

EDITORIAL

Rhinology, my point of view

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If someone takes the dictionary to find the definition of Rhinology, he will find that it is a subspecialty of medicine that deals with the pathology of the nose and the sinuses. As we all know, it is one of the three branches of otorhinolaryngology or ENT. Otorhinolaryngology is a complex specialty that covers an extremely broad field concerning the evaluation, management and treatment of the diseases of the nose, ears, larynx and the related structures of the head and neck. ENT specialists are called to treat a wide variety of disorders in patients of all ages such as thyroid disorders, salivary gland disorders, hearing and balance disorders, voice and swallowing disorders, cancers of the head and neck, sleep disorders, sino-nasal disorders. The American Academy of Otolaryngology states that ENT is the oldest specialty in the United States. Being such a complex and eclectic specialty, Otorhinolaryngology has multiple subspecialties emerging. These are: otology and neurotology, head and neck oncologic surgery, laryngology and voice disorder, facial plastic and reconstructive surgery, paediatric otolaryngology and sleep disorders. The American Board of Medical Subspecialties recognizes "Rhinology and Sinus Surgery" as a subspecialty of the ENT involved in treating patients with sinusitis, allergy, apnea and snoring and anterior skull base surgery.

In my opinion, it is somehow unfair for such an important subspecialty to be forgotten and missed in the name of the specialty, which is also known as Otolaryngology without the "rhino". I must emphasize the fact that in Romania we use always the whole name of the specialty "Otorinolaringologie".

I have been trained as a specialist in the nineties, immediately after the Romanian Revolution

and looking back now I realised I have witnessed extraordinary changes in the whole specialty and especially in the rhinology field. I could say that it has been a real revolution in our specialty, too.

Technical advances practically changed the specialty as I learned it in that period.

First of all, there was little literature and it was still difficult to access information, especially foreign books, and this was really frustrating for a resident or a young specialist.

The hospitals did not have medical equipment, and all the examinations were performed using the frontal mirror. In that period, I attended the presentation of an ENT specialist from the United States and I was amazed by the fact that he said he was using only CT scans for the imagistic evaluation of the patients with rhinosinusal disorders and that he considers this evaluation mandatory. All we had back then was the conventional sinus radiography. I thought he was only trying to impress the audience. Endoscopic surgery was not yet available in Romania in that period.

Nowadays, things have changed and improved dramatically.

Internet is accessible and accessed and this changed the face of the world. Information is easily attainable this way. This fact changed the problems specialists are facing. It is not the lack of information; the problem now is the abundance of information. There is a need to organize correctly, to synthesise. There are trustworthy sources and also there is biased information and it is sometimes difficult to discern. Another problem is the fact that patients can easily access medical information, and this modified the relationship of the patient with the disease and also the doctor-patient relationship.

Specialists from our country can travel abroad, can visit other clinics, can exchange information and experience in congresses, can also easily contact specialists from other countries and all of this expanded our total knowledge.

Nowadays, the CT and MRI are available all over Romania, maybe not as much as needed, but we can access this kind of imagistic evaluation in all the big medical centres. We cannot imagine initiating a sinus surgery without a prior CT evaluation and now I fully understand that the specialist I saw back in the '90s was honest and trying to share information, not to impress.

The diagnosis of the rhinosinusal disorders was facilitated by the introduction of endoscopic equipment in Romanian hospitals and offices. From this point on, things only evolved in this direction. In the present day, a big part of ENT offices can use endoscopy as a diagnostic tool. The university hospitals which are training residents are equipped with endoscopes (rigid or flexible). The problem that derived from this situation is the fact that residents are almost not accustomed to diagnosing rhinosinusal and especially laryngological pathology without the use of endoscopes.

The first endoscopic sinus surgery was performed in Romania in the '90s. It was a big step ahead for the Romanian Rhinology. From this point to the skull base surgery it was just a natural evolution. The first endoscopic hypophyseal adenoma ablation was performed by a mixed team otorhinolaryngologist - neurosurgeon, with dr. Codrut Sarafoleanu. Advances were made in the lacrimal pathways' pathology and skull base surgery. Neuro-navigation facilitated the approach to this area.

Lately, we seldom perform classic sinus surgery interventions, such as Caldwell-Luc procedure, and even do not puncture the maxillary sinus anymore.

The indications for different interventions changed profoundly.

Nowadays, there are many centres in Romania where endoscopic rhinosinusal surgery is being performed successfully and this is a fact of a major importance, beneficial for the Romanian population and the Romanian medicine. Medicine in general changed profoundly in the last 30 years and rhinology is perhaps more rapidly progressing than other domains.

A big step forward for the rhinology in our country was the foundation of the Romanian Rhinologic Society. The Society organizes scientific meetings, conferences, congresses and courses that aligns the Romanian Rhinology to the standards and directions of modern medicine. The Romanian Journal of Rhinology is a dynamic publication that increases its importance issue by issue, contributing to the development of the specialty.

What next? What will be the direction of the Romanian Rhinology?

The future trends in rhinology in general seem to be biological treatment in chronic rhinosinusitis with polyps, navigation systems for sinus surgery, drug eluting balloons, robotic surgery. These are the trends in the world, but I am confident that these are also the trends for the Romanian rhinology.

Rhinology is not only reduced to deviated septum surgery, removal of nasal polyps, maxillary sinus surgery through canine fossa or local trauma treatment. Rhinology is also skull base surgery, lacrimal pathways, orbit. Rhinology is about new surgical techniques and approaches that incorporate state of the art technologies, endoscopy, radiology, microsurgery. And it seems that there is more to come.

In conclusion, rhinology is a fascinating specialty with a fantastic development in the last decades.
