

The Difficulties in the Diagnosis and Treatment of Sinonasal Carcinoma (The Clinical Observation)

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Abstract

The clinical case demonstrates the difficulties of differential diagnosis of infiltrative growing tumor, which is penetrating into the skull cavity with an extensive destruction of the walls of the paranasal sinuses, the septum of nose and the bones of the skull base. The patient was treated for chronic recurrent purulent-obstructive processes of the paranasal sinuses repeatedly during 1,5 years. It became possible to suspect a tumor of the skull base, nasal and paranasal sinuses, and to determine the size of the tumor and its prevalence due to the data of multislice computed and magnetic resonance tomography. However, radiological techniques did not provide source location and nature of the process reliably. Taking into consideration the discrepancy between clinicoradiological pattern and results of preliminary histological studies (the conclusion of chronic sinusitis) an extended biopsy of tumor tissue at the level of the skull base from endonasal approach under endoscope control was carried out during another hospitalization to otolaryngology hospital. To prevent nasal liquorrhea, complications in form of an ascending meningitis or bleeding after the biopsy, intraoperatively and after surgical procedure for bone and soft tissue defects closure the multifunctional hydrogel material «Colegel-ADL» (with dioxidine and lidocaine entered in biopolymer base – sodium alginate) was used at the site of intervention. High viscosity of the hydrogel matrix, its elastic consistency, presence of antiseptic and local anesthetic in the medicinal composition have provided the opportunity to use this material as long-standing swab for liquor fistula overlapping. Low differentiated sinonasal carcinoma was verified according to the results of histological examination, obtained after 10 days. The patient was transferred to Oncology center for further treatment. Based on the presented clinical case it should be noted that clinicoradiological algorithm is not currently defined for patients with slow inflammatory diseases of paranasal sinuses. An efficiency of radiological techniques requires further refine on diagnosis of sinonasal neoplastic processes.

Key words: Computed Tomography, Magnetic Resonance Imaging, Sinonasal Carcinoma, Otorhinolaryngology, Hydrogel Material «Coletex».

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