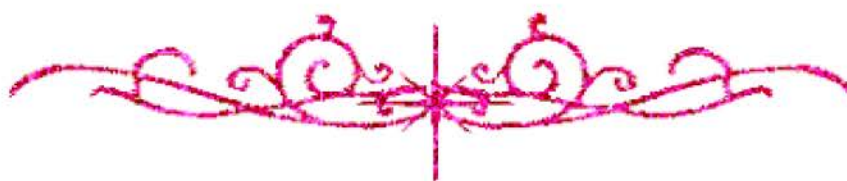


سامية محمد مصطفى



شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



سامية محمد مصطفى



شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



سامية محمد مصطفى



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



سامية محمد مصطفى



شبكة المعلومات الجامعية



بعض الوثائق الأصلية تالفة



سامية محمد مصطفى



شبكة المعلومات الجامعية



بالرسالة صفحات لم ترد بالأصل



Menoufyia University
Faculty of Medicine
2002

*Endoscopic Evaluation of
Eustachian Tube in Otitis
Media with Effusion*

THESIS

Submitted for partial fulfillment for the Master
degree in Ear, Nose, and Throat

Presented by

Ashraf Mohamed Medhat Mesbah
M.B.B.ch

Supervised by

Prof. Dr. ABDEL Hay Rashad El-Assy

Professor and head of ENT departement
Faculty of medicine
Menoufyia University

Prof. Dr. OMAR EL-BANHAWY

Asst. Professor of ENT
Faculty of medicine Menoufyia University

Dr. MOHAMED AKRAM METWALLI

Lecturer of ENT
Faculty of medicine Menoufyia University

Acknowledgement

First and foremost thanks are to **ALLAH**, the most beneficent admerciful.

I would like to express my deepest gratitude and sincere appreciate to **prof. Dr. Abd El-Hay Rashad El-Assy**, Professor and head of ENT Department, Faculty of Medicine, Menoufyia University for his patience, continuous advice and keep supervision throughout the conduction of this work.

Thanks are also sincerely extended to **Prof. Dr. Omar El-Banhawy**, Assistant Prof. of ENT, Faculty of Medicine, Menoufyia University for revising, guidance and generously affording me much of his time.

I' am greatly indebted to **Dr. Mohamed Akram Metwalli**, Lecturer of ENT, Faculty of Medicine, Menoufyia University for his tender encouragement, unlimited effort and time he freely gave in this work.

I wish also to express my thanks to every one helped me to achieve this work.

Contents

	Page
Introduction	1
Aim of the work	3
Review of Literature	
Anatomy of the nasopharynx	4
Anatomy of the Eustachian tube	7
Functions of the Eustachian tube	12
Pathogenesis and pathology of otitis media with effusion	19
Aetiology of otitis media with effusion	22
Clinical picture of otitis media with effusion	30
Management of otitis media with effusion	34
Endoscopic consideration	45
Material and Methods	47
Results (Tables & Figures)	52
Discussion	70
Conclusion	78
Summary	80
References	82
Arabic Summary	

introduction

Introduction

Otitis media with effusion is characterized by a non-specific inflammation of the middle ear mucosa and secretory transformation of the epithelial layer, resulting in fluid accumulation in the middle ear space (**Ovesen, et al., 2000**).

Many sequential studies have reported that between 20% and 50% of children will have an episode of otitis media with effusion at some time between the ages of 3 and 10 years (**Browning, 1997**).

The pathogenesis of otitis media with effusion is multifactorial which includes factors such as infection (usually viral or bacterial), eustachian tube function, immunological status, environment and even social factors (**Bluestone, 1995**).

The commonest cause of otitis media with effusion is hypertrophied adenoids blocking the eustachian tube (**Mraran et al., 1979**).

Tympanostomy tubes have been used to treat a diverse group of diseases and conditions, but, by far the most common indication for myringotomy and insertion of tympanostomy tubes is secretory otitis media which has failed to respond to medical treatment. The purpose of the latter is to establish an adequate aeration of the middle ear

cleft with consequent reversion of the pathological changes in the middle ear mucosa (**Ransome, 1986**).

Nasopharyngoscopy is found to be simple, safe and easy method for direct visualisation of the adenoids and the nasopharynx (**Silberman, 1978**).

Aim Of The Work

AIM OF THE WORK

The aim of this work is the nasopharyngeal endoscopic evaluation of the eustachian tube factor involved in the causation of otitis media with effusion in children.

Review of Literature

Anatomy of the nasopharynx

The nasopharynx or postnasal space is mainly derived from the primitive pharynx. It lies behind the nasal cavities and above the soft palate the anterior wall is formed by the openings into the nasal cavities which allow free communication between the nose and nasopharynx on each side of the posterior edge of the nasal septum. Just within these opening lie the posterior ends of the inferior and middle turbinates. (Beasley, 1997).

The concept that the nasopharynx is divided into an anterior nasal and a posterior pharyngeal component is supported by embryological, morphological and functional consideration. Morphological and histological studies have shown that the anterior portion proximal to the tubal orifice resembles the nasal cavity while the posterior portion resembles the oropharynx. The junctional zone is the belt along the tubal orifice where the first and third pharyngeal arches meet. The tubotympanic recess, the precursor of the eustachian tube is formed mainly from the second pharyngeal pouch (between the first and the third pharyngeal arches) while the pharyngeal muscles are derived from the third and the fourth pharyngeal arches (Kanagasuntheram, et al., 1969).