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Surgery: Case Reports

3rd WORLD CONGRESS ON

OTOLARYNGOLOGY - HEAD AND NECK SURGERY

MAY 19, 2022 | WEBINAR



Hosting Organization: Pulsus

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Scientific Program

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Opening Ceremony

09:00-09:15

May 19, 2022 | Webinar

Sessions on: Otolaryngology | Otology and Neurotology | Pediatric ENT | Ear Disorders

Session Introduction

09:15-09:45 Title: The impact of thyroid tumor features on lymph node metastasis in papillary thyroid carcinoma patients in head and neck department at KAMC: A retrospective cross-Sectional study

Mohammad A. Alessa | King Abdullah Medical City | Saudi Arabia

09:45-10:15 Title: Prophylactic central neck dissection for clinically node-Negative papillary thyroid carcinoma

Sherif K. Abdelmoni | Ain Shams University | Egypt

10:15-11:45 Title: Management of foreign body bronchus in Sudanese patients

Sharfi Ahmed | Omdurman Islamic University | Sudan

11:45-12:15 Title: The effect of platelet rich fibrin membrane in surgical therapy of medication related osteonecrosis of the jaw

Szofia Szentpeteri | Semmelweis University | Hungary

Refreshment Break 12:15-12:30

Panel Discussion

Sessions on: Ear Surgery and Myringotomy | Head, Neck and Oral Oncology | Oral Immunology- Pathophysiology

12:30-13:00 Title: The usage of pedicle to cover forehead defects in two-stage forehead flap nasal squamous cell carcinoma reconstruction

Hasan Rizky Benokri | Public Health and Nursing Universitas Gadjah Mada/Dr. Sardjito General Hospital | Indonesia

13:00-13:30 Title: The ability of carbon dioxide–Derived indices to predict adverse outcome after cardiac surgery

Hichem Kolsi | Habib Bourguiba University Hospital | Tunisia

13:30-14:00 Title: Foreign body aspiration in single center

Alireza Malekzadegan | Zabol university of medical Sciences | Iran

Thanks Giving & Closing Ceremony



Supporting Journals

Supporting Journals

Surgery: Case Reports

Otolaryngology Online Journal

Biology & Medicine Case Reports

3rd World Congress on Otolaryngology - Head and Neck Surgery

May 19, 2022 | Webinar



Scientific Tracks & Abstracts

Sessions

Otolaryngology - Otolaryngology | Otology and Neurotology | Pediatric ENT | Ear Disorders | Ear Surgery and Myringotomy | Head, Neck and Oral Oncology | Oral Immunology- Pathophysiology

Session Introduction

Title: **The impact of thyroid tumor features on lymph node metastasis in papillary thyroid carcinoma patients in head and neck department at KAMC: A retrospective cross-Sectional study**

Mohammad A. Alessa | King Abdullah Medical City | Saudi Arabia

Title: **Prophylactic central neck dissection for clinically node-Negative papillary thyroid carcinoma**

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The impact of thyroid tumor features on lymph node metastasis in papillary thyroid carcinoma patients in head and neck department at KAMC: A retrospective cross-Sectional study

Mohammad A. Alessa[1], Haddad H. Alkaf[2], Amjad O. Aljohani[2], Reyan H. Merdad[3], Anas I. Alserif[4], Layan S. Alhemayed[5], Noor Z. Farsi[5], Thamer A. Alsufyani[6], Ameen Z. Alherabi[7] and Sherif K. Abdelmoni[8]

Yunus Emre State Hospital, Turkey

Introduction: Papillary thyroid carcinoma (PTC) is the most prevalent type of thyroid cancer. It is one of the most common types of malignancy of the thyroid that spreads to cervical lymph nodes. Lymph node metastasis (LNM) is an important factor when determining recurrence risk and determining the extent of lymph node involvement can guide treatment. Our main objective is to evaluate the association between the size of the tumor and the number of lymph node metastases in patients with PTC.

Methods: We conducted an electronic retrospective chart review of 125 patients with PTC followed in the Head and Neck Department at KAMC from 2009 to 2020. Twenty-two patients included in our study were pathologically and clinically diagnosed and confirmed to have LNM of PTC.

Results: The study included 22 PTC patients who had undergone lymph node dissections. Patients had a median age of 38.8 years (IQR = 32.2–54.5) and the median tumor size was 20.5 mm. The most commonly affected level of the neck was IV (76.2%). Distant metastasis M1 was seen in only two patients (9.1%).

