The renewe interest in the eustachian tube has enriched the practice of otolaryngology and is contributing to our patients’ wellbeing.

It took over a hundred years for Bartolomeus Eustachius’ (circa 1510–1574) work on the tube to be recognised. The work by Valsalva, Toynbee and Politzer in the subsequent three centuries contributed in large measures to our current understanding, and yet the eustachian tube remains an enigma. Eustachian tube dysfunction is an all-encompassing condition that results mostly from pressure regulation impairment, with annoying symptoms of muffled hearing, earache and popping sensation. It remains a diagnostic and operational challenge.

In the current issue of The Journal of Laryngology & Otology, MacKeith and Bottrill report their experience on the effectiveness of polydimethylsiloxane elastomer augmentation surgery in the management of a patulous eustachian tube, a condition that causes autophony to voice and respiration. Previous papers include the first published description of using a computed tomography guided, transcutaneous approach to treat refractory autophony in a patient with a patulous eustachian tube. 

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