

# OTOLARYNGOLOGY **SCANNER**

## **CAN'T MISS FOLLOW-UP EXAMINATION: CRITICAL TO PREVENT RECURRENCE AFTER FESS**

Clinical follow-up is crucial to prevent reoccurrence and assess outcome of surgical intervention. This is particularly true for functional endoscopic sinus surgery (FESS) performed for management of chronic rhinosinusitis with nasal polyps.

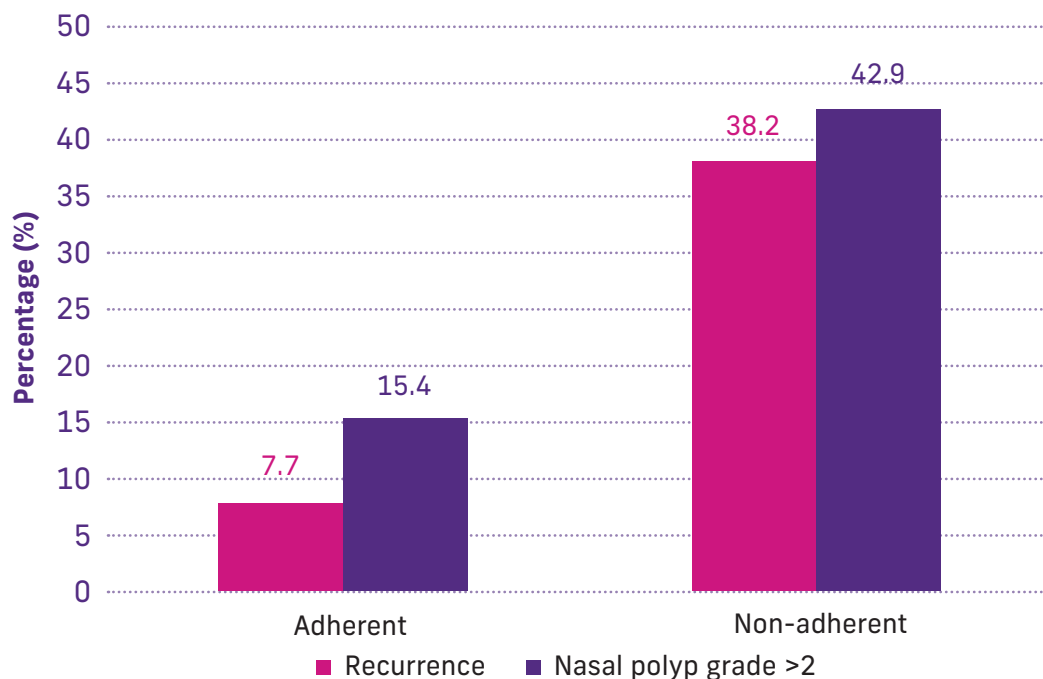
Despite the importance, there is lack of well-demarcated guidelines for number and timing of follow-ups post-surgery.

Riva G and coworkers collaborated to estimate the disease recurrence rate following FESS and importance of adherence to follow-up examinations following surgery.

In this study, a total of 60 patients who underwent FESS for chronic rhinosinusitis with nasal polyps were recruited. Clinical parameters, adherence to clinical follow-up using nasal fiber optic endoscopy and consistent use of nasal steroids were noted.

- Almost 25% patients adhered to regular follow-ups and prescribed treatment with nasal steroids.
- Recurrence rate for chronic rhinosinusitis with nasal polyps was 56.7% at last follow-up examination.
- Recurrence at last follow-up was minimal among patients adherent to follow-up examinations and management of even small recurrent episodes (7.7%) compared to non-adherent patients (38.2%) (Figure 1).
- For patients with or without adherence 15.4% and 42.9% cases of nasal polyp more than grade 2 were observed, respectively (Figure 1).

**Figure 1: Low overall recurrence and nasal polyp grade >2 recurrence in adherent group compared to non-adherent group**



The study results thus affirmed that regular follow-up examinations are invariably important to detect and treat recurrent disease promptly.

**Source:** Riva G, Pizzo C, Carraro M, Moresco M, Pecorari G. The importance of follow-up examinations in chronic rhinosinusitis with nasal polyposis. *Am J Otolaryngol.* 2022 Oct 20;44(1):103672. doi: 10.1016/j.amjoto.2022.103672. Epub ahead of print. PMID: 36279830.

## **CHRONIC RHINOSINUSITIS DISEASE CONTROL: DISPARITY IN PATIENT-REPORTED AND EPOS GUIDELINES-BASED INFORMATION**

A recent study published by Sedaghat AR and colleagues found that there is a considerable disparity in chronic rhinosinusitis control reported by the patient and that assessed according to European Position Paper on Rhinosinusitis and Nasal Polyps (EPOS) criteria. Control evaluated using EPOS guidelines is almost always inadequate than actually measured by the patients themselves. Additionally, inclusion of patient assessed control measures than nasal endoscopy findings to EPOS guidelines will prove more accurate and clinically useful.

This study conducted among a group of 421 patients and published in the journal *Rhinology* aimed to ascertain similarity in chronic rhinosinusitis disease control according to patient-report or EPOS criteria. Individuals recruited in the study rated disease control as controlled, partly controlled or uncontrolled.

The outcomes of the study were as follows:

- Concordance in patient-reported and EPOS-based disease control was noted for 49.6% patients.
- Within cases of discordance, 92.9% patients had worse EPOS guideline-based disease control rating.
- Facial pain/pressure and impaired olfaction were related to patient agreement with EPOS guideline rating of uncontrolled disease.
- Patients with high visual analogue scale (VAS) symptom scores had worse patient-reported disease control.
- On elimination of nasal endoscopy criterion, there was a better match between patient-reported and EPOS guideline reported disease control.
- Addition of patient-reported control instead of nasal endoscopy criterion further oriented EPOS guidelines with patients views on disease control.

It was concluded that disease control measure according to EPOS guidelines alone is inadequate and mostly suggests disease control worse than that reported by the patient. The two prominent reasons for this disparity may include lack of graded symptom severity criteria and inclusion of nasal endoscopy.

**Source:** Sedaghat AR, Singerman KW, Phillips KM. Discordance of chronic rhinosinusitis disease control between EPOS guidelines and patient perspectives identifies utility of patient-rated control assessment. *Rhinology*. 2022 Dec 1;60(6):444-452. doi: 10.4193/Rhin22.160. PMID: 36150161.

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