

МЕДИЦИНА, ПЕДАГОГИКА И ТЕХНОЛОГИЯ: ТЕОРИЯ И ПРАКТИКА

Том 2, Выпуск 2, 29 Февраля

MODERN EXAMINATION METHODS AND PRINCIPLES OF TREATMENT OF ACUTE SINUSITIS DISEASES

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Abstract: In this article, special attention is paid to clarifying the signs observed in acute and chronic inflammation of the nasal cavity, important diagnostic factors in diagnosis and modern principles of treatment.

Key words: sinusitis, frontitis, ethmoiditis, sphenoiditis, rhinoscopy, radiography, computer tomography, sinusotomy, frontotomy (trepanopuncture), ethmoidotomy.

Paranasal sinusitis is an inflammation of the nasal cavity and is the most common of all ENT diseases. Humans have 4 pairs of sinuses, some of which are located in pairs: frontal sinuses, maxillary sinuses, sphenoid sinuses, and ethmoid sinuses. Since they are all connected to the main nasal cavity, inflammation can spread to several paranasal sinuses. Pansinusitis occurs when inflammation spreads to all sinuses. The causative agents of sinusitis are mainly viruses (influenza,

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adenoviruses, rhinoviruses) and microbes - staphylococci, streptococci, diplococci, etc. The following factors create conditions for the development of inflammation:

- Chronic diseases of the nasal mucosa (hyperplastic and atrophic rhinitis)
- Slanting of the nasal septum
- Tumors of the nasal cavity
- Diseases of teeth of the 4th-7th order in the upper jaw

Typical symptoms of sinusitis and pansinusitis:

- Nasal congestion, runny nose and loss of smell
- Feeling of pressure on the face (especially around the nose, eyes, forehead and teeth) that increases when bending forward
- Pressure and pain in the ear
- Fever
- Bad breath or bad taste in the mouth
- Cough
- Headache, fatigue

Patients suffering from diseases of paranasal sinuses undergo the following examinations:

- Analysis of patient complaints and anamnesis data;
- General clinical and biochemical analyses, otorhinolaryngological examination (frontal and posterior rhinoscopy, examination of the function of the nasal and paranasal cavities);
- Bacteriological and virological, allergological examination of cavity separation;
- Endoscopic examination (endophotography), if necessary, sinusoscopy;
- Biopsy and cytological examination (according to the instructions);
- X-ray examination of the adjacent nasal cavities, including using a contrast agent;
- Computed tomography (CT), magnetic resonance imaging (MRT) (when necessary);
- Diagnostic (treatment) probing of the forehead, forehead and upper jaw cavities;
- Piercing the upper jaw for diagnostic purposes (according to the instructions).

Modern endoscopy and endophotographic examinations allow to examine the complex structures of the nose and paranasal cavities. Rigid and flexible optical

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instruments with different viewing angles (endoscope, fiberscope and microscope) are used in practice. Such examinations help to detect early pathological changes and inflammatory processes that are not visible in normal examinations of the nose and nasal cavities.

Treatment

Uncomplicated acute sinusitis is usually treated conservatively. The patient is prescribed antibiotic therapy (augmentin, amoxicillin, ampicillin, cefazolin, seporin, klaforan, kefzol, doxycycline, erythromycin, rulid, sumamed, oleandomycin). If one antibiotic does not give a positive result within 72 hours, then another antibiotic is additionally prescribed. Treatment is continued for 10-12 days. In addition, antihistamine drugs (suprastin, pipolfen, tavegil) are prescribed in order to reduce the swelling of the nasal and paranasal cavities and to improve the discharge of pus, drops that constrict blood vessels in the nasal cavity (3% ephedrine, 0.1% sanorin, 0.05-0.1% galazolin, 0.05-0.1% naphthizine) are dripped. It is useful to spray complex endonasal sprays (Rinofluimucil, Isofra) containing secretolytic, antibiotic and painkilling drugs into the nasal cavity. After the release of purulent discharge from the adjacent nasal cavities eases, the patient is prescribed heating procedures. When microwave therapy is performed by contact method using the LUCH-2 device, the tissues are better heated and the treatment gives a positive result. In addition, it is recommended to warm the area of the nasal cavity with UVCh (8-12 treatments), KUF (6-8 treatments), UBN, inductothermy, laser therapy, ultrasound therapy, Solux or blue lamp. All the general and local treatment measures mentioned above are used in acute sinusitis, frontitis, ethmoiditis and sphenoiditis.

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