Tumors sizes >30mm (75%) had ≥5 LNM. Most cases were the classic subtype PTC. For the site of the tumor, the site had a significant impact on the number of LNM ($p = 0.004$). Multifocality had a high impact on LNM ($p = 0.019$).

Conclusions: This study showed no association between the size of PTC and the number of LNMs. The bilaterality of PTC was significantly associated with a high number of LNMs.

Recent Publications

1. Rare presentation of metastatic renal cell carcinoma to thyroid gland: A case report
2. Thyroid neoplasm in Makkah region, Saudi Arabia. A retrospective epidemiological study
3. Reconstruction of facial dermatofibrosarcoma protuberans using an anterolateral thigh flap: a case report and literature review

Biography

He is currently working as a assistant executive director of patient affairs at king saud university - Medical city (king khalid university hospital) and he also worked as a hospital executive administrator at prince faisal ben fahad sports medicine hospital, Riyadh, Saudi Arabia.

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Prophylactic central neck dissection for clinically node-Negative papillary thyroid carcinoma

Sherif K. Abdelmoni[1], Mohammad A. Alessa[2], Haddad H. Alkaf[8], Amjad O. Aljohani[3], Reyan H. Merdad[4], Anas I. Alserif[5], Layan S. Alhemayed[6], Noor Z. Farsi6, Thamer A. Alsufyani[7] and Ameen Z. Alherabi[8]

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[2]King Abdullah Medical City, Saudi Arabia
[3]Al-Farabi Private College for Dentistry and Nursing, Saudi Arabia
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We performed a systematic review and meta-analysis of randomized controlled trials (RCTs) that scrutinized the oncological benefits and postsurgical complications of total thyroidectomy (TT) plus prophylactic central neck dissection (pCND) versus TT alone among clinically node-negative (cN0) papillary thyroid cancer (PTC) patients. Methods: We screened five databases from inception to September 4, 2021 and evaluated the risk of bias of the eligible studies. We pooled dichotomous outcomes using the risk ratio (RR) with 95% confidence interval (CI). Results: Overall, we included 5 RCTs with low risk of bias comprising 795 patients (TT plus pCND = 410 and TT alone = 385). With regard to efficacy endpoint, the rate of structural loco-regional recurrence did not significantly differ between both groups (n =4RCTs,RR= 0.49, 95% CI [0.19, 1.27], P = .14). With regard to safety endpoints, the rates of hypoparathyroidism (n = 5 RCTs, RR = 1.48, 95% CI [0.73, 2.97], P = .27), recurrent laryngeal nerve injury (n = 5RCTs,RR= 1.34, 95% CI [0.59, 3.03], P =.48) and bleeding (n = 3RCTs,RR= 1.75, 95% CI [0.42, 7.26], P = .44) did not significantly differ between both groups. Conclusion: For cN0 PTC patients, there was no significant difference between TT plus pCND and TT alone with regard to the rate of structural loco-regional recurrence or frequency of postsurgical complications. Adaptation of pCND in cN0 PTC patients should be contemplated by taking into consideration the clinical oncological benefits and rate of postsurgical adverse events. Key Words: Prophylactic central neck dissection, total thyroidectomy, papillary thyroid cancer, randomized controlled trials, meta-analysis. Level of Evidence: 1

Recent Publications

1. Validity and Reliability of an Arabic Version of MD Anderson Dysphagia Inventory (MDADI)
2. The impact of thyroid tumor features on lymph node metastasis in papillary thyroid carcinoma patients in head and neck department at KAMC: A retrospective cross-sectional study
3. Left Thyroid Agenesis Case Study Case Report

Biography

Sherif K Abdelmonim is currently working in the Ain Shams University, Egypt.

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Management of foreign body bronchus in Sudanese patients

Sharfi Ahmed

Omdurman Islamic University, Sudan

Background: Inhalation of foreign bodies (FBs) is a common problem in Sudanese children. Its incidence has not changed significantly but the safety of removal has improved dramatically.

Methodology: This is a Prospective study conducted Sudan , using rigid bronchoscopy in Sudanese children who had inhaled foreign bodies (FBs).

Result: A total of 50 bronchoscopies was performed: 28 cases (56%) were below 2 years of age;15 cases(30%) were between 2-5 years ;and 7 cases (14%) were over 5 years of age .

In 29 cases (58%) the foreign bodies inhalations (F.Bs) were rounded smooth plastic objects (soksokah) and in 9 cases (18%) were rounded smooth metallic(Jolah) and most of the FBs were found in children under 5 years of age. Most of the FBs (82.7%) were radioactive showing clear X-ray findings. Most of the bronchoscopy (80%) was done as an elective procedure. All the FBs were successfully removed (100%). Overall the mortality was 0%.

Conclusion: This new technique (Sharfi's technique) is effective, safe, has no complication and is time preserving for removal of this kind of inhaled foreign bodies. It was started by introducing the rigid bronchoscope and identifying the F.B and focusing the hole of the F.B , the forceps was inserted in the channel of the rigid bronchoscope then directly and its tip inserted into the hole of the F.B. After the tip (leavers) of the forceps had passed completely through the hole, the forceps tip then will be opened and pulled out together with the F.B and the bronchoscope.

Keywords: Foreign bodies inhalation (FBs), Bronchoscopy, Rigid bronchoscopy.

Recent Publications

1. Yagi-H.F.B in the tracheobronchial tree in Sudanese patients:J-R-Coll-Surg-Edinb-1997;42(4);235-7.
2. Elmustafa O M.Bronchial F.B in Sudanese children. Arab Board of medical specializations J. (1999); 21-3.
3. Alan DM, Eileen MM, laurenDM. F.B of the airway and esophagus Cumming paediatric otolaryngology. 1999; 24/06/1424-02/11.
4. Evans J.N.G. F.B in larynx and trachea; Scott. Brown Pediatric otolaryngology.v6.(1999/25/1-11.6

Biography

Sharfi Ahmed, Faculty of medicine and health sciences, omdurman islamic university, Sudan.

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The effect of platelet rich fibrin membrane in surgical therapy of medication related osteonecrosis of the jaw

Szofia Szentpeteri and Mihaly Vaszilko

Semmelweis University, Hungary

Medication-related osteonecrosis of the jaw (MRONJ) is a side effect of antiresorptive and antiangiogenic therapies, which are used in the treatment of oncologic diseases and osteoporosis. In cases of MRONJ recovery occurs only in around 80% of the cases and the frequency of recurrence is high. Aim: We examined the effect of the membranous form of Platelet Rich Fibrin (PRF) on patients suffering from MRONJ. Materials and methods: Those patients were included in our study, which underwent an operation because of 2nd and 3rd stage MRONJ. Diagnosis of medication-related osteonecrosis of the jaw was based on the 2009 and 2014 recommendations of the American Association of Oral and Maxillofacial Surgeons. Based on the duration of the treatment, we divided our patients in two groups. Patients in the 1st group (Gr1) underwent traditional surgical therapy between 2009 and 2014. Patients who underwent Platelet Rich Fibrin membrane supplemented operations between 2015 and 2017 were included in the 2nd group (Gr2). Outcomes were assessed based on patient recovery, stage improvement and relapse rate. The follow-up period was minimum 1-year in every case. Results: 101 patients were included in our study, Gr1 had 73 patients and Gr2 had 28 patients. In Gr1 recovery was detected in 38 cases (58.46%). In Gr2 wound healing was seen in 23 cases (82.14%). After surgical treatment in Gr1 stage improvement was found in 54 cases (77.14%). In Gr2 stage improvement was seen in 100% of cases. In Gr1 25 patients (65.78%) relapsed. In Gr2 recurrence occurred in 5 cases (21.73%). Gr2 results were significantly better than those in Gr1: recovery (p=0.022), stage improvement p=0.005), relapse rate (p=0.000). Conclusion: In our study PRF membrane-supplemented surgical therapy significantly increased stage improvement and healing rates, as well as significantly decreased relapse rates during the investigated follow-up period.



Figure 1: Steps of the operation in PRF membrane-supplemented surgical therapy

Recent Publications

1. Szentpeteri Sz, Schmidt L, Restar L, Csaki G, Szabo Gy, Vaszilko M (2020) The effect of platelet rich fibrin membrane in surgerical therapy of medication related osteonecrosis of the jaw. Journal of Oral and Maxillofacial Surgery 78(5):738-748.

2. Szentpéteri Sz, Restár L, Németh Zs, Vaszilkó M (2020) Prognostic factors of the medication-related osteonecrosis of the jaw. Orvosi Hetilap 161 (8): 283-289.

3. Szentpeteri Sz, Gyorffi A, Deak Gy, Nemeth Zs, Vaszilko M (2021) The role of interleukin 1A and 1B polymorphisms in medication- related osteonecrosis of the jaw. 25th Congress of the European Association for Cranio Maxillo Facial Surgery virtual congress

4. Szentpeteri Sz, Horvath Erzsebet, Dekany Sz, Krasznai M, Kraxner H, Hornyák Csilla, Kovacs T, Tamas L (2015) A szaglászcsökkenés vizsgálata neurodegeneratív megbetegedésben szenvedők körében. FÜL-ORR-GÉGEGYÓGYÁSZAT 61: 4, 147-150.

5. Szentpeteri Sz, Horvath E, Dekany Sz, Kraxner H, Krasznai M, Tamas L (2014) A szaglászcsökkenés vizsgálata neurodegeneratív megbetegedésben szenvedőknél a Neurológiai Klinika betegei körében. FÜL-ORR-GÉGEGYÓGYÁSZAT 60: 114-114.

Biography

She is graduated from the faculty of general medicine at semmelweis university in 2015, from faculty of dentistry at semmelweis university in 2016. I started working at semmelweis university in department of oro-maxillofacial surgery and dentistry in 2015. I obtained a qualification in oral and maxillofacial surgery in 2020. In 2013, I started involving in medication-related osteonecrosis of the jaw research at the department of oro-maxillofacial surgery and dentistry in semmelweis university. Initially, we examined the factors in the development and prognosis of the medication-related osteonecrosis of the jaw. After that, we started investigating the effect of supplemented procedures in surgical therapy of medication-related osteonecrosis of the jaw. From 2015, we are examining given Interleukin 1 and Toll-like receptor 4 gene single nucleotide polymorphisms in development and prognosis of medication-related osteonecrosis of the jaw.

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The usage of pedicle to cover forehead defects in two-stage forehead flap nasal squamous cell carcinoma reconstruction

Hasan Rizky Benokri and Sagung Rai Indrasari

Public Health and Nursing Universitas Gadjah Mada/Dr. Sardjito General Hospital, Indonesia

Paramedian forehead flap is a great option for restoration of complex nasal defect. Small nasal defect can be repaired by performing primary suture. In case of larger defects or when direct suturing is not possible, skin flap may be used to ensure functional and aesthetic outcome. We report a 60-year old woman who was diagnosed with squamous cell carcinoma of the nose and underwent two-stage forehead flap alar reconstruction and grafting of the flap defect. Prior to the forehead flap reconstruction, surgical excision of the lesion was performed. Instead of removing away the remaining pedicle in this patient, we used it as a graft to cover the defect in the forehead three weeks after the first surgery. Both flap and graft survived completely and no tumor recurrence was observed on the patient. Cosmetic and functional results were favorable.

Forehead flap remain to be one of the best options for nasal reconstruction. In selecting the type of reconstruction, the size, depth and subunit involved of the patient's nasal deformity, donor availability, comorbidities and the patient's expectation of the reconstruction outcome must be considered. Adequate knowledge and careful application of the technique allow excellent result with few complications.

Biography

Hasan Rizky Benokri, MD is a graduate of Faculty of medicine, public health and nursing universitas gadjah mada, Yogyakarta, Indonesia. He worked as general practitioner at emergency department of hassanah mojokerto islamic hospital and kedundung public health center, east Java, Indonesia. Currently, He undergoes residency at otorhinolaryngology-head and neck surgery department, faculty of medicine, public health and nursing universitas gadjah mada/ dr. sardjito general hospital, Yogyakarta, Indonesia.

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The ability of carbon dioxide–Derived indices to predict adverse outcome after cardiac surgery

Hichem Kolsi, Wael Jawadi, Ali Chaabouni, Med Fki, Koytheir Walha and **Abdelhamid Karoui**

Habib Bourguiba University Hospital, Tunisia

Objective: The objective of this study was to assess whether the central venous-to-arterial carbon dioxide partial-pressure difference (ΔPCO2) and the ratio of the ΔPCO_2 to the arterial-venous difference in oxygen content ($\Delta PCO_2/Ca\text{-}vO_2$) predict postoperative complications (PC) after cardiac surgery.

Methods: Prospective, observational, noninterventional study, about 60 patients undergoing cardiac surgery with cardiopulmonary bypass.

The primary endpoint was the occurrence of PC. Data were first analyzed in two groups based on the occurrence of PC. Then, receiver operating characteristic curves of the ΔPCO_2 and the $\Delta PCO_2/Ca\text{-}vO_2$ ratio were analyzed for the prediction of PC.

Measurements and Main Results: Among the study participants, 22 (36.7%) experienced PC. The death rate was 18.3%. The present study found that the ΔPCO_2 and the $\Delta PCO_2/Ca\text{-}vO_2$ ratio predicted the occurrence of PC with areas under the curve of 0.702 and 0.666, respectively. The best thresholds of these markers were 8.3 mmHg for the ΔPCO_2 and 2.16 mmHg/mL for the $\Delta PCO_2/Ca\text{-}vO_2$ ratio. A significant difference was found for these indicators between the groups with and without PC. The ΔPCO_2 and the $\Delta PCO_2/Ca\text{-}vO_2$ ratio were significantly correlated to EuroSCORE II, duration of aortic clamping, majority of prognostic scores the first two days postoperatively and the lactate level. The $\Delta PCO_2/Ca\text{-}vO_2$ ratio is predictive of hyperlactatemia >2 mmol/L, with an area under the curve of 0.787.

Conclusion: The ΔPCO_2 and the $\Delta PCO_2/Ca\text{-}vO_2$ ratio predict the occurrence of complications in cardiac surgery. This was in occurrence with physiological knowlage(1) and other author's results(2). But, our results are not consistent with other studies that not found any correlation between ΔPCO_2 and the $\Delta PCO_2/Ca\text{-}vO_2$ ratio and prognostic indices(3,4).

Recent Publications

1. Acute angle-closure glaucoma after total knee replacement surgery: case report and literature revue
2. The Ability of Carbon Dioxide–Derived Indices to Predict Adverse Outcome After Cardiac Surgery
3. Intra-articular analgesia: comparing 50mg and 100mg of tramadol with morphine for analgesia after arthroscopic knee surgery

Biography

He is currently working at habib bourguiba university hospital, Tunisia.

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Foreign body aspiration in single center

Alireza Malekzadegan, Majid-reza Akbarizadeh and Azzizullah Abbassi Dezfouli

Zabol university of medical Sciences, Iran
Shaheed Beheshti university of medical Sciences, Iran

Introduction: Foreign body (FB) aspiration requires a high index of suspicion for diagnosis and prompt management to avoid morbidity and mortality. This retrospective study was conducted to review foreign body aspiration at single center south east of Iran.

Materials and Methods: The records of patients managed for foreign body aspiration from January 2011 to 2021 at the surgery Unit of Zabol University were retrieved and data summarized with respect to age, indications for bronchoscopy, nature of foreign body, location of foreign body and outcome of the bronchoscopy procedure.

Results: A total of 289 patients were managed within the ten-year study period. The commonly aspirated FBs were groundnuts, metallic objects and core of the fruits. The peak incidence occurred in children aged 2-4 years (59.86%) and the least is above 12 years of age (3.11%). The foreign bodies (FBs) are most common placed in right main bronchus (47.75%). Foreign body in the Trachea had the most emergency, morbidity and tendency to convert to open procedure. 271 patients (93.77%) were successfully managed with first rigid bronchoscopy. For 12 patients (4.5%) second bronchoscopy was successful and in three patients (1%) third bronchoscopy was successful. Three patients converted to open Tracheotomy. After each failed bronchoscopy attempt the surgeon pushed the foreign body to right main bronchus and tried the next attempt a day later.

Conclusion: There may be more than one bronchoscopic attempt needed to extract the foreign body. If conversion is needed open removal of foreign body by vertical tracheotomy between 2-4 rings of trachea and extracting by the rigid bronchoscopy and prompt closure of the trachea and extubating after the procedure is safe.

Recent Publications

1. The first report of Enterobacter gergoviae carrying bla NDM-1 in Iran
2. The Ability of Carbon Dioxide–Derived Indices to Predict Adverse Outcome After Cardiac Surgery
3. Prevalence of quinolone-resistant uropathogenic Escherichia coli in a tertiary care hospital in south Iran

Biography

He is currently working as assistant professor at zabol university of medical sciences and he has a thoracic surgery subspeciality.

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E-Poster Presentation

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Cervical sympathetic nerve schwannoma: A case report

Abdelkrim Hanane, Karima Feddag, Souad Boumrah and **Ali Saheb**

Nedir Mohamed UHC Algeria

Cervical sympathetic nerve schwannoma is a benign mesenchymal tumor that originates in the Schwann sheath.

We report in this publication a case of cervical sympathetic nerve schwannoma in a 29-year-old patient, with no pathological history, who consulted for an isolated upper left laterocervical oval mass of about 70mm long axis, asymptomatic, slowly evolving. Magnetic resonance imaging shows an oval latero-cervical mass measuring 33 x 56mm in the major axes, well limited by a wall and thin septa, in favor of a cystic lymphangioma. The patient was taken care of in our department and underwent a complete extra capsular surgical resection performed by a lateral cervicotomy. The immediate postoperative evolution was marked by the presence of Claude-Bernard-Horner syndrome. Pathological examination of the surgical specimen was in favor of cervical sympathetic nerve scwannoma. After one year of clinical monitoring, a cervical ultrasound is performed, which confirmed the absence of any recurrence.

Recent Publications

1. Cavernous thrombosis revealing sinus tuberculosis

Biography

Abdelkrim Hanane, md is graduated from the faculty of medicine of mouloud mammeri university in tizi ouzou, algeria, where he also completed his university studies and obtained his doctorate in general medicine. dr abdelkrim hanane trained at the department of ent-head and neck surgery of nedir mohamed university medical centre in tizi ouzou during his residency. during his residency, he was able to provide superior care and consultation that resulted in an overall improvement of the department's patient satisfaction quotient. abdelkrim hanane has participated several times by posters publications in ent-head and neck surgery national and international congresses. he is a member of american academy of otolaryngology- head and neck surgery.

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Adult sinonasal rhabdomyosarcoma with spinal metastasis: A case report

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Introduction: Rhabdomyosarcoma (RMS) is a malignant soft tissue tumor mainly seen in the pediatric population. Here, we describe a case of an aggressive sinonasal RMS with distant metastasis in an adult patient.

Case presentation: A 51-year-old male presented to the otolaryngology clinic with a unilateral painless neck mass and nasal obstruction. A flexible transnasal endoscope showed a huge fungating mass obstructing more than 80% of the right nasal cavity. A contrasted computed tomography (CT) scan of the paranasal sinuses showed an enhancing soft tissue density mass involving the right nasal cavity. A biopsy revealed the presence of RMS of an embryonal variant. The patient responded well to chemo-radiotherapy, but later, developed spinal metastasis and cord compression. He was admitted for palliative care but died due to cardiopulmonary arrest ten months after diagnosis.

Conclusion: A high index of clinical suspicion for malignancy is required in adult patients with unilateral nasal symptoms.

Recent Publications

1. Hypopharyngeal Perforation Following Foreign Body Ingestion: A Case Report
2. Endoscopic transorbital management of frontal sinus mucocele: a case report and review of the literature
3. Hearing impairment in military personnel in Eastern Saudi Arabia

Biography

Abdulaziz A Alsalem is currently working at king abdulaziz medical city, Saudi Arabia.

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Accepted Abstracts

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Effect of topical intranasal insulin on healing of the nasal mucosa

Serdar Ozer
Hacettepe University, Turkey

Objective: In this study, we described the Boomerang Suture (BS) technique to attach the nasal septum to the anterior nasal spine and evaluated its outcomes and compare it with the traditional figure-8-suture (F8S) technique.

Methods: This study was carried out on 80 patients who underwent nasal surgery (BS in 40 patients and F8S in 40 patients) between September 2016 and January 2019. The decision to use the BS or F8S technique was randomized in a sequential fashion. The detected deviations and applied septoplasty methods were given. The surgical results were determined by the independent observers' scorings. The Nasal Obstructive Symptom Evaluation (NOSE) scale was applied before and one year after surgery. A computer simulation was utilized to analyze the features of the techniques.

Results: The most commonly used technique was the swinging door in 39 cases. Postoperative NOSE values were statistically lower than preoperative in both groups ($p < .001$). Surgical success rates for BