

Profile ENT Surgery in a Pediatric Hospital in Curitiba

Perfil Cirúrgico Otorrinolaringológico em um Hospital Pediátrico de Curitiba

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SUMMARY

Introduction:

ENT procedures are very common in the pediatric surgery and otolaryngologists have a wide range of surgical procedures, and adenotonsillectomy most performed procedure, followed by otological. The most common complication is bleeding from tonsillectomies. Despite being the most feared complication, only a minority of patients need surgical intervention to stop the bleed.

Objective:

To evaluate the surgical profile in hospital pediatric otolaryngology Curitiba.

Method:

Retrospective Study of registered surgeries.

Results:

A total 2020 procedures performed in the operating room in 2009, 9.26% (187) and tests were 90.74% (1833) surgeries, being 65.14% (1316) performed by the SUS, 32.47 (656) by covenant and 2.39% (48) individuals. The gender distribution was 1106 boys and 914 girls. Adenoidectomy with or without tonsillectomy corresponded to 62.5% (1146). Of these, only 0.96% (11) underwent revision surgery center. In second place comes the otological surgery, with results of tympanostomy, with or without ventilation tube, the most prevalent.

Conclusion:

The otolaryngologists are able to perform various types of ENT surgical. A procedure most frequently performed in pediatric hospital in Little Prince is adenotonsillectomy, with revision rate similar to that reported in the literature. Boys are more subjected to procedures than girls. Most ENT procedures performed in this hospital in 2009 were performed by the SUS. This shows the importance of adenotonsillectomy in the daily practice of pediatric ENT, and the weight of this problem among users of SUS is great.

Keywords:

children's hospitals, tonsillectomy, epistaxis, adenoidectomy, child, bronchoscopy.

RESUMO

Introdução:

As cirurgias otorrinolaringológicas são muito comuns dentro das cirurgias pediátricas e os otorrinolaringologistas contam com uma vasta gama de procedimentos cirúrgicos, sendo a adenoamigdalectomia o procedimento mais realizado, seguido pelos otológicos. A complicação mais frequente das adenoamigdalectomias é o sangramento. Apesar de ser a complicação mais temida, apenas uma pequena parcela de pacientes necessita de intervenção cirúrgica para parar o sangramento.

Objetivo:

Avaliar o perfil cirúrgico otorrinolaringológico em hospital pediátrico de Curitiba.

Método:

Estudo Retrospectivo das cirurgias registradas.

Resultados:

Do total de 2020 procedimentos realizados no centro cirúrgico no ano de 2009, 9,26% (187) foram exames e 90,74% (1833) cirurgias, sendo 65,14% (1316) realizadas pelo SUS, 32,47% (656) por convênio e 2,39% (48) particulares. A distribuição quanto ao sexo foi 1106 meninos e 914 meninas. A adenoamigdalectomia com ou sem amigdalectomia correspondeu a 62,5% (1146). Destas, apenas 0,96% (11) foram submetidas à revisão em centro cirúrgico. Em 2º lugar aparecem as cirurgias otológicas, sendo a timpanotomia, com ou sem tubo de ventilação, a mais prevalente.

Conclusão:

Os otorrinolaringologistas têm a possibilidade de realizar diversos tipos de procedimento cirúrgico. A cirurgia otorrinolaringológica mais realizada na faixa etária pediátrica no hospital Pequeno Príncipe é a adenoamigdalectomia, com taxa de revisão similar a encontrada na literatura. Meninos são mais submetidos a procedimentos do que meninas. A maior parte dos procedimentos otorrinolaringológicos realizados nesse hospital no ano de 2009 foram realizados pelo SUS. Isso mostra a importância da cirurgia de adenoamigdalectomia na prática diária do otorrinopediatra, sendo que o peso desse problema entre os usuários do SUS é grande.

Palavras-chave:

hospitais pediátricos, tonsilectomia, epistaxe, adenoidectomia, criança, broncoscopia.

INTRODUCTION

The ENT surgery are very common in the pediatric surgery, adenotonsillectomy is the procedure most often performed by otolaryngologists, followed by otologic procedures. The most common complication is bleeding from tonsillectomies. Despite being the most feared complication, only a small proportion of patients need surgical intervention to stop the bleeding.

The aim of this study is to evaluate the profile of ENT surgery in a tertiary Children's Hospital of Curitiba, Parana, Brazil.

METHOD

We performed a retrospective Table review of patients undergoing surgical procedures in ENT Hospital Infantil Pequeno Príncipe, Curitiba / PR, from 1 January 2009 until December 31, 2009. We analyzed the sex of the patients and there were what surgeries were performed by SUS, by health plans or private. The surgeries were divided into: tonsillectomy, adenoidectomy, adenotonsillectomy, tympanostomy with or without ventilation tube tympanoplasty tympanomastoidectomy, cochlear implant, otoplasty, septoplasty, turbinectomy, sinusotomy, excision of a thyroglossal cyst, excision of branchial fistula, drainage of abscesso, laryngoplasty, laryngeal surgery, a stenosis of the larynx, arytenoidectomy, tracheostomy, tracheostomy closure, correction of choanal atresia, nasal fracture reduction, biopsies, excision of tumor, Zplasty, excision of atrial appendage, dacryocystorhinostomy, a botox, cap posterior nasal, and data were computed on the need for reintervention after the initial surgical procedure.

RESULTS

Of the total of 2020 procedures performed in the operating room in 2009, 9.26% (187) and tests were 90.74% (1833) surgeries, being 65.14% (1316) performed by SUS, 32.47% (656) by covenant and 2.39% (48) individuals. The gender distribution was 1106 boys and 914 girls. Adenoidectomy with or without tonsillectomy was the most performed surgery, accounting for 62.5% (1146) of the surgeries. Of these, only 0.96% (11) underwent revision surgery center. In second place come the otologic surgery, and the tympanostomy, with or without ventilation tube, the most prevalent. Nasal surgery, laryngeal and cervicofacial were also performed, but in smaller numbers.

DISCUSSION

Surgery and ENT procedures are performed much in the pediatric population. The surgeries range from a simple foreign body removal to major cancer surgery. A tonsillectomy is the most common surgery performed by ENT and most frequently performed in pediatric patients. Its most common indications are recurrent tonsillitis, recurrent infection of the upper airways, obstructive sleep apnea (OSA), poor nutrition, and cardiopulmonary changes due to respiratory obstruction.

Among the possible complications of tonsillectomies is the most feared bleeding. This complication is infrequent, with incidence ranging from 0.1 to 1.4% in adenoidectomy and 0.23% to 1.6% in tonsillectomy. The need for surgical intervention is low, only major bleeding sayings that are considered a minority of cases.

There are two types of postoperative bleeding: primary (<24 hours) and secondary (> 24 hours). Both should be observed carefully because of the risk of bleeding exists even be delayed.

In our study we found a wide range of ENT surgical procedures. The surgeries performed in the service, its absolute value and percentage relative to total ENT is in Table 1. The values and percentage of procedures are shown in Table 2.

Our rate of Tonsillectomy with or without adenoidectomy was 62.5% of all surgeries performed by specialists without regard to tests performed in the operating room.

We found a reintervention rate in this type of surgery was 0.96%, being consistent with the literature.

Bleeding after tonsillectomy is often unpredictable, and preventing the most effective way to avoid it. Anamnesis of possible coagulation disorders, surgical technique, and immediate postoperative evaluation are important to avoid unwanted outcomes.

The coverage of the procedures took place, according to Table 1.

CONCLUSION

Hearing experts are able to make various types of surgical procedures, intervening in the oral cavity, hearing aid, phonatory, respiratory beyond the cervical-facial surgery.

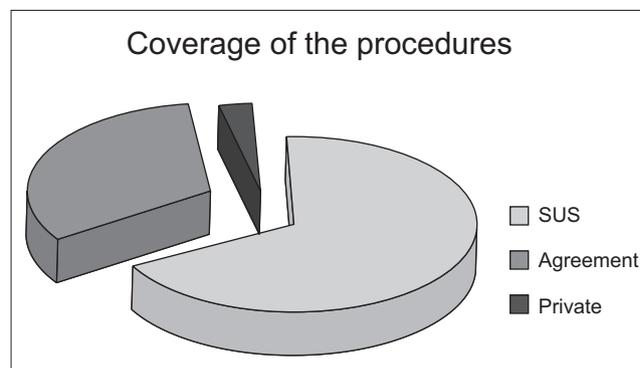
Table 1.

Surgery	Cx Number	Percent
Tonsillectomy	17	0.9277%
Adenoidectomy	280	15.2755%
Adenotonsillectomy	849	46.3175%
Tympanotomy	286	15.6028%
Ventilation Tubes	112	6.1103%
Tympanoplasty	24	1.3093%
Tympanomastoidectomy	15	0.8183%
Cochlear Implant	2	0.1091%
Otoplasty	2	0.1091%
Septoplasty	23	1.2547%
Turbineotomy	78	4.2553%
Sinusotomy	25	1.3638%
Thyroglossal Cyst	1	0.0545%
Frenotomia	14	0.7637%
Drainage of Abscess	8	0.4364%
Laryngoplasty	10	0.5455%
Microcx of Larynx	5	0.2727%
Tracheostomy	6	0.3273%
Choanal atresia	2	0.1091%
Branchial Fistula	1	0.0545%
Biopsy	6	0.3273%
Reduction fx. Nasal	1	0.0545%
Atrial appendage excision	1	0.0545%
Dacryocystorhinostomy	3	0.1636%
Botox	7	0.3818%
Review of A / Ad / A + Ad	11	0.6001%
Revision of tracheotomy	4	0.2124%
Rear Cap	1	0.0545%
Excision of tumor	4	0.2124%
Zetaplasty	1	0.0545%
Removal of Foreign Body	23	1.2547%
Tracheostomy closure of	1	0.0545%
Correction Stenosis of Larynx	7	0.3818%
Arytenoidectomy	1	0.0545%
Withdrawal of drains	2	0.1091%

Table 2.

Exam	Exam N°	Percentage
Nasofibroscopy	92	49.2%
Laryngoscopy	73	39.03%
Fiberoptic	22	11.77%

ENT surgery most commonly performed in pediatric patients at the Hospital Infantil is adenotonsillectomy, with revision rate similar to that reported in the literature. Boys are undergoing more than girls. Most ENT surgery performed at Children's Hospital in 2009 was performed by the SUS.

**Graphic 1.** Coverage of the procedures.

This shows the importance of tonsillectomy in ORL practice daily, and the weight of this problem among users of SUS is great.

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