Diagnostic Dilemmas of CSOM (R766)

ID: 766.1

Diagnosis and Treatment Strategy of Necrotizing Otitis Externa

Presenting Author: Takashi Nakagawa

Takashi Nakagawa
Kyushu University Graduate School of Medical Sciences

Learning Objectives: Although necrotizing otitis externa is a life-threatening disease, it is difficult to be diagnosed and treated. Several points for diagnosis and the results of treatment would be reported.

Necrotizing otitis externa is osteomyelitis of skull base originated from the floor of external auditory canal. Most of them are optimizing infection, mainly DM. Main pathogen is Pseudomonas Aeruginosa. Although clinical features are clear, it is difficult to reach a correct diagnosis. Symptoms are sometimes masked by anti-biotics and analgesic drug. Severe pain, patient background such as DM, and granulation formation could be clue for suspicion. Both CT and MRI are useful for diagnosis and estimation for the extent of disease. Biopsy leads to definite diagnosis. First ling of treatment is conservative approach. Appropriate antibiotics should be chosen and patient background disease would be controlled. Surgical intervention is useful when well-pneumatized mastoid is infected.

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Pathogenesis and diagnosis of Otitis media with ANCA-associated vasculitis (OMAAV)

Presenting Author: Naohiro Yoshida

Naohiro Yoshida
Jichi Medical University Saitama Medical Center

Learning Objectives: Antineutrophil cytoplasmic antibody (ANCA)-associated vasculitis (AAV) is histologically characterized by systemic necrotizing vasculitis and is clinically classified into two phases, systemic or localized. Recently, otological symptoms such as otitis media and hearing loss, not previously often associated with AAV, have been reported in AAV cases. Delayed diagnosis of AAV occasionally leads to progression to the irreversible phase; therefore, diagnosis at the early-localized stage is important for treating AAV. In this session, the current understanding of this newly proposed concept of OMAAV is discussed.

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Diagnostic Dilemmas of CSOM (R766)

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Clinical characteristics and diagnostic criteria of eosinophilic otitis media

Presenting Author: Yukiko Iino

Yukiko Iino1, Yoshihiko Esu2, Hiromi Kanazawa2, Naohiro Yoshida2
1Tokyo Kita Medical Center, 2Jichi Medical University Saitama Medical Center

Learning Objectives:

Introduction: Eosinophilic otitis media (EOM) is an intractable otitis media characterized by the presence of a highly viscous yellow effusion containing eosinophils. It mainly occurs in patients with bronchial asthma and is resistant to conventional treatments for otitis media.

Methods: We reviewed 183 patients with EOM and 134 age-matched patients with common type of otitis media to analyze their clinical characteristics and to make diagnostic criteria of EOM.

Results: EOM predominantly affects females and occurs most often in patients in their 50s. EOM is often complicated by rhinosinusitis and nasal polyposis, which is called...