

Anatomic variation of the sphenoid sinus of a person depending on the severity of the adhesions tipped processes

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Relevance: Anatomic variation of the sinus sphenoidalis and its clinical significance to date are relevant and important topic for medical professionals of different specialties. Knowledge of the anatomical structure of the sinus - dimensions, shape, wall thickness, presence of septa, presence of adhesions tipped processes allows to predict the development, the course and complications of various inflammatory diseases in the region of the paranasal sinuses, which tend to progression [1,2].

Thanks to modern diagnostic techniques - x-ray computed tomography and magnetic resonance imaging, which allow a more accurate study to evaluate the topography of the sphenoid sinus from the point of view of choice of surgical treatment method, choosing surgery, prevention of postoperative complications and the high quality of their perform so many procedures on this occasion produced with the help of endoscopic transsphenoidal surgery[3].

Objective of the study was: To study the anatomical variability of the sphenoid sinus person depending on gender, age and characteristics of ossification of the tipped shoots and its clinical significance in the management of patients with inflammatory diseases of the paranasal sinuses/

Materials and methods: to assess the variability of shapes and sizes of the sphenoid sinus was obtained from computed tomography and 3-D modeling of the head 64 of patients from the archive of the Department. The obtained data were divided by sex and age periodization according to the who (2012). Input, accumulation and processing of material was carried out by the program scanner.

To determine the shape of the sphenoid sinus was used the classification of V.S. Maykova-Stroganova and D. G. Rokhlin, according to which there are the following options sinus:

1. Cochnalis - sinus in the form of small-sized cells, is located in front of the Turkish saddle, gipoparatireoze.
2. Procellaria. Moderately pneumatically sine, crossing no more than half of the Turkish saddle.
3. Sellar. Hyperpneumatization sinus crossing the Turkish saddle and extending his back in some cases.

The results of the study:

The age studied ranged from 20 to 94 years. We evaluated the presence of cavities, their size, volume and pneumatization, presence of septum, age group, by sex. Men was 26 (40,63%), women - 38 (59,38%).

In the age category 25-44 years studied there were 8 patients (12,5%) men 4 (50%), 4 (50,0%); 44-60 years 20 patients (31,25%) of them males 5 (25%), 15 women (75%);60-75 years, 23 patients (of 35.94%) men 8 (of 34.78%), female 15 (65.22 per cent); 75 to 90 years 12 patients (18,75%) of them men 9 (75%) women 3 (25%); after 90 years: 1 patient, male (100%).

According to variants of the sinuses among the study patients with sellar form 21 patients (32,81%), among whom men 10 (47,62%), female 11 (52,38%);procellaria form patients 17 (of 26.56%) among which men 6 (35,29%), 11 female (of 64.71%);mangalnoy form 6(9,38%)among which 3 men (50%), 3 women (50%).

The septum was noted in 54 patients (84,375%), among them 18 men (33,33%), 36 women (of 66.67%); don't have 10 patients (15,625%), including 7 males (70%), among them 3 women (30%).

6 patients were identified fusion tipped shoots, which is important in the diagnosis, treatment and development of complications, and also tactics of conducting the patient.

Insights:

1. Anatomic variation of the sphenoid sinus does not depend on gender and age of the patient.

2. The observed dependence of the shape changes of the sphenoid sinus and tactics of treatment the degree of ossification of the tipped shoots. In all cases there procellaria form sinus.

Источники и литература

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