

알레르기 비염의 수술적 치료

Surgical Management of Allergic Rhinitis

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Abstract

The prevalence of allergic rhinitis is nowadays increasing with industrial development. Patients with allergic rhinitis have symptoms such as nasal obstruction, watery rhinorrhea, sneezing and are frequently associated with sleep apnea, asthma and sinusitis. In patients with allergic rhinitis, conservative management including medical treatment, avoidance and immunotherapy are generally enough for controlling symptoms, but some patients refractory to conservative management need surgical management to improve nasal patency and decrease allergic response, which is inhibited by scarring of lamina propria after turbinate surgery. Surgical management include chemical cautery, laser cautery, cryotherapy, radiofrequency needle ablation, surgical resection of turbinate, vidian neurectomy and sinus surgery. Cautery of turbinate by laser and radiofrequency electrode is widely used because of its low morbidity and efficacy against vasomotor symptoms. Submucosal resection of turbinate and turbinopalsty improves nasal patency preserving mucociliary function. In addition, when it is combined with submucosal cautery, allergic response is inhibited more effectively. In conclusion, surgical management may be required for the treatment of allergic rhinitis which is refractory to conservative management or has anatomical abnormality.

Keywords : Allergic rhinitis; Surgical management

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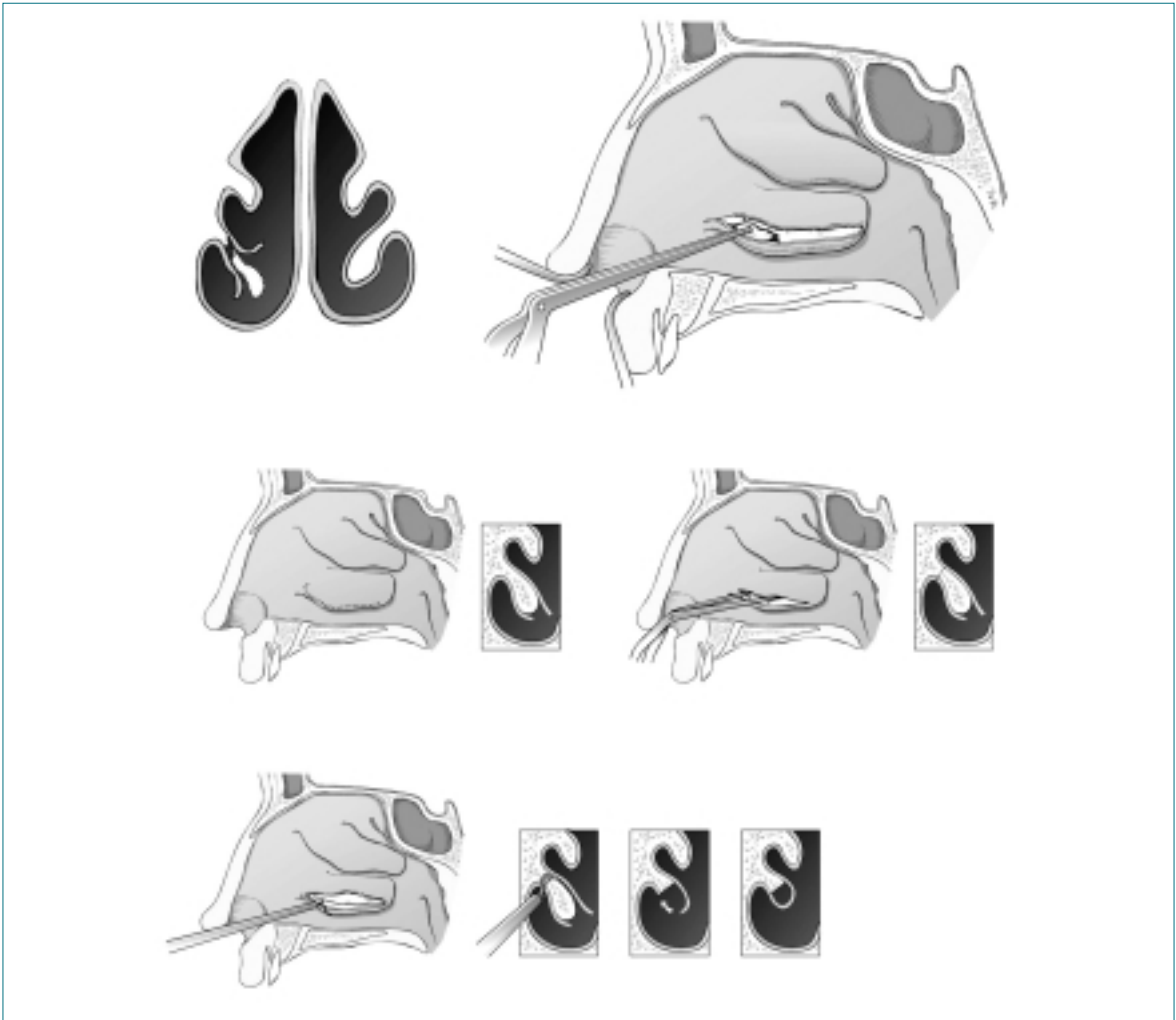
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