

Functional Endoscopic Sinus Surgery (Fess)

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Objective: To evaluate our experience with functional endoscopic sinus surgery since its introduction in our department in 1997 and compare our results with other studies in the International literature.

Setting: ENT ward, King Fahd Hospital of the University.

Design: A prospective-retrospective study.

Method: One hundred seventy-two patients admitted to surgical management between 1998-2004. History followed by ENT-examination, pre-operative work up included a complete allergy investigation, in addition to CT, MRI, MRA (Magnetic Resonance Angiogram) and Angiography were performed. Improvement was assessed using subjective and objective scales. All patients underwent FESS-treatment. Postoperatively, the patients were provided with special pharmacotherapy and postoperative care through regular clinic check ups.

Results: One hundred seventy-two patients (110 males, 48 females, 14 paediatrics) diagnosed as nasal polyposis underwent 246 FESS procedures. CTs were classified according to Lund-Mackay system. Their major complaints were nasal obstruction due to bilateral or unilateral nasal polyposis, 62% of them had either allergic rhinitis (AR) or allergic fungal sinusitis (AFS) as primary disease. Postoperative improvement was good. The majority had a prior surgical intervention in the form of polypectomies or FESS. We had few major and minor complications. All patients had reasonable postoperative medications and follow up.

Conclusion: FESS is an effective surgical modality in treating nasal polyp and is accepted as the gold standard treatment for nasal polyposis. The patients' symptoms either improved or become disease free. We have encountered few complications. AR and AFS are the major causes for nasal polyposis in our society. CT is the best diagnostic tool pre-operatively. Postoperative medications and follow up influenced markedly the outcomes.

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