

Tympanoplasty with Soft Posterior Meatal Wall Reconstruction - Changing the Way of Thinking for Prevention of Retraction Cholesteatoma Recurrence. [Japanese]

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Abstract:

There has been serious controversy regarding the choice of surgical methods for ears with cholesteatoma. I began to perform tympanoplasty with reconstruction of the soft posterior meatal wall for the prevention of postoperative retraction pocket formation in 1989. Our method is characterized by the reconstruction of the soft posterior meatal wall, non-obliteration with permanent or temporary materials, no use of a Palva flap and the use of fibrin glue for attaching the fascia to the posterior meatal skin. None of the patients experienced postoperative narrow-neck retraction pocket formation, and whenever aeration of the middle ear was disturbed, a balloon-like retraction was observed. In this report I discuss the advantages and disadvantages of various tympanoplasty methods in comparison with our method based on the requirements for treatment of cholesteatoma. All other methods of tympanoplasty with canal wall up or canal reconstruction are performed based on the idea of fortification of the posterior meatal wall for prevention of retraction pocket recurrence. I changed this way of thinking and as a result could avoid retraction pocket formation. What I would like to present here is not the material for posterior meatal wall reconstruction but a new way of thinking for prevention of cholesteatoma.