ANTERIOR NASAL PACKING VS SEPTAL CLIPS TYPE III, IN POST NASAL SEPTAL SUBMUCUS RESECTION & SEPTOPLASTY SURGERIES: A COMPARATIVE STUDY

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ABSTRACT:

Background & Objectives: The objective of present study is to compare 2 techniques of nasal packing after SMR (submucus resection) or septoplasty surgeries i.e anterior nasal packing (ANP) & nasal septal clip type III (NSCT). (Materials & methods: This is a prospective randomized comparative study including 50 patients above 18 years who underwent SMR or septoplasty for deviated nasal septum (DNS). The patients were randomly divided into two equal groups for nasal packing using NSCT or ANP.

Results: Intra operatively, packing with NSC was easier, faster. And support provided to the septum could be assessed visually when compared to ANP (t=7.52, p<0.001). Trauma to mucous membrane occurred during packing was 8% in ANP and 4% in NSC group. In immediate post op we noted headache, 20 % in NSC and 92% in ANP, epiphora 12% in NSC and 100% in ANP. Sleep disturbance 16% in NSC and 18% in ANP, dysphagia 80% in ANP and 0% in NSC and bleeding 20% in NSC who were managed with nasal decongestants (p<0.001). At pack removal severe pain was experienced in 100% ANP and 8% in NSC. Bleeding occurred during pack 'removal was16% in ANP and 8% in NSC (x=12.39, p<0.05). Follow up complications noted were synechiae in 8% in ANP, 4% in NSC, septal hematomas in 4% in each. The necrosis of the mucous membrane was noted in 4% in ANP group and treated conservatively. None suffered septal perforation.

Conclusion: Purpose of packing was served by both methods more or less equally but NSC was better tolerated in post operative period with less post operative discomfort and follow up complications when compared to ANP.

Keywords: Deviated nasal septum (DNS); SMR; Septoplasty; Nasal septal clip type III (NSC); conventional anterior nasal packing (ANP).