

(Letter to the Editor regarding the article “The Management of Tympanic Membrane Perforation With Endoscopic Type I Tympanoplasty” by Daniele Marchioni, Luca Gazzini, Stefano De Rossi, Flavia Di Maro, Luca Sacchetto, Marco Carner and Luca Bianconi)

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The authors disclose no conflicts of interest.

DOI: 10.1097/MAO.0000000000002815

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AUTHORS’ REPLY TO THE LETTER TO THE EDITOR: “ENDOSCOPIC TYMPANOPLASTY IN THE TREATMENT OF CHRONIC OTITIS MEDIA” A COMMENT TO THE ARTICLE: “THE MANAGEMENT OF TYMPANIC MEMBRANE PERFORATION WITH ENDOSCOPIC TYPE I TYMPANOPLASTY”

In Reply: We congratulate with the authors for their relevant study on endoscopic treatment of inflammatory

disease of the middle ear. In the considered study, the introduction of the endoscopic ear surgery led to a significant reduction of residual cholesteatoma at the second look surgery as well as an increase of the overall transcanalar procedures.

Those results are consistent with our experience (1).

We are aware that the endoscopic ear surgery is a relatively new technique, yet there are data which only refers to the last 15 years, while the microscopic techniques have been used for decades. However, according to the studies with a longer time of follow-up, the endoscopic approach to middle ear pathologies provides recurrence and residual outcomes comparable to microscopic approach with reduction of operative time, in many cases no need of mastoidectomy or posterior tympanotomy and better cosmetic outcome (1,2).

In our opinion the exclusive endoscopic technique and the combined endoscopic technique are gaining importance and being used more and more all over the world and, in the future, it will be the most used approach for the treatment of middle ear cholesteatoma. Nevertheless, further studies with a longer time of follow-up are needed to confirm the endoscopic approach as the gold standard in the treatment of middle ear pathologies.

Regarding the management of tympanic membrane perforation, the transcanal exclusive endoscopic technique is currently the only technique used in our clinic and nowadays already represents an alternative to the microscopic retroauricular approach. In the authors’ opinion this approach will be soon the gold standard for the treatment of tympanic perforations (3).

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DOI: 10.1097/MAO.0000000000002814

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