

# REPORT OF THE 6<sup>TH</sup> EMIRATES OTORHINOLARYNGOLOGY AND COMMUNICATION DISORDERS CONGRESS, 13–15 JANUARY 2016, DUBAI, UNITED ARAB EMIRATES

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The 6<sup>th</sup> Emirates Otorhinolaryngology and Communication Disorders Congress took place on 13–15 January 2016 in Dubai. It was organized with the cooperation of the American Academy of Otolaryngology Head and Neck Surgery. Apart from local representatives from the world of laryngology, there were also guests from Europe and the United States. The World Hearing Center of the Institute of Physiology and Pathology of Hearing was represented by Ass. Prof. Piotr Skarzynski, Bartłomiej Krol MD, and Andrzej Pastuszak MD.

The Congress was divided into three main simultaneous sessions: rhinology, otology, and audio-vestibular disorders. Innovations in otolaryngology as well as communication and swallowing disorders were discussed separately. Lecturers from abroad were in the same sessions as local ones.

Dr Hans Rudolf Briner (Medical Faculty of the University of Zurich, Switzerland) gave lectures in the rhinological session, and one of them concerned the anatomy of the paranasal sinuses. He outlined key anatomical landmarks in endoscopic sinus surgery. Good knowledge of anatomy allows the surgeon to navigate well and prevents mistakes. A follow-on to this lecture covered practical anatomy in surgery of the posterior ethmoid and sphenoidal sinus.

Prof. Peter Wormald (University of Adelaide, Australia) presented the current view on the pathogenesis of chronic sinusitis and the associated role of biofilms. He emphasized that there is a lot yet to be explained about the pathophysiology of this disease. In another lecture on the topical treatment of chronic sinusitis, he stressed that endoscopic surgery of the sinuses should be treated as a preliminary treatment until new methods of treatment are developed.

Other interesting lectures on the sinuses concerned a CSF leak as a consequence of endoscopic surgery. Lecturers from India and Egypt gave results obtained from sinus surgeries of patients and outlined the risk of a CSF leak in surgery of both the frontal sinus and sphenoidal sinus. They emphasized that in some cases of CSF leak, a neurosurgeon's help and cooperation is necessary, and that if the CSF leak is properly treated it bodes well.

During the session on otology, very interesting lectures were delivered. Dr James Saunders, USA, presented perspectives in the treatment of sudden hearing loss. This

disease is treated differently in each country, depending on the available tools. Nobody, however, questioned the role of steroids, regardless of the way they are administered. Dr Ashes Bhumkar, India, shared his experience of external ear reconstruction. A surgeon from a Middle Eastern country listed complications that can occur after stapedotomy. In this region, postoperative complications occur more often than in Europe and the consequences are more dangerous. Some lectures concerned the treatment of cholesteatoma or ossiculoplasty, providing a training perspective rather than a research-oriented one.

On the second day, the major subjects were cochlear and bone conduction implants. Lecturers described the newest available devices, their advantages, and case studies. Examples of patients followed up after several months or several years were given. Two round-table panels gave an opportunity to discuss the newest trends in the treatment of otosclerosis and cochlear implants. Prof. Sprinzl, Innsbruck, Austria, discussed implantation in children. Bone conduction implants are best for cases of congenital hearing loss, but the problem is cochlear implantation in children with unilateral hearing loss. Despite many potential benefits from a CI, children are a special group of patients. For them the opinion of peers and aesthetics are of utmost importance. Moreover, most children with a unilateral hearing loss develop normally using only one working ear.

Dr Heidi Olze, Germany, tried to assess at what age cochlear implantation in older people is warranted. When there are no neurological deficits or general abnormalities, the age of the patient does not seem to be a barrier for cochlear implantation.

Some lectures were about surgical techniques: treatments for partial deafness, the use, depending on ear conditions, of couplers when the Vibrant Soundbridge is implanted, and bone conduction implants. These subjects are especially popular in Europe and this augurs well for further development of this field of laryngology.

From lectures delivered by the team from the World Hearing Center, the presentation of Ass. Prof. Piotr Skarzynski, which concerned hearing screening tests in school-age children from three continents (Asia, Africa, and Europe) attracted the greatest attention. The audience was surprised at the scale of this endeavour, its organization, and the number of results. Questions were asked about the possibilities

for doing hearing screening tests in additional countries, perspectives for the future, and potential sources of funding. Another presentation conveyed the results of implantation of a Nucleus CI422 in children with high-frequency hearing loss. Ass. Prof. Piotr H. Skarzynski stressed that in this group of patients, cochlear implantation can preserve residual hearing provided the proper surgical techniques are followed (the round window approach) and the surgeon is well-experienced. Additionally, for good results, proper intra- and postsurgical care is necessary. Among other factors, the correct dose of steroids is necessary.

After results on implantation of the BAHA Attract device were presented, the audience was prompted to think about how to deal with slackness of the skin and injury caused by long-time implant usage.

In his lecture on Bonebridge implants, Bartłomiej Krol related a number of good outcomes. He stressed how

important it is that the implant is surrounded by bone on each side and that it has no direct contact with the meninx.

The benefits from Vibrant Soundbridge implantation on the window were described by Andrzej Pastuszek. This surgical procedure can be performed even when the ossicles are substantially damaged. Direct stimulation of the window generally ensures good results.

After the series of lectures from the Institute were delivered, the presenters were asked many questions. The audience was impressed with the large number of patients and the good outcomes, evidence that the Institute is one of the world leaders in implantable devices.

The Dubai conference was an excellent opportunity to exchange experiences, present achievements, and compare the levels of ENT treatment in the Middle East with those in Europe and America.