Inferior Turbinate Flap for Repair of Nasal Septal Perforation

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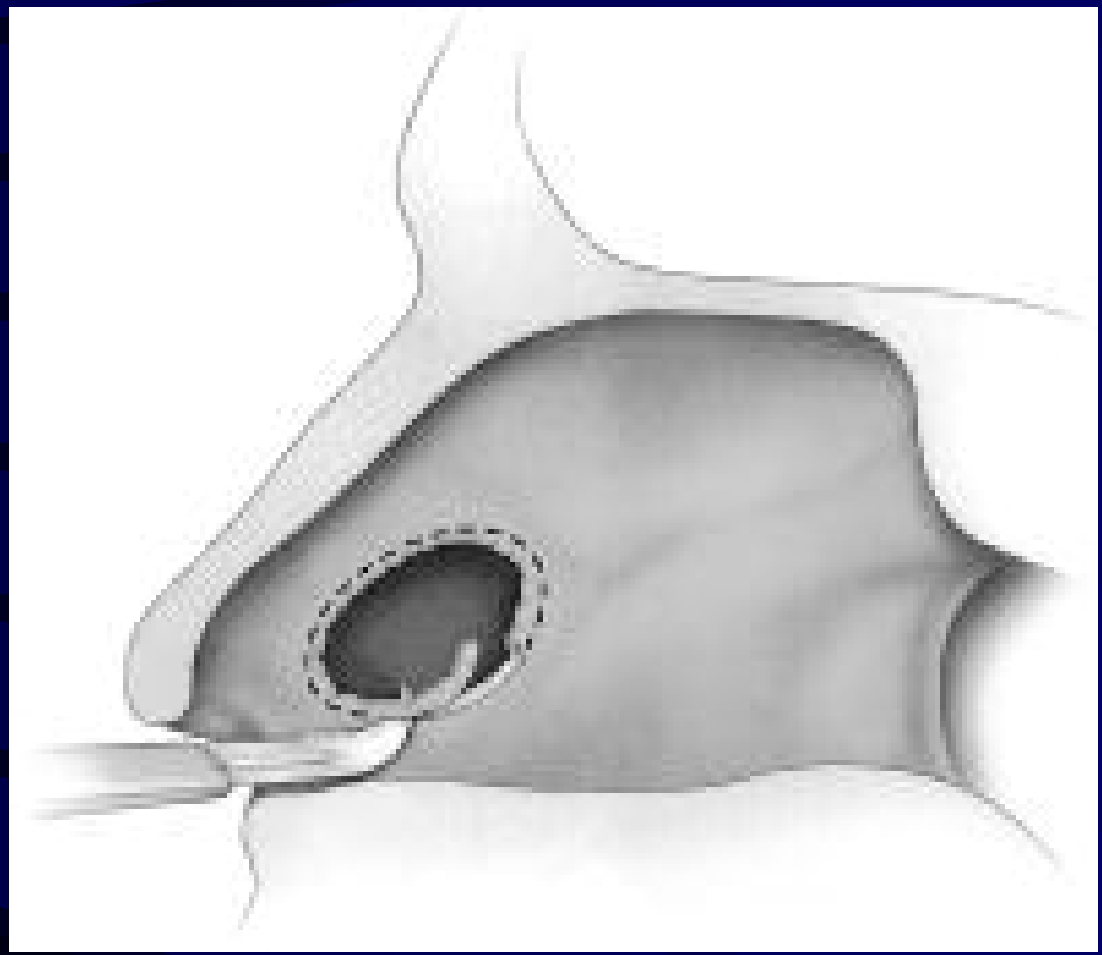
INTRODUCTION

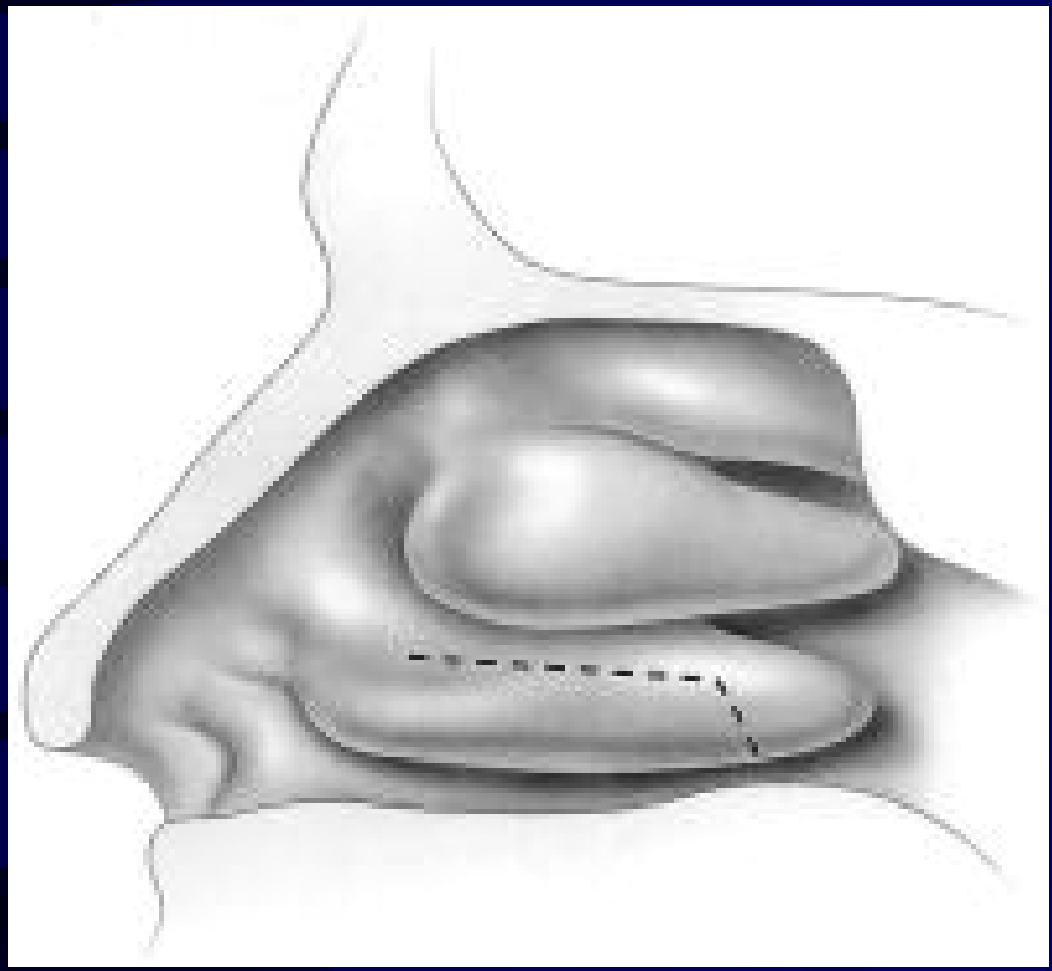
- Repair of nasal septal perforations: the variety of techniques, technically difficult , require training, not reproducible by all surgeons
- The inferior turbinate flap:limited to moderate size (1.5–3.0 cm) , caudal perforation

MATERIALS AND METHODS

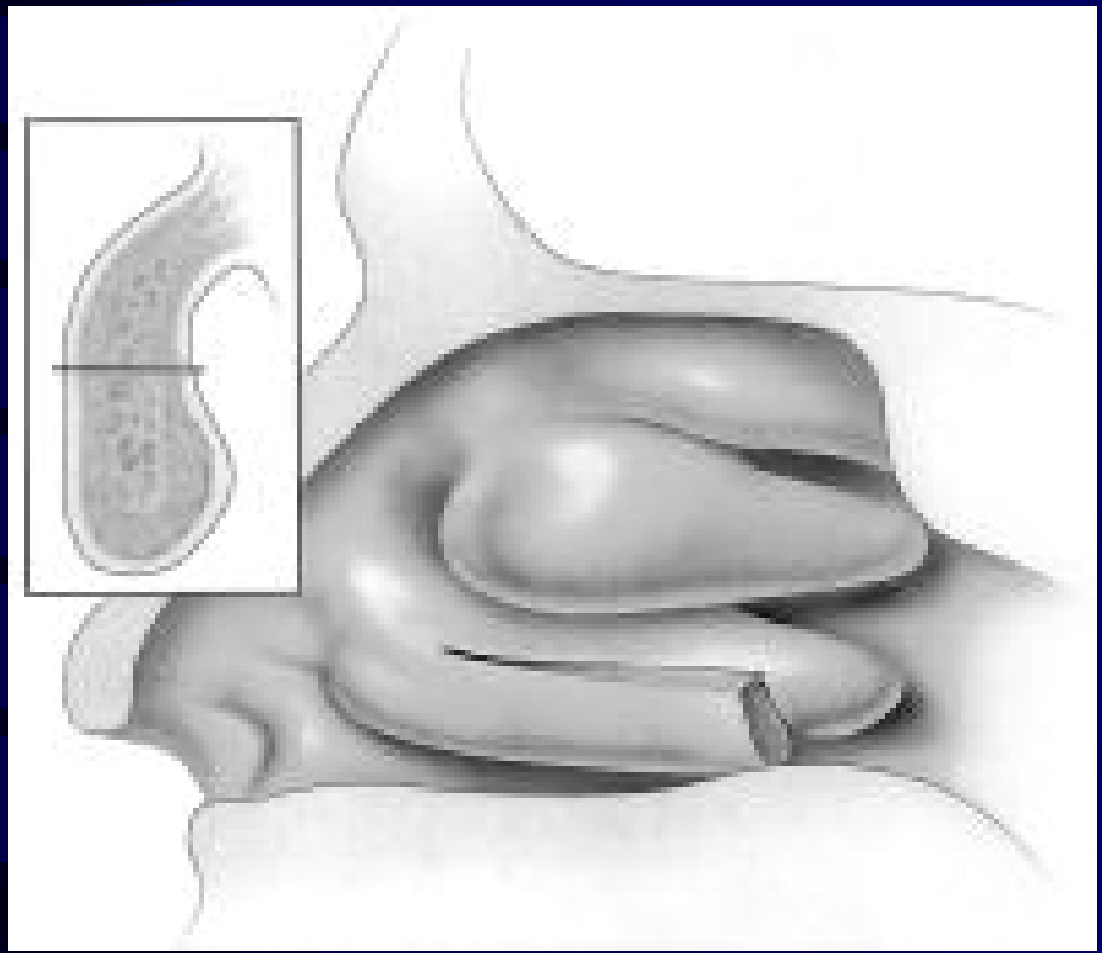
- 1998- 2001
- 10 petients(follow-up :from 18 months to 3 years)
- Perforation size: 1-2 cm
- flap : a normal or large inferior turbinate



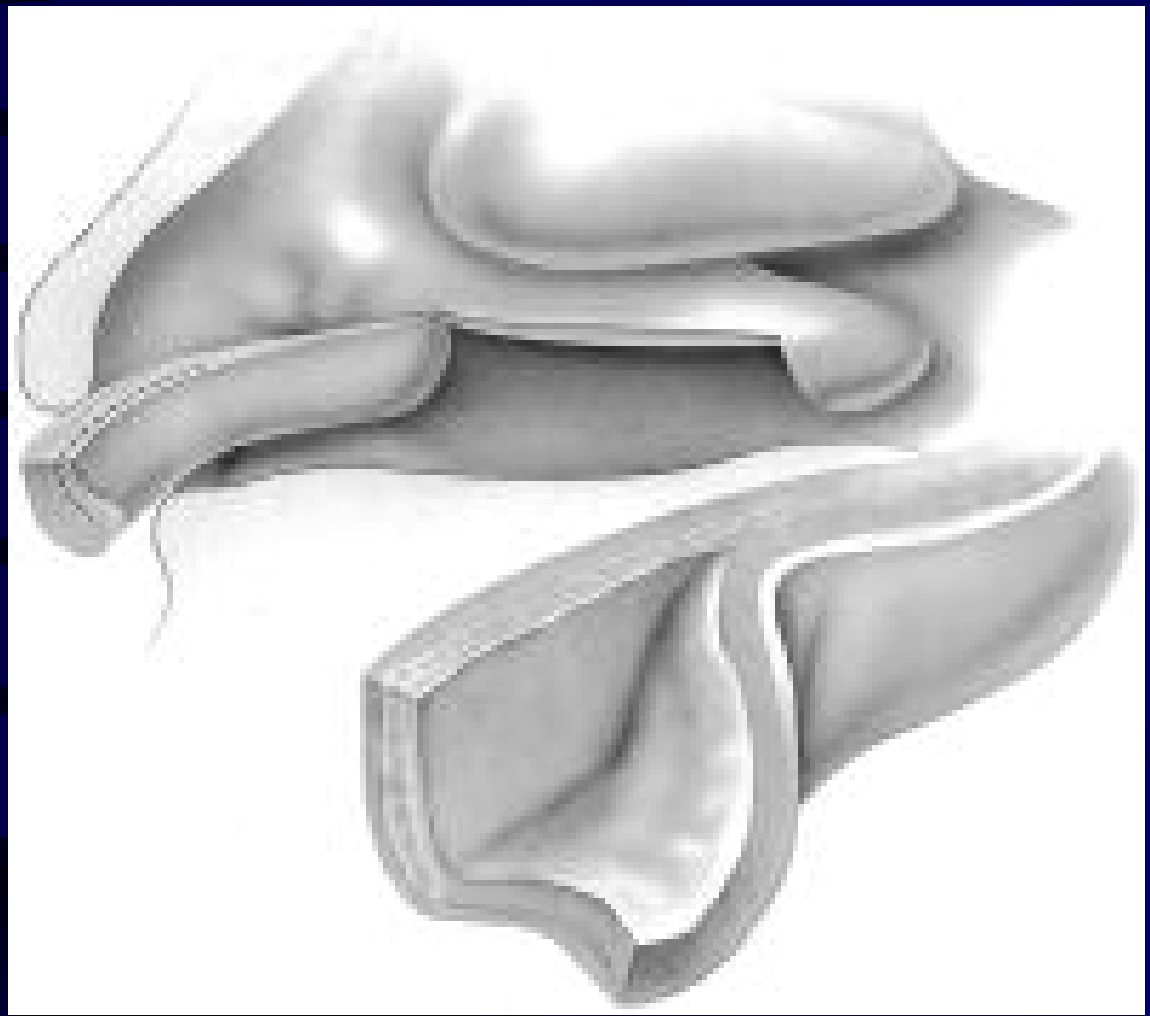
The septal perforation is rimmed using a No. 12 blade.



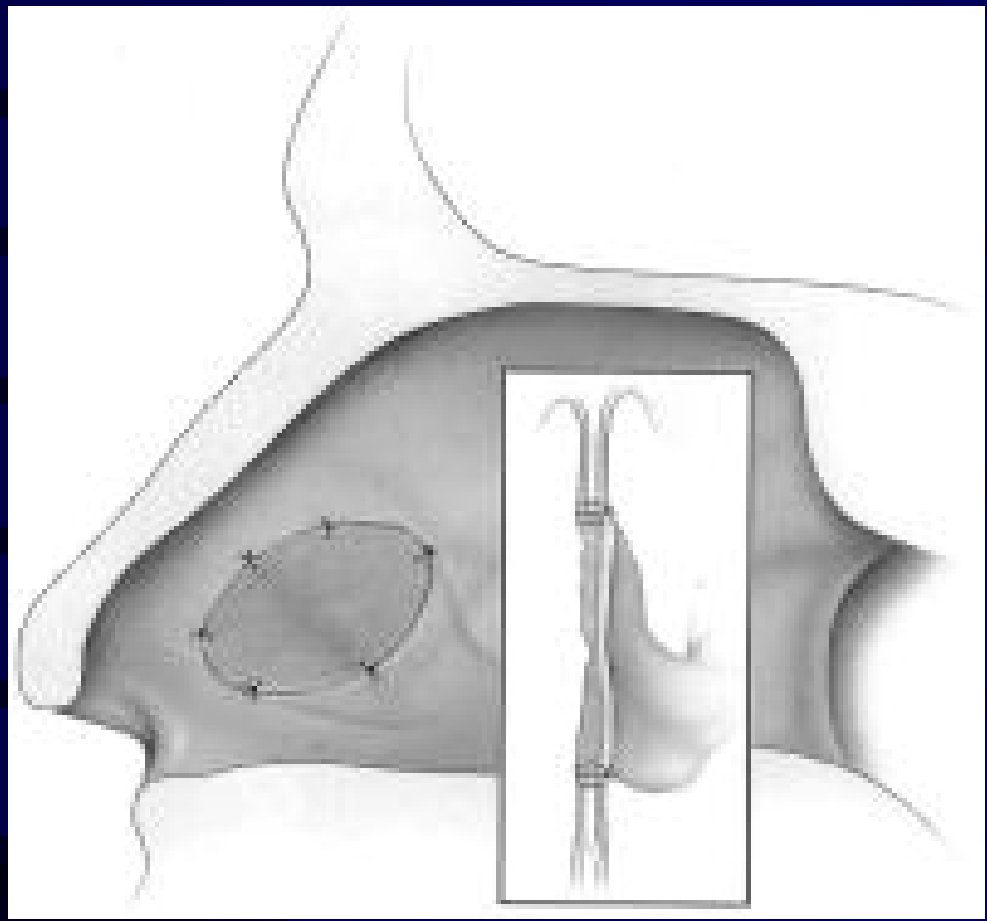
The anterior attachment of the turbinate is left intact.



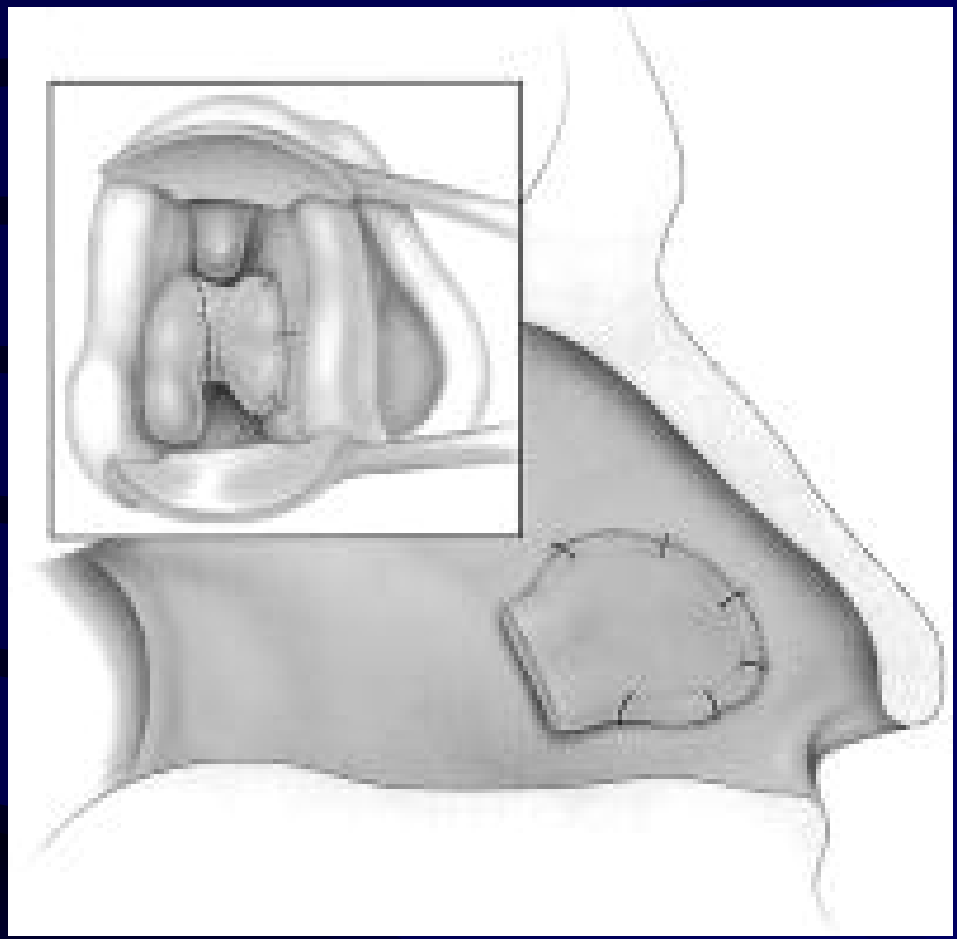
A through-and-through cut is made through the inferior turbinate



The flap is retracted anteriorly.



The flap is sutured in place using plain 4-0 catgut.



The site of pedicle transection (3 weeks after surgery)

Results and Complications

- 7 patients: closure of their perforations
- 2 patients: incomplete closure
- 1 patient: flap necrosis
- all of the patients: complained of unilateral nasal airway obstruction for 3 weeks

DISCUSSION

- Repair of nasal septal perforations:
- size, location, and symptomology

Advantages of the inferior turbinate flap

- (1) abundant vascularity,
- (2) wide arc of rotation
- (3) combined skeletal and epithelial support
- (4) use respiratory tract mucosa

Disadvantages of the inferior turbinate flap

- (1) a second-stage procedure to release the
- pedicle
- (2) cause partial obstruction of the airway
- (3) one surface is not epithelialized ,must
- heal by secondary ingrowth of epithelium

CONCLUSION

- The inferior turbinate flap :
- (1) a relatively simple technique
- (2) offers a valuable source of respiratory
- tract mucosa
- (3) provides one more alternate solution to a
- difficult problem