on the anterior nasal septum. She also had ulcerated lesions with fibrin in the larynx, besides bilateral chondritis, visualized on telaryngoscopy. Prednisone was then initiated with partial regression of the lesions. On investigation, she presented mediastinal and supraclavicular adenopathy. Biopsy of a neck lymph node showed non-small-cell adenocarcinoma of the lung. She developed then severe respiratory failure and she died on the fourth month after onset of symptoms. **Discussion:** The typical clinical findings of PNP include intractable stomatitis (more typical) and polymorphic skin lesions. Mucosal involvement is almost always present. Clinically bullous lesions may be similar. This report discussed a typical paraneoplastic pemphigus case.

PS-456

SGP: 8275

Correlation between Modified Mallampati Index with age progression in patients from the otorhinolaryngology clinic.

Author(s): Joely Toledo, Luis Gustavo Padilha, Camila Neves Guimarães, Larissa da Cunha Santos, Marcos Marques Rodrigues

Keywords: age distribution, cleft palate, pharynx.

Introduction: The modified Mallampati score (MMS) is carried out with the patient keeping his tongue in his mouth. Today, it is related to apnea-hypopnea in patients with sleep disorders as a means to predict the severity of Obstructive Sleep Apnea Syndrome (OSAS). The direct correlation between age and the MMS is still uncertain in the current medical literature. **Objectives:** To study the relationship between the Mallampati score and age. **Materials and methods:** We studied ENT patients of both genders. We inspected their oral cavities and divided them into two groups: Group I - total population. Group II - we excluded the obese patients. **Results:** We evaluated 320 of these patients, 266 were selected for statistical analysis and formed Group I. In Group II we excluded the obese patients (BMI \geq 30 kg/m²) made up of 178 patients. The correlation between age and the MMS was positive in both groups ($p < 0.001$). **Discussion:** The higher the MMS score, the lower the airway volume, being correlated with OSA. The evidence that OSAS evolves with increasing age are strong. MMS evolves with age regardless of the patient's BMI. Thus one of the reasons for OSAS development with age is the successive MMS increase with aging in the general population. **Conclusion:** We concluded that MMS increases with age. This may explain the increased severity of OSAS with age progression.

PS-457

SGP: 8276

Langerhans Cell Histiocytosis : a rare tumor in children

Author(s): Lucas de Azeredo Zambon, Bruno Bernardo Duarte, Ana Carolina Parsekian Arenas, Felipe de Almeida Mendes, Silvio Antonio Monteiro Marone

Keywords: ear canal, histiocytosis, immunohistochemistry, langerhans-cell, skin.

Introduction: Langerhans cell histiocytosis (LCH) is a rare disease that belongs to the group of histiocytic disorders. There are discussions in the literature concerning etiology, but still without a clear understanding. There can be asymptomatic to severe manifestations which can be fatal. Diagnosis requires immunohistochemistry. Proper treatment has not been established yet. **Objective:** to report on a case of LCH in a patient with signs of left-side external otitis. Here we will discuss the definition, epidemiology, clinical manifestations, histopathological features and treatment. **Case report:** RLC, 4 years old, caucasian female with complaints of a lesion in the left external auditory canal for 3 months associated with otalgia, recurrent otorrhea and ear pruritus. She had no fever, sweats, weight loss and dyspnea. The patient appeared to be in good general condition, active, well-nourished, eupneic and with an appropriate growth for her age. No changes in the nose, right ear, mouth, throat and larynx. A cystic lesion was found in her left ear canal. We ordered a preoperative CBC and clotting tests, with later excisional biopsy carried out in the operating room under sedation. The pathology exam together with immunohistochemistry revealed an HCL. **Conclusion:** HCL is a rare disease, therefore it hardly gets into the list of differential diagnoses in the clinical investigation of a suspected case. Knowing that, although rare, the incidence of this pathology involving the head and neck is high. We highlight the importance of this disease, in order to increase the degree of suspicion towards it, because early treatment greatly reduces morbidity and mortality.

PS-458

SGP: 8281

Aesthetic outcomes in rhinoplasty: Vertical Dome Division in nasal tip surgery

Author(s): Michelle Lavinsky-Wolff, Luísi Rabaioli, Carolina Rocha Barone, Humberto Lopes Camargo Jr, Márcio Severo Garcia, Carisi Anne Polanczyck, José Eduardo L. Dolci

Keywords: esthetics, nasal cartilages, nose, rhinoplasty.

Introduction: Nasal tip surgery is a complex part rhinoplasty. The Vertical Dome Division (VDD) can improve the definition, projection, rotation and asymmetries of the nasal tip. Patient satisfaction with the results of surgery has not been assessed in a standardized manner in the literature. **Objective:** To evaluate in a standardized manner the aesthetic results of surgical treatment of the nasal tip with VDD. **Methods:** We included in the study patients complaining of nasal obstruction and the appearance of their nasal tip, and all underwent rhinoplasty with VDD. Scale to assess outcomes in rhinoplasty - assessing quality of life domains, with results from 0 to 100 - was used preoperatively and 1, 2 and 3 months after surgery. We also used a visual analog scale to assess satisfaction with the nasal appearance before surgery and at 1, 2 and 3 months after surgery. **Results:** Twenty patients were included in the study, 60% were women. The mean age was 28.2 years (± 11.4). The results of our evaluation scale in rhinoplasty were 35.62(± 18.41), 74.40(± 12.85), 73.48(± 20.17) and 79.76(± 14.11) respectively in the preoperative, 1, 2 and 3 months postoperatively. The 100 mm visual analog scale showed significant improvement in patient satisfaction with the nasal tip shape from 25mm(± 22.8) preoperatively to 81.7mm(± 27.8); 90.5mm(± 12.7) and 90.1mm(± 13.3) respectively at 1, 2 and 3 months postoperatively. **Conclusion:** The DVD technique for the treatment of nasal tip was associated with improvements in the satisfaction scores with the external appearance of their nose.

PS-460

SGP: 8291

Dysphagia- epidemiological aspects and videofluoroscopy findings of 126 patients from a university hospital

Author(s): Ana Carolina Parsekian Arenas, Felipe Almeida Mendes, Pedro Fionotti Júnior, João Paulo Resende Felício, Hednaldo José Bastos, Silvio Antonio Monteiro Marone

Keywords: deglutition disorders, disability evaluation, epidemiology.

Introduction: Swallowing disorders are common complaints in otolaryngology, taking on increasing importance. For further evaluation of dysphagia we stress videofluoroscopy and swallowing videoendoscopy (SVE). **Objective:** Evaluation of patients complaining of dysphagia by SVE, showing the main findings and their applicability. **Patients and methods:** We used SVE to evaluate 126 patients complaining of dysphagia, aged 23 days to 87 years. We

studied the following events: sensitivity of the larynx and pharynx, salivary stasis in the valleculae, pyriform sinus and supraglottic area, early leak of dye into the larynx and / or pyriform recesses, laryngeal penetration, tracheal aspiration and the presence of residue after the third swallowing. **Results:** During SVE, the main findings in descending order were: the presence of residue after the third swallowing (46.03%), early leak (42.06%), salivary stasis (38.88%), decreased pharyngolaryngeal sensitivity (28.57%), liquid dye penetration (27.77%), aspiration of saliva (15.07%), penetration of a pasty dye (9.52%), aspiration of liquid dye (9.52%) and aspiration of pasty dye (4.76%). **Conclusion:** SVE is a practical and safe method for evaluating dysphagia. It is quite feasible even in patients with neurological impairments.

PS-461

SGP: 8299

Bullous systemic lupus erythematosus: case report

Author(s): Ivan Dieb Mizziara, Ali Mahmoud, Azis Arruda Chagury, Ricardo Dourado Alves

Keywords: lupus erythematosus, mucositis, stomatitis, systemic.

Introduction: Bullous Systemic Lupus Erythematosus (BSLE) is an autoantibody-mediated disease with subepidermal blisters. It is a rare form of presentation of SLE, and it occurs in less than 5% of lupus cases. **Case Report:** FRS, female, 27 years, reported the sudden appearance of rapid growth painful bullous lesions in the left nasal wing and left buccal mucosa. She went to the Dermatology ward 15 days after onset and hospitalized with suspected bullous disease. She was started on intravenous steroids and antibiotics, without signs of improvement. Her lesions extended to the trunk, axillae and vulva; the blisters ruptured and a hyperemic scar remained. Incisional biopsy was performed in her left buccal mucosa lesion and the pathology report said it was mucositis with extensive erosion and the presence of predominantly neutrophilic infiltrate with degeneration of basal cells and apoptotic keratinocytes. In direct immunofluorescence testing of the skin, we found anti-IgA, anti-IgM and anti-IgG with continuous linear fluorescence at the dermal side of the cleavage. Indirect skin immunofluorescence showed negative conjugated anti-IgA, anti-IgM and pemphigus, and the tandem anti-IgG fluorescence in the nucleus of keratinocytes, consistent with a diagnosis of bullous lupus erythematosus. **Discussion:** BSLE is an acquired autoimmune bullous disease caused by autoantibodies against type VII collagen or other components of the junctional zone, epidermis and dermis. It must be differentiated from the secondary bubbles to vacuolar degeneration of the basement membrane that may occur in the acute and subacute cutaneous lupus erythematosus.

PS-462

SGP: 8302

Crouzon syndrome and adenoid hypertrophy: a case report

Author(s): Isabel Barros Albuquerque e Silva, Milena de Moura Wanderley, Davi Sandes Sobral, Aracelle Santos, Morena Morais Rezende, Renata Prado

Keywords: adenoidectomy, craniofacial dysostosis, otolaryngology.

Crouzon syndrome or craniofacial dysostosis type I is a rare disease that affects the development of the craniofacial skeleton. Although it is uncommon, it has a transmission risk of 50% when one of the parents is a carrier. We report the case of a 10 year-old-male patient with Crouzon syndrome, whose mother and three maternal uncles are also carriers of the syndrome. He was seen at the otorhinolaryngology ward of a public hospital in Salvador, with symptoms of mouth breathing, snoring, restless sleep with respiratory arrests. Physical examination showed frontal bossing, hypertelorism, exophthalmos and craniosynostosis. Nasal endoscopy showed the presence of hypertrophic lymphoid tissue occupying 95% of the lumen of the cavum. The patient was submitted to adenoidectomy and we observed, during surgery, a narrowing of the nasopharynx with curettage of a small amount of adenoid tissue. The patient was reevaluated on the fifth postoperative day and one month after surgery. His mother reported a significant improvement in clinical status. In patients with Crouzon syndrome, attention should be paid during nasal endoscopy concerning a narrower nasopharyngeal space, caused by maxillary hypoplasia, in which case there may be a false impression of hypertrophy of the adenoids, which seem larger than its regular size. Prospective studies with objective analysis of the breathing pattern should be carried out for appropriate management of patients with craniofacial malformations such as Crouzon syndrome.

PS-463

SGP: 8303

Association of bulimia and tongue actinomycosis

Author(s): Ricardo Arthur Hübner, Ana Gabriela Gonçalves Torisan, Milena Moreira Arruda, Hélder Ikuo Shibasaki, João Armando Padovani Júnior

Keywords: actinomycosis, bulimia, cervicofacial, tongue.

Actinomycosis of the tongue is unusual. Most major medical centers report one case of this condition per year. The diagnosis is extremely difficult, and it is confirmed by culture. Fine needle aspiration biopsy is the method of choice. Penicillin is the recommended treatment, and tetracycline can be used in allergic patients. This report presents the case of a patient with lingual actinomycosis and personal history of allergy to penicillin and bulimia. Actinomycosis is a challenge to the otolaryngologist, who must be attentive to the inclusion of this disease in the differential diagnosis of masses in neck and face.

PS-464

SGP: 8311

Multiple surgeries in the treatment of moderate to severe obstructive sleep apnea

Author(s): José Antonio Pinto, Luciana Ballester de Mello Godoy, Thiago Branco Sonego, Henrique Wambier, Rodrigo Kohler, Elcio Izumi Mizoguchi

Keywords: obstructive, sleep apnea, sleep apnea syndrome, treatment outcome.

Obstructive sleep apnea-hypopnea syndrome is a chronic disease characterized by repeated obstruction of air flow in the upper airway. Location of the obstructive site is essential for adequate surgical planning. **Objective:** To determine the effects of multiple surgeries in the treatment of moderate and severe obstructive sleep apnea. **Methods:** Records of 39 patients with moderate and severe obstructive sleep apnea who had undergone multiple surgeries were examined and the surgical results were assessed. **Results:** Considering that the mean AHI was 22.1 events/h before surgery and 22.3 events/h after surgery in patients with moderate obstructive sleep apnea (n=10); the mean AHI was 58.8 events/h before surgery and 18.8 events/h after surgery in patients with severe obstructive sleep apnea (n=29). Surgery was considered successful in 4 patients (40%) in the moderate group, and in 25 patients (86.2%) in the severe group. **Conclusion:** Multiple-procedure surgery appears to have better results in severe obstructive sleep apnea than in moderate cases.

PS-465

SGP: 8320

Herpetic aphthous lesions in patients with Acute Myeloid Leukemia

Author(s): Thiago Pires Brito, Alexandre Caixeta Guimarães, Guilherme Machado de Carvalho, Lutiane Scaramussa, Ana Cristina Dal Rio, Maria Elvira Correa, Icléia Siqueira Barreto, Ester M. D. Nicola

Keywords: Herpes Simplex; Oral Manifestations; Leukemia; Immunosuppression

Introduction: Viral infections in the oral cavity are frequent complications in patients with immunosuppression. The herpes simplex virus is among the most frequent causes of these infections. In immunocompromised patients its presentation may be atypical, with more extensive and painful lesions, and a slower recovery. **Case report:** Female patient, 43 years old, 32 days after the start of chemotherapy for acute myeloid leukemia, began complaining of a sore throat and painful lesions in her oral cavity. She presented multiple whitish ulcerated lesions with an erythematous halo, measuring around 0.5 cm in diameter across the mouth and the posterior wall of the oropharynx. She was treated with acyclovir with rapid improvement of symptoms and lesions. Cytological changes were found compatible with those of herpes simplex. **Discussion:** In most cases of infection with herpes simplex the presentations are self-limited but severe and atypical infections may occur in immunosuppressed individuals. Additional exams help, such as as diagnostic cytology, ELISA and direct immunofluorescence. Acyclovir is the drug of choice for the treatment, in the recommended dose of 1g/day for a minimum period of 10 days. **Conclusion:** The oral lesions of herpes

virus in immunosuppressed patients may have varied presentations and can often go unnoticed, as in mild or asymptomatic cases. However, due to the possibility of systemic spread of the infection and the occurrence of severe manifestations, one should be highly suspicious when faced with any oral lesion in an immunosuppressed patient.

PS-466

SGP: 8323

Children with adenoid hypertrophy and rhinosinusitis: effects of adenoidectomy

Author(s): Andrea Arantes Braga, Edwin Tamashiro, Ulisses P. Meneses, Fabiana C.P. Valera, Wilma T. Anselmo-Lima, Maria Inez Machado Fernandes

Keywords: clinical, gastroesophageal reflux, nasal obstruction, symptoms.

Introduction: Pediatric rhinosinusitis (RS) continues to be a prominent public health issue and many patients fail conservative medical treatment. Reports have indicated improvement in rhinosinusitis symptoms following adenoidectomy. **Objective:** To determine the efficacy of adenoidectomy in relieving rhinosinusitis symptoms in children. **Materials and methods:** 46 children with pharyngeal tonsil hypertrophy and RS, from 2 to 15 years

PS-467

SGP: 8337

Casos inusitados de síndrome da apneia obstrutiva do sono na infância

Author(s): José Antonio Pinto, Rodrigo Kohler, Elcio Izumi Mizoguchi, Henrique Wambier, Thiago Branco Sonego

Keywords: apnea, child, dystonia, laryngostenosis, larynx.

Obstructive sleep apnea syndrome is a common chronic condition of airway obstruction in children with known clinical consequences. The etiology of OSAS in children stems from a combination of obstructing structural factors and neuromotor factors. In children, tonsillar hypertrophy is responsible in most of the cases; however, in about 20% of the cases there are other causes involved. The treatment of apnea in children is adenotonsillectomy, which is the most performed procedure, but we should indicate the treatment of the underlying cause. The aim of this paper is to highlight other possible etiologies of apnea, contributing to diagnosis and appropriate treatment. We present two cases of patients with apnea of unusual origin. A case of respiratory dystonia, and other case of supraglottic stenosis as a causative factor of obstructive sleep apnea. In conclusion, we emphasize the need for the ENT to perform a detailed study on the etiology of the apnea, thus individualizing the treatment.

PS-468

SGP: 8338

Infatle myofibromatosis in premature twins

Author(s): Ana Gabriela Gonçalves Torisan, Ricardo Arthur Hübner, Claudia Pereira Maniglia, Hélder Ikuo Shibasaki, Mariana Wilberguer Furtado de Almeida

Keywords: face, infant, myofibromatosis, newborn, solitary fibrous tumors, twins.

Infantile myofibromatosis is a rare benign tumor of infancy. It may present as a solitary lesion or multiple lesions, with or without visceral involvement. Clinical manifestations usually occurs early in life. Imaging tests suggest the diagnosis, which can only be established by histopathology. The prognosis of solitary lesions is favorable, with resolution expected in the first 2 years of age (when congenital). This case reports a preterm twin male, with a solitary lesion in the face at birth. The diagnosis was established in the second month of life, after an investigation by imaging methods - ultrasound and CT scan - and later biopsy. Needle aspiration of the nodule was inconclusive, as expected for the tumor described, being then established by an incisional biopsy of the lesion. As mandated, systemic investigation was carried out in search of other lesions, as well as patient follow up. The lesion receded (partially) in the first 6 months of observation and, we found no lesion on his twin brother.

Foreign bodies in children: an ENT emergency?

Author(s): Janaina Oliveira Bentivi Pulcherio, Melyssa Fernanda Bentivi Andrade, João Melo e Sousa Bentivi, Marília Fábila Bentivi Andrade

Keywords: child, emergency medical system, emergency medicine, foreign bodies, otolaryngology.

Introduction: Children represent an important clientele of otolaryngology clinics because of foreign bodies. Infant's curiosity, plays, hygiene attempts and incidental entry are common causes. Some foreign bodies are not life-threatening but there can be severe complications related to their long stay or their displacement to airways. **Objective:** To analyze cases of children with foreign bodies seen in an emergency hospital in São Luís-MA. **Materials and Methods:** Retrospective study carried out from medical records of 105 children aged from 0 to 12 years. **Results:** Most of the cases involved nasal foreign bodies. The most common foreign bodies found were beans, grains and plastic objects. The average time between their placement and removal was 32.4 days. **Comments:** the average time of evolution in this study was longer than what has been published in studies, which increases the risks of complications. We stress the responsibility of parents and guardians concerning this problem and stress the need for better access to health care. The small number of otolaryngologists in Maranhão contributes to the dangers related to the long stay of foreign bodies and patients having to seek non-specialized care. **Conclusion:** We suggest new studies in this field. The population should recognize early on the symptoms associated to foreign bodies in order to start searching for specialized care. The health authorities of Maranhão, in turn, shall establish efficient measures for ENT emergency care.

Distonia cervical: relato de caso

Author(s): Tatiana Carneiro da Cunha Almeida, Paulo Sérgio Perazzo, Mirella Melo Metidieri, Francisco José Motta Barros de Oliveira Filho, Larissa Roberta Souza Campos, Hugo Fernandes Santos Rodrigues, Daniela Pereira Ferraz

Keywords: botulinum toxins, dystonia, laryngeal diseases, type a.

Introduction: Dystonia is the term used to describe a group of disorders characterized by involuntary muscle spasms that produce movements and abnormal postures which are often painful. (1,2). Several studies suggest a positive family history in 2-15% of patients (4). In laryngeal dystonia, the muscles involved in vocalization are compromised. The voice alteration is caused by involuntary spasms of the vocal folds, larynx and pharynx. It is often associated with dystonia of other facial muscles. (5,6,7). The ideal treatment of dystonias would be one which could eliminate its cause. There are three main types of symptomatic treatment: pharmacological treatment with botulinum toxin and surgical treatment. (5,6). **Case report:** A male patient, age 76, born and raised in Feira de Santana-BA, was admitted in our hospital in January 2011, with complaints of progressive hoarseness for six months. He denied gastrointestinal symptoms, dyspnea or dysphagia. He had neck muscle strain associated with movement of the head and facial muscles. He was submitted to direct videolaryngoscopy, which showed involuntary spasms of the vocal folds, without other changes. Through electroneuromyography, we observed some intermittent involuntary activity potentials, revealing signs matching a diagnosis of laryngeal dystonia. The patient is in clinical follow-up to undergo botulinum toxin injections. **Conclusion:** The diagnosis, classification and characterization of dystonias are difficult and complex steps that require coordination of a multidisciplinary team. The possible use of botulinum toxin significantly improved the range of available therapies with improved quality of life for the patients.

Foreign bodies in otorhinolaryngology: study of 203 cases

Author(s): Edson Junior de Melo Fernandes, Claudiney Candido Costa, Marina Neves Rebouças, Fabiano Santana Moura, Eduardo Damasceno Chaibe

Keywords: ear canal, ear diseases, foreign bodies.

Introduction: Reasons for constant consultations in ENT emergency services, foreign bodies can lead to numerous complications such as aspiration

and perforation of the tympanic membrane. **Objective:** To describe some variables related to emergency care in ENT foreign bodies. **Methods:** we analyzed 203 patients from March 2010 to March 2011, complaining of foreign bodies in their noses, ears or throats, and studied the following variables: gender, age, duration of FB stay, location, type of foreign body, instruments needed for their removal and complications. **Results:** there were 123 cases of foreign bodies in ear, 61 in the nasal cavity, and 19 cases in the oropharynx. The mean FB stay until removal was 2.86 days. Regarding gender we had 97 males and 106 females. As far as age is concerned, we had a mean age of 9.48 years and a median age of 4 years. Hooks, used in 68 cases, were the primary instruments used for the removal of foreign bodies, followed by the alligator forceps - used on 59 occasions. Regarding complications, there was a higher frequency of bleeding in 60 cases, but in 78 cases there were no complications. **Conclusion:** The prevalence of foreign bodies in otorhinolaryngology is high, and it is highly important to have a specialist for the removal, diagnosis and treatment of complications.

Prevalence of allergic rhinitis symptoms in children seen at the oral breather ward of a university hospital

Author(s): Cecília Pereira Paes, Francisco Xavier Palheta, Angélica Cristina Pezzin Palheta, Lorena Gonçalves Rodrigues, Joyce Oliveira de Lima, Samara Noronha Cunha, Theago Barros Silva

Keywords: adenoids, allergic, nasal obstruction, palatine tonsil, rhinitis, seasonal.

Introduction: oral breathing, despite being a symptom, can be characterized as a syndrome because it includes various signs and symptoms such as orofacial, postural, occlusal and behavioral changes. This condition is a result of various basic entities and may be due to mechanical factors (nasal septum deviation and adenotonsillar hypertrophy), inflammatory (allergic rhinitis), congenital malformations with craniofacial deformities and tumor lesions. Motonaga et al found the main causes of oral breathing to be allergic rhinitis and adenoid and/or tonsils hypertrophy. **Objective:** to describe the prevalence of allergic rhinitis symptoms in patients of the oral breather clinic of a university hospital. **Methods:** we carried out a retrospective study, evaluating 67 cases of children treated at the Mouth Breather center, submitted to descriptive statistical analysis. A retrospective study. **Results:** we analyzed medical records of 67 children between 2 and 14 years, of which 46 (68.7%) complained of allergic rhinitis symptoms. **Conclusion:** allergic rhinitis symptoms are present in most of the pediatric population seen in ENT clinics. In this study, we observed that 68.7% of the children treated had symptoms of allergic rhinitis.

The effect of adenotonsillectomy in the production of IGF-1 in children

Author(s): Gabriela Robaskewicz Pascoto, Cassiana Burtet Abreu, Tiago Vasconcelos Souza, Raimar Weber, Shirley Shizue Nagata Pignatari, Aldo Cassol Stamm

Keywords: adenoids, growth and development, growth hormone, palatine tonsil, sleep apnea syndromes.

Airway obstruction caused by adenotonsillar hypertrophy is the main cause of snoring and sleep apnea in children, and are often associated to several other signs and symptoms, including disorders in weight and growth development. Currently, it is the most important indication for adenotonsillectomy. **Objective:** to evaluate the effect of adenotonsillectomy in the production of IGF-1 (insulin-like growth factor-1) in children with adenotonsillar hypertrophy. **Materials and Methods:** twenty-six children of both gender with adenotonsillar hypertrophy and a formal indication for adenotonsillectomy (study group) and 21 control children (with indication for surgery for other reasons, e.g. posttomy) were submitted to evaluation of peripheral blood IGF-1. The samples were taken immediately in the pre-op, and 30 days after surgery. The laboratory analysis was performed in the clinical laboratory of the HPEV through a radioimmunoassay technique. **Results:** The preoperative levels of IGF-1 showed values within the normal range for age in both groups. Two children in the study group had values below normal for their age. The comparison of pre and postoperative levels in children undergoing tonsillectomy showed a statistically significant increase ($p < 0.01$) by the Student-t test for paired samples. The two children with

preoperative values below normal for their age recovered normal levels of IGF-1 after surgery. **Conclusion:** The data from our study suggests that adenotonsillar hypertrophy, resulting in snoring and sleep apnea can affect negatively the production of circulating IGF-1, probably related to growth development disorders, showing that adenotonsillectomy contributes to enhance and restore IGF-1 values.

PS-474

SGP: 8392

Profile and risk factors for infant tracheostomy in a university hospital

Author(s): Camila Izaac Alfredo, Mariana Wilberger Furtado de Almeida, Danyla Domingos de Souza, Claudia Pereira Maniglia, Rafael De Paula e Silva Felici de Souza

Keywords: child, postoperative complications, risk factors, tracheostomy.

Introduction: Tracheostomy in children, is still a procedure carrying morbidity, and it has an impact on the lives of patients and their families. The indications for tracheostomy vary with the patient's clinical condition and in general, children who undergo this procedure have some severe comorbidity, some prenatal or neonatal complication and have to remain under artificial ventilation. **Objective:** To evaluate the epidemiological profile of children who underwent tracheotomy and its complications and follow-up, with special attention to the decannulation rates in a Tertiary University Hospital. **Methodology:** A retrospective study, analyzing medical records of 44 children who underwent tracheostomy from January 2003 to December of 2009. **Results:** The mean age was 1.6 years, with a predominance of males. 45% were born at term; 48% at preterm; and 7% at post-term. The birth weight was appropriate for 47.7% and 52.3% of the cases the patients were small for their gestational age. Some underlying disease was diagnosed in 68.2%, with a higher incidence of heart disease in 18.18%. The most frequent indication of tracheotomy was prolonged intubation, in 77.2% of cases. **Discussion:** The indication for tracheotomy was in most cases due to prolonged intubation, consistent with findings from 24 to 75% in other studies. The occurrence of late complications was 9%, lower than what was seen in other studies, which state 19% to 44%. **Conclusion:** Through the data found in this study, we can conclude that among the factors which are risk predictors for tracheotomy, we include prematurity, low weight for gestational age and baseline diseases.

PS-475

SGP: 8398

The value of antibiotic therapy and postoperative complications of tonsillectomy

Author(s): Marina de Sá Pittondo, George Boraks, Leonardo Barreto, Alice Andrade Takeuti, Renata Lopes Mori

Keywords: antibiotic prophylaxis, postoperative complications, tonsillectomy.

Tonsillectomy is one of the most commonly performed surgeries in pediatric and adult patients. Postoperative complications of tonsillectomy are uncommon, and until today, no clinical study has shown the benefits of using antibiotics to reduce postoperative complications. Part of this discrepancy is due to the lack of properly formatted clinical studies. **Objective:** Discuss the use of antibiotics in the postoperative of adenotonsillectomy through a critical review of the literature and report the experience of a clinics in these regards. **Patients and methods:** We selected all patients who underwent adenotonsillectomy in 2009 and 2010, excluding patients with any other associated procedure. In 2009, we used only symptomatic drugs in the postoperative period, while in 2010 the patients received symptomatic drugs and amoxicillin for 7 days after the surgery. **Discussion:** In 2009, one hundred and four patients underwent adenotonsillectomy without antibiotics in the post-op, and the average age was 7.72 years. Only one child had hemorrhage as a complication during the first 24 hours of post-op, and this bleeding happened with hemodynamic instability. The patient underwent surgical revision with good clinical evolution afterwards. In 2010, one hundred sixty-nine patients received antibiotics, the average age was 8.77 years. No patient had postoperative complications. **Conclusion:** Our results are consistent with the literature data, stating that there is no relationship between postoperative complications and the use of antibiotics in the post-op.

PS-476

SGP: 8399

Abriksoff tumor in the soft palate

Author(s): Viviane Nunes da Costa, Sérgio Bittencourt, Fernanda Madeiro Leite Viana, Paulo Henrique Bicalho de Barcelos, Sérgio Luiz Bittencourt

Keywords: granular cell tumor, mouth neoplasms, palate, soft.

Introduction: Granular cell tumor is an uncommon benign neoplasm, which can become malignant in 2% of the cases. It may affect any part of the body, but most commonly the head and neck. There is a predilection for blacks, between 40 and 50 years of age, and women are more affected than men. Diagnosis is histological, when one sees numerous dense cytoplasmic lysosomes in different fragmentation stages, developing a granular aspect. Treatment is essentially surgical, and recurrence is rare. **Case report:** A 50-year-old female patient, from Pernambuco, referred to the Nossa Senhora de Lourdes hospital complaining of a mouth lesion for 1 year. We found a whitish polypoid lesion, of about 0.5 X 0.3 cm in the peri-uvular region, followed by excisional biopsy which proved it to be a granular cell tumor. **Discussion:** The granular cells tumor is a neoplasia which can affect any part of the body, in this case it is in the soft palate. its characteristics are similar to those from a papilloma, squamous cell carcinoma, fibroma, lipoma and neuromas, and to make this differentiation is essential in order to decide on a course of action. We decided for an excisional biopsy and histology of the lesion, which revealed round, polygonal, cells, with eosinophilic granular cytoplasm, thus confirming the diagnosis of granular cell tumor. Surgical treatment is usually curative. **Conclusion:** although rare, the granular cells tumor is a possibility in oral cavity lesions. The symptoms and the clinical exam are not enough for the diagnosis, it is paramount to do a histology exam in order to have a proper treatment planning and prognostic.

PS-477

SGP: 8438

Obstructive sleep apnea-hypopnea syndrome, allergic rhinitis and immunotherapy: case report and review

Author(s): Eduardo Batistella, Daniel Rispoli, Paulo Camargo, Sergio Maniglia, Thanara Pruner da Silva, Gustavo Sela, Daniela Dranka, Gustavo Bernardi

Keywords: immunotherapy, polysomnography, rhinitis, sleep apnea syndromes.

Objective: to report a case of a patient who had Obstructive sleep apnea/hypopnea syndrome (OSAHS), with polysomnographic changes, associated with allergic rhinitis and treated with immunotherapy, emphasizing the clinical features and evolution of the case. **Method:** literature review and case report. **Results/Conclusions:** We described the case of a patient with OSAHS and Allergic rhinitis, treated with immunotherapy, and who had improvements in the polysomnographic parameters and obstructive symptoms.

PS-478

SGP: 8440

Clinical treatment in Pierre Robin sequence

Author(s): Douglas Jósimo Silva Ribeiro, Glauber Tércio Almeida, Claudia Emi Hashimoto, Lucas Uliani Lima, Licia Sayuri Tanaka, Álvaro Fagotti Filho

Keywords: and neonatal diseases and abnormalities, cleft palate, congenital, hereditary, pierre robin syndrome, retrognathism.

GVMC, female, born in another maternity, in the year of 2010, with an Apgar Score of 9/10, weighing 2,670g, and with Pierre Robin Sequence (micrognathia, cleft palate and glossoptosis). The patient showed high respiratory distress, not responding to position change, and then, a lip-tongue adhesion (glossopexy) was done, still with no improvement of her respiratory failure. Because of this, she was intubated, and only extubated after 10 days of life. With 24 days of age, the adhesion button was removed, and the patient was placed on CPAP. However, she presented again with respiratory failure; she was reintubated and transferred to the ICU of our hospital. As she arrived in our service, a nasopharyngeal tube was inserted (number 14), and then the endotracheal tube was removed. The patient remained stable with no worsening in her respiratory pattern. She was discharged from the ICU within 24 hours and discharged from the hospital within 48 hours, with instructions for cleaning the tube twice a day, and attempt oral diet. She remained using the nasopharyngeal tube at home, which was removed after two months of age. She has gained weight and grown appropriately for her age.

Sialolithiasis in a child - case report

Author(s): Marlene Corrêa Pinto, Antonio Celso Nunes Nassif Filho, Diego Augusto de Brito Malucelli, Denise Braga Ribas, Eduardo Lopes El Sarraf, Anna Cristina Silvestri, Yara Alves de Moraes do Amaral, Eliza Mendes de Araujo

Keywords: child, salivary gland calculi, submandibular gland..

Introduction: Sialolithiasis is a salivary gland disease, characterized by the presence of sialoliths in the glandular ducts or parenchyma. It is more frequent in adult men, and no ethnical predilection. It is unusual in children; however, when it happens in this age range, symptoms last for less time and the stones are smaller. The diagnosis is clinical and image tests can be needed sometimes. Treatment can be conservative or surgical (for larger or intraparenchymal stones). **Case report:** G.V.P., an 11-year-old boy, complained of increasing pain in the jaw's right angle when feeding, interspersed with asymptomatic periods. He did not have fever or weight loss. We ordered salivary glands USG and serologies. USG revealed right submandibular sialolith and sialadenitis. A neck CT excluded lymphangioma. On physical exam a 0.5 cm mass was palpable, painful, mobile and loose. We treated the sialadenitis with amoxicillin+clavulanic acid, and ordered preoperative tests. Nowadays, he's awaiting surgery. **Discussion:** Sialoliths are more common in the submandibular glands, they are unilateral, and cause glandular swelling upon meals and local pain. Ellies and Laskawi said it's rare in children (youngest child affected: 2-years-old). To elucidate the differential diagnosis, imaging and serologies are needed. **Conclusion:** Sialolithiasis is a rare disease, especially in children. It should be thought of when one is facing a sudden volume increase on salivary gland's topography and considered as a differential diagnosis of pediatric cancer and infectious diseases.

Foreign bodies in ear and nose: a study in a tertiary hospital

Author(s): Daniele de Lima Soares, Cícero Matsuyama, Eduardo Spirandeli, Janaina Medina da Rocha Berto, Marcela Gouvêa Oliveira, Caio Meira de Brito Oliveira

Keywords: ear, incidence, nose.

Introduction: Foreign bodies are a frequent occurrence in emergency ENT services. **Objectives:** To evaluate 120 cases of foreign bodies treated in a tertiary hospital, analyzing parameters such as: gender, age, location, nature, symptoms, removal and complications. **Methods and materials:** retrospective study of 120 patients diagnosed with foreign bodies in otorhinolaryngology, from April 2010 to February 2011. **Results:** In the 120 cases of foreign bodies, 32 were found in the nasal cavity and 88 in the ears. From the total, 62 patients were males (51.66%), and 58 were females (48.33%). Nasal foreign bodies affect mainly the age group between 0-2 years of age (50%), while foreign bodies in the ear affected mainly the age group between 5-8 years of age (26.1%). Most patients introduced foam in their nasal cavities (28.12%), while jewelry was more frequent in the ear (15.90%). The most observed nasal complication was sinusitis (18.75%), and the most common ear problem was acute external otitis (12.5%). **Conclusion:** The study has found that foreign bodies in the ear are the most frequent type, prevailing in males and in the age group between 0-4 years of age. Most situations that lead to accidents with foreign bodies may be avoided. The population must be educated in order to look for otorhinolaryngologists in case of foreign bodies.

Submandibular gland sialolithiasis: a case report

Author(s): José Felipe Bigolin Filho, Camila Andrade da Rocha, Raimundo Célio da Rocha, Miguel Eduardo Guimarães Macedo, Luiz Augusto Miranda Sanglard, Ludimila de Oliveira Cardoso, Amadeu Luis Alcantara Ribeiro, Monik Assis Espindula, Rafael Fernandes Goulart dos Santos, Ingrid Lopes Soares

Keywords: salivary gland calculi, submandibular gland, submandibular gland diseases.

Introduction: The salivary glands can be schematically divided into major and minor salivary glands, and further divided into parotid glands, submandibular and sublingual; and the minor are scattered throughout the oral

mucosae. **Case report:** AN, 58 years old, white male, came to us reporting pain in the left submandibular region, with facial swelling and drooling in 1995. The patient returned in December 2010 due to symptom recurrence, and at this point he was prescribed an anti-inflammatory agent (ibuprofen), with partial symptoms relief. We ordered an ultrasound, which showed a hypoechoic enlarged left submandibular gland, showing a dilated duct and a lymph node, measuring 1.2 cm; and we also ordered a panoramic radiograph showing normal bony structures and calcification in the left neck region. Surgical excision of the affected gland was proposed, but the patient preferred clinical treatment and monitoring. **Discussion:** Sialoliths is one of the most common disorder found in the salivary glands, which occur frequently in submandibular glands (80% to 90%), while 5% to 20% are localized in the parotid glands. It is associated with swelling and pain, and in some cases it can result in infection of the affected gland. The gland volume may increase during meals, when we have the highest secretion of saliva. Occlusal radiographs are essential in order to view radiopaque stones. The combination of radiopaque and radiolucent stones is rare. **Conclusion:** There are several methods available for diagnosis of sialolithiasis the one with the best cost-benefit ratio and most widespread is the regular X-ray. In the present paper we reported a case in which the diagnosis was made based on the X-ray after an inconclusive echography.

Uvulopalatopharyngoplasty: postoperative complications using modified the Fairbanks Technique

Author(s): Henrique Hiroshi Miyazawa, Juliana Tichauer Vieira, Marco Antônio Thomas Caliman, Diogo Carvalho Pasin, Denilson Storck Fomin

Keywords: postoperative complications, postoperative hemorrhage, sleep apnea syndromes.

Sleep Breathing Disorders are highly prevalent worldwide, becoming a public health problem, with clinical, economic and social implications. The treatment of OSA and snoring can be clinical and/or surgical and is associated with the obstruction of the upper airway. Uvulopalatopharyngoplasty described by Fairbanks is one of the most used techniques, which is based on resection of the tonsils and soft palate in a block. **Objective:** The aim of this study was to evaluate the intra and postoperative complications from Fairbanks' modified technique. **Methods:** We selected 14 patients from the Snoring and Apnea ward of an ENT service at a University Hospital. Inclusion criteria for this study were: mild to moderate OSAS diagnosed by polysomnography, Mallampati score I to II, tonsillar classification II to IV, BMI < 35, neck circumference < 35 cm, Fujita classification I and Freedman's I and II. All patients underwent nasal endoscopic examination with Muller's maneuver. Uvulopalatopharyngoplasty was performed using the Fairbanks' modified technique. These patients were evaluated intraoperatively as to the ease of visualizing the surgical area and technique performance; and post surgical protocols 7 and 30 days after the procedure. **Results:** In 14 patients undergoing the procedure, there were no immediate complications and only 2 patients reported later complications, with spontaneous improvement. **Conclusion:** We conclude that uvulopalatopharyngoplasty with the Fairbanks' modified technique for the treatment of mild and moderate OSAS is an efficient technique and with low early and late complication rates.

Non-Hodgkin lymphoma of the mouth in a child-a case report

Author(s): Pauliana Lamounier, Lilian Meissner Correia, Fernando Jorge dos Santos Barros, Luciana Novellino Pereira, Denise da Silva Calvet, Jamille Lima Wanderley Ribeiro

Keywords: child, mouth, mouth neoplasms.

Introduction: Except for the benign cervical adenopathy, congenital neck masses are the most common causes of cervical tumor in children. Among malignant tumors, lymphomas take third place in prevalence, Hodgkin's disease account for 31% of the cases and non-Hodgkin's for 26%. **Objective:** to report a case of lymphoma of the oral cavity, an uncommon occurrence in childhood. **Case report:** M.N.S, 12 years old had a fast growth left neck mass, painless, associated with trismus, fatigue and loss of 8kg of body weight in 1 month. Mouth-Trismus, mucosal lesion, located in the upper arch, alveolar ridge, the ipsilateral neck mass, similar to gingival hyperplasia. The pathology report stated it was a non-Hodgkin lymphoma of diffuse large B cells. **Discussion:** Non-Hodgkin's lymphoma incidence has increased

throughout life, unlike Hodgkin's disease. In children, it is usually manifested as an extranodal disease that progresses rapidly, primarily involving the Waldeyer's ring. **Conclusion:** physicians must suspect of masses early in the neonatal period, especially masses with rapid and progressive growth and should pay attention to the ENT physical examination in search of the possibility of malignancy.

PS-484

SGP: 8471

Crouzon syndrome: case report

Author(s): Karine Lima Lustosa, Fernando José Carvalho Silveira, Ailton César Pereira de Sá Filho, Aline Veras Carneiro, Anderson da Silva Abreu, Carlos Henrique Ferreira Cruz, Danilo Madureira de Oliveira, Filipe Ferraz de Souza, Horbert Soares Mendonça, Jaylla Juvianne Duarte Melo, João Guilherme Sobreira Machado Sales, Karen Lima Oliveira, Lara Barreto Machado, Maria Lia Ponte Furlani, Maria Richelle Rifuno Cecílio, Mariana Marques Albuquerque Teixeira, Mayara Coelho de Castro e Silva

Keywords: craniofacial abnormalities, craniofacial dysostosis, genetics.

Introduction: Crouzon syndrome (CS) is a rare primary congenital disorder, and in half of the cases it is a Mendelian autosomal dominant inheritance, which occurs by a premature closure of the cranium sutures. **Objective:** To describe a rare case of CS in the literature. **Case report:** Female, 4 years old, born and raised in Juazeiro-BA sought medical attention a month ago with respiratory problems. The mother reports that when the child was 1 month old, four years ago, she had some episodes of respiratory distress, tiredness, nonproductive cough and snoring, and that was when she was taken to the hospital for investigation. Examination: cranial, high bregmatic suture, normally positioned implantation of hair and ears; eyes: presence of a large goiter exophthalmus and hypertelorism bilaterally, without further changes in other systems. We carried out an ocular ultrasonography and multi-slice CT scan of the skull, showing no change. She was referred to further investigation of the recurrent upper respiratory infections, we suspected of CS. She was then sent to a geneticist, who confirmed the diagnosis. At the moment she has no complaints and is being followed up by a multidisciplinary team. **Discussion:** CS is characterized by the triad of skull deformities, facial abnormalities and exophthalmos. It's characterized by an autosomal dominant disorder, as a result of a mutation in the gene responsible for encoding fibroblast growth factor type 2 (FGFR-2) receptors. In this case report, we noted the classic triad of SC and did not propose surgery, at the moment she is growing and developing properly and she is being monitored regularly by a multidisciplinary team. **Conclusion:** it is important to perform the differential diagnosis with other craniosynostoses. A SC differs from other craniosynostoses for its association with facial malformations.

PS-485

SGP: 8472

Analysis of complaints related to adenotonsillar hypertrophy in the pre and postoperative of adenotonsillectomy

Author(s): Viviane Feller Martha, Juliana Johnson Ferri, Aline Silveira Martha, Natália Correa de Correa, Letícia de Salles Valiatti

Keywords: adenoids, hypertrophy, palatine tonsil, tonsillectomy.

Introduction: Difficulty breathing, mouth breathing and snoring are common complaints in the ENT office, caused by an excess of lymphoid tissue in the Waldeyer's ring. A frequent cause of upper airway obstruction in children are tonsils hypertrophy. Complications caused by adenotonsillar hypertrophy (ATH) are: mouth breathing, cranial-facial growth disorders, obstructive sleep apnea, snoring. Snoring is the great motivator of the search for a specialist; it is the most disturbing complaint by parents. In this study, we analyzed the classification of symptoms associated with ATH vis-a-vis the Obstructive Sleep Apnea Protocol-18 (OSA - 18). We compared the total score in the pre and postoperative of adenotonsillectomy, aiming to assess the improvement in the quality of life of these patients. To compare the symptoms associated with ATH in the pre and postoperative periods of adenotonsillectomy, using the OSA-18 questionnaire. **Methods:** retrospective. The study included patients who completed the questionnaire before and after the surgery, which contained questions regarding obstructive complaints. Other parameters were assessed using the protocol. **Results:** We analyzed the OSA-18 questionnaires from 15 children (1-12 years) before and after adenotonsillectomy. All the patients in the study had snoring and oral breathing. 93% of the patients had apnea. After surgical treatment, 100%

of patients had resolution of snoring and returned to a normal pattern of nasal breathing. The mean score of patients was 90.76 points preoperatively and postoperatively it came down to 34.33 points. Mean variation of 66.2 points. **Conclusion:** Adenotonsillectomy significantly reduced patients' complaints, showing improved quality of life for those patients with respiratory obstruction after surgery for ATH.

PS-486

SGP: 8474

Relationship between snoring, apnea, hypertension and risk factors

Author(s): Fernando Arruda Ramos, Renato Ricci Kauffmann, Paula Fortuci Resende Botelho, Monique Fardo, Mateus Cruz Fontanela

Keywords: hypertension, obesity, obstructive, polysomnography, sleep apnea.

Introduction: The obstructive sleep hypopnea-apnea syndrome (OSHAS) is considered a public health problem and the biggest current concern are the co-morbidities, and hypertension is an important example. The main risk factors for this disease are obesity, male gender and aging. **Objective:** This study aims to associate OSHAS with hypertension and its risk factors as obesity, age and gender. **Methods:** We analyzed 51 snorers, who underwent polysomnography, with an average age of 50.6 years, 56.8% were males. **Results:** Of the 51 patients interviewed, 44 had mild, moderate or severe apnea. Among the patients with sleep apnea, 63% had 51 years of age; 59% were males and 41% females. Obesity was present in 35% of the cases. Regarding co-morbidity, 59% were hypertensive, 10% of these were snorers only and 90% were apneic. Hypertensive patients with OSHAS showed mild obstructive sleep apnea in 43.3% of cases. **Conclusion:** The study showed that male gender, older age and obesity are risk factors for the development of OSA, as the literature suggests. Furthermore, systemic arterial hypertension is directly related to OSA, they have a strong relationship with mild obstructive sleep apnea.

PS-487

SGP: 8478

Analysis of the biological and physical profile of patients submitted to polysomnography.

Author(s): Diogo Carvalho Pasin, Marco Antônio Thomas Caliman, Erika Mucicchio Cabernite, Juliana Tichauer Vieira, Denilson Storck Fomin

Keywords: apnea, obesity, polysomnography, sleep apnea syndromes.

The obstructive sleep apnea syndrome is defined as a group of signs and symptoms related to snoring and sleep apnea/hypopnea. Nowadays, 24% of Brazilian males, as well as 9% of women suffer with this problem, which brings a huge responsibility to those developing treatment and making the correct diagnosis. **Goals:** to establish the biological and physical profile of apnea patients by using clinical parameters mainly. **Method:** clinical and polysomnography evaluation of patients from a clinic in Southern São Paulo, using the body mass index, neck circumference, Mallampati index, nasopharyngoscopy with Mueller's maneuver and the Hypopnea-Apnea Index. **Results:** All the 30 patients, from the non-apneic to the worst cases, had clinical exams matching their polysomnography results, and the most important data was the neck circumference and body mass index. **Final considerations:** Although very important to guide diagnosis and tell which patients deserve a faster evaluation, useful considering the cost and the long time waiting to suffer the exam, clinical evaluation must always be followed by the gold standard - the polysomnogram.

PS-488

SGP: 8520

Incidence of atopy and adenotonsillar hypertrophy in mouth breathers

Author(s): Emanuel Capistrano Costa Junior, Henrique Augusto Cantareira Sabino, Carolina Sponchiado Miura, Carolina Brotto de Azevedo, Fabiana Cardoso Pereira Valera, Ullissis Pádua de Menezes, Wilma Terezinha Anselmo Lima

Keywords: adenoids, mouth breathing, palatine tonsil.

Introduction: The relationship between adenotonsillar hypertrophy and atopy with the occurrence of mouth breathing children has been widely discussed without coming to a definitive conclusion on the matter. This

study aims at discussing the relationship of atopy with hypertrophy of the adenoids and tonsils in mouth breathing patients. **Methodology:** This was a retrospective study, reviewing the medical charts of mouth breathing patients at the university hospital from 2008 to 2010. We included patients with clinical oral breathing. We excluded patients who had genetic syndromes, and those who did not present the following data: immediate skin tests for aeroallergens, nasal endoscopic examination and otorhinolaryngological examination. **Results:** Of the 356 patients selected, 37% were positive on allergy tests, and 94% were positive for mites. Of these, 47% had adenoid hypertrophy and 46% tonsil hypertrophy. There was no direct correlation between tonsil size and atopy, suggesting that other factors are also important in causing chronic inflammation in the non-atopic population, not yet discovered. **Conclusion:** The high prevalence of atopy and adenotonsillar hypertrophy found in mouth breathers serves to highlight the importance of a complete ENT and allergic evaluation in these patients.

PS-489

SGP: 8528

Children with tracheotomies: who are they and what is their outcome?

Author(s): Rebecca Maunsell, Laiza Mohana, Agricio Nubiato Crespo

Keywords: intratracheal, intubation, laryngitis, tracheotomy.

Aim: To evaluate the indications and outcomes of tracheotomies performed in children in the intensive care unit (ICU). **Materials and methods:** A prospective study, reviewing the medical records of children who underwent tracheotomy in the ICU of a tertiary teaching hospital, during the period of November 2002 to February 2011. We assessed data on age, indications, co-morbidities, time of intubation, extubation failures, laryngotracheal pathologies, surgical interventions, decannulation, death and cannula changes. **Results:** Tracheotomy was performed in 37 children, aged between 2 days and 13 years. The mean time of follow-up was 3.7 years. All had co-morbidities. 51% were younger than 6 months at the time of the tracheotomy. The mean time of intubation was 37 days, with 3 extubation failures before tracheotomy was carried out. The most frequent indication was laryngitis after prolonged intubation, subglottic stenosis and chronic aspiration. 13 children were decannulated. The mean time with a tracheostomy before decannulation was 24 months. The cannula was periodically changed in 19 children. 5 patients died. **Conclusion:** Tracheotomy is most indicated in children younger than 6 months old, with co-morbidities. The most frequent indication is laryngitis after prolonged intubation. Decannulation is possible in a large number of patients.

PS-490

SGP: 8532

Giant Mixed Ranula

Author(s): Gustavo Subtil Magalhães Freire, Vítor Yamashiro Rocha Soares, Pedro Ivo Machado Pires de Araújo, Rafaela Aquino Fernandes Lopes, Daniel de Sousa Michels, Priscila Carvalho Miranda, Luiz Augusto Nascimento

Keywords: ranula, salivary glands, sublingual gland.

Ranula is a cystic lesion arising from the retention or extravasation of saliva from the sublingual gland. It can be classified according to their location in simple, plunging or mixed. It is rarely symptomatic and easily diagnosed. Several types of treatment are described. Excision of the lesion plus the affected gland appears to have lower recurrence rate. **Report Case:** A 21-year patient with a high-volume mixed ranula impairing speech and feeding.

PS-491

SGP: 8544

Otorhinolaryngological symptoms in a patient with netherton Syndrome: case report

Author(s): Luiza Rodrigues Caffarate, Gustavo B. Sela, Heloisa Nardi Koerner, Maria Theresa Ramos, Francisco Grocoski, Carlos Roberto Ballin

Keywords: congenital, ichthyosiform erythroderma, netherton syndrome, sialadenitis.

The Netherton Syndrome is a severe, autosomal recessive form of ichthyosis associated with scaly skin, fragile and spiky hair (trichorrhexis invaginata - bamboo-like hair); allergies, immune deficiency or epilepsy. Our objective

is to report findings of otorhinolaryngological symptoms in a patient with Netherton Syndrome and its complications. This syndrome must be known by otorhinolaryngology professionals because they may be associated with chronic sialadenitis and recurrent head and neck abscess. The treatment chosen for the patient in this report was clinical, with a good outcome. It is necessary to have more studies in order to determine the specific otorhinolaryngological symptoms of this syndrome.

PS-492

SGP: 8551

Parry- Romberg: a rare syndrome

Author(s): Larissa Magalhães Navarro, Lorena Gonçalves Rodrigues, Marjorie Souza Banhos Carepa, Gisele Vieira Hennemann Koury, Adilon Passinho Koury

Keywords: facial asymmetry, facial hemiatrophy, neurocutaneous syndromes.

Introduction: Parry-Romberg Syndrome is a rare disease of unknown etiology, characterized by slowly progressive atrophy of the subcutaneous tissue. Symptoms usually begin at an early age, on the first or second decade of life. Disorders of the central nervous system and ophthalmologic abnormalities may be present. **Case report:** AASJ, 11 years old, male, with a past of right hemifacial atrophy for 3 years. Physical examination showed soft tissue atrophy in the right side of the face. The otolaryngological examination did not show significant changes. **Conclusion:** The striking features of this syndrome makes it imperative to know and be able to identify; contributing to an early diagnosis.

PS-493

SGP: 8577

Profile of patients with indication of surgical procedures at the clinic for snoring and sleep apnea in a university hospital

Author(s): Felipe Almeida Mendes, Silvio Antonio Monteiro Marone, Bruno Bernardo Duarte, Ana Carolina Parsekian Arenas, Aline Sacomano Arsie

Keywords: health profile, sleep apnea syndromes, snoring.

INTRODUCTION: For patients with OSAS, CPAP is considered the first-line treatment, because of the efficiency with which this device is able to prevent the collapse of the upper airways, resulting in relief of symptoms such as daytime sleepiness and reducing cardiovascular morbidity. However, the effectiveness of CPAP therapy depends on compliance to treatment, and subsequently the need to use it every hour of sleep. Thus, there is a need to offer patients other treatment modalities, including surgical procedures in the upper airways. **MATERIALS AND METHODS:** This is a cross-sectional study involving 16 patients referred from general ENT outpatient clinics specifically for surgery for Snoring and Sleep Apnea, as a treatment modality for snoring and OSAS. **RESULTS:** gender: 11 men and 5 women; Age (average): 40.875; BMI: 1 patient (6%) had BMI <25; 7 patients (44%) had BMI between 25 and 30; and 8 (50%) had BMI between 30 and 35; Classification of OSA: 4 patients (25%) had primary snoring; 3 (19%) had mild OSA; 2 (13%) had moderate OSAS and 7 (43%) had severe OSA; distribution by te Friedmann's classification: 3 (19%) had Friedmann grade I; 6 (38%) had Friedman grade II and 7 (43%) had Friedman III; Approach: 5 (31%) were submitted to injection surgery for snoring; 4 (25%) were submitted to UPPP; and 7 (43%) to lateral pharyngoplasty. **CONCLUSION:** the profile of patients referred for surgical procedures to treat snoring and sleep apnea is a university hospital: males, obese, with moderate or severe OSAS.

PS-494

SGP: 8580

Tonsillitis by *Aspergillus fungus* in immunocompromised patient

Author(s): Rafael de Paula e Silva Felici de Souza, Ricardo Arthur Hubner, Ana Gabriela Gonçalves Torisan, Mariana Wilberguer Furtado de Almeida, Atilio Maximino Fernandes

Keywords: aspergillus fumigatus, immunocompromised host, tonsillitis.

Aspergillus is a fungus commonly found in the airways. It is clinically important due to infections that affect immunosuppressed patients, with high mortality rates in this group. Its incidence has been increasing in recent decades. This paper presents a case of tonsillitis caused by *Aspergillus fumigatus* in an immunocompromised patient by bone marrow aplasia.

PS-495**SGP: 8581****Foreign bodies in otorhinolaryngology: a study of 94 Cases**

Author(s): João Tiago Silva Monteiro, Diego de Oliveira Lima, Luciano Szortyka Fiorin, Flávio Bertoncello, Priscila Bogar Rapaport, Fernando Veiga Angélico Jr

Keywords: ear, foreign bodies, nose, otolaryngology, pharynx.

Foreign bodies (FB) in the sinuses, ears and oropharynx is a reason for frequent consultations in ENT emergency services. **Objective:** To study 94 cases of FB removal and analyze their characteristics. **Results:** 62% were in males and 38% in females; as far as age is concerned, in patients aged 0-2 years, there was no case; 2-6 years there were 64 cases (68%), 6 to 12 years, 22 cases (23.4%) and over 12, there were 8 cases (8.5%). There were 59 FB cases in the ear (62.7%), 33 in the nose (35.1%) and two cases in the pharynx. Pieces of foam and pieces of jewelry were the most common, with eighteen (19.1%) cases of each of these items. Of the 94 cases, 34 (36.1%) FB were removed within the first 24 hours after its introduction; 24 (25.5%) in 2 to 4 days; 14 (14.89%) in 5 to 7 days and 18 (19.1%) after 7 days. In four cases, parents or guardians of patients were unable to provide the FB residence time. Thirty-four cases (36.1%) had history of previous removal attempts by the parents or non-specialist medical personnel. In eight cases (8.51%) it was necessary to take the patient to the operating room and remove the foreign body under general anesthesia. Complications occurred in 4 patients (4.25%) -3 cases of FB in the ear and one in the nasal cavity. **Conclusion:** Most cases of manipulation prior to removal of the FB by unskilled professional or laymen evolved with complications.

PS-497**SGP: 8234****Preliminary data on the body swing study in healthy volunteers**

Author(s): David Greco Varela, Antônio Adilton Oliveira Carneiro, José Ailton Oliveira Carneiro, André Vital Nazianzeno, José Fernando Colafêmina

Keywords: dizziness, postural balance, posture.

Introduction: Balance is given by visual, proprioception and labyrinthine stimuli. Body stability is directly related to posture control. The evaluation of static and dynamic posture has gained importance in the diagnosis, monitoring and rehabilitation of patients with dizziness. Polhemus Patriot, as an auxiliary diagnosis tool, may be useful for the examination of patients with dizziness. **Objectives:** to check the safety of the body sway test using the Polhemus Patriot Hardware in healthy patients. To determine the normal standards of body sway generated by the Polhemus Patriot. **Result:** Only one participant withdrew from the study. We had 27 individuals in the study. The average age of the group was 28.59 years. The average height was 1.70m. There was Statistical difference when comparing the trajectory between the OASE and OFSI, OASE and OFSE positions and between OASI and OFSI positions. **Discussion:** new test methods have to go through knowledge and sedimentation stages of the achieved results. The evaluation of healthy volunteers did not cause pain or discomfort that would last after the exam. There were statistical differences in assessing the body sway trajectory.

PS-498**SGP: 8347****Association of lip squamous cell carcinoma, nose basal cell carcinoma and giant cervical lipomatosis**

Author(s): Mariane Sayuri Yui, Emanuel Capistrano Costa Junior, Luiz Henrique Carboni Souza, Carolina Brotto de Azevedo, Danielle Leite Cunha, Maria Soares Malago, Rodrigo L. Nogueira

Keywords: basal cell, carcinoma, carcinoma, lipoma, squamous cell.

We describe the case of a patient with squamous cell and basal cell carcinoma of the face, and neck lipoma that was submitted to excision of these lesions. Skin cancer is a disease characterized by uncontrolled proliferation of cells and lymphatic spread of abnormal cells. The most common types are: basal cell carcinoma (BCC), squamous cell carcinoma (SCC) and cervical melanoma. The incidence of lipomas is relatively common. Lipomas are small tumors which can be asymptomatic for years or even for life. Malignant skin neoplasms usually involve chronically sun-exposed areas like the face and arms. The basal cell carcinoma (BCC) has its origin in the basal cell of the epidermis and its annexes. It is the most frequent type of skin cancer, with the slowest growth pattern. The SCC presents with less defined boundaries

than the BCC. It's origin is the proliferation of epidermal keratinocytes. The treatment of skin cancer is essentially excision of the entire lesion, with a free margin; and when needed, lymph node dissection, excision of metastases and radiotherapy. Lipomas are fatty tumors located in the subcutaneous tissue of any part of the body. Well-outlined tumors with parenchymal consistency with slow growth and without other repercussions beyond the aesthetic disfigurement.

PS-499**SGP: 8589****Eagle's Syndrome, a rare cause of neck pain**

Author(s): Alexandre Minoru Enoki, Cristiana Vanderlei de Melo, Dulcinea Aparecida Folly Medeiros, Francisco Pierozzi D'Urso, Karina Marçal Kanashiro, Ricardo Alexandre Basso

Keywords: eagles, facial pain, neck pain, tonsillectomy.

Eagle's syndrome is clinically characterized by the presence of facial pain and/or oropharyngeal pain in patients after tonsillectomy and still features enlargement of the styloid apophyses in radiological studies. We present a case of a 61 year-old-patient with a long-standing history of neck pain in which the radiological studies showed an enlargement of both styloid apophyses.

PS-500**SGP: 8604****Recurrent laryngeal papillomatosis**

Author(s): Maria Eudiane de Macêdo Marques, Pablo Pinillos Marambaia, Amaury de Machado Gomes, Manuella Sousa Martins, Milena Magalhães Sousa

Keywords: human papillomavirus 6, laryngeal neoplasms, microsurgery, papilloma.

Airway papillomas are rare, benign, recurrent and progressive tumors. Its etiology is associated with infections by the human papilloma virus. Two clinical forms are described: juvenile and adult. It is known that papillomatosis affects more frequently the glottic region, preferably the anterior portion of the larynx. Symptoms included: change of voice, dysphonia, hoarseness, stridor and dyspnea. The diagnosis is made by history, physical examination and laboratory tests (laryngoscopy and/or bronchoscopy and chest X-ray) to rule out other causes of dyspnea. Treatments that increase the time between recurrences are necessary in the two forms of papillomatosis. In this report, the patient presented with dry cough since the age of two, and constant dysphonia. Oroscopy: we noticed papillomatous lesion in both tonsils. The patient underwent surgical resection of the papillomas under direct laryngoscopy with the use of cold forceps. From diagnosis to the present, this patient has been submitted to 15 resections of papillomas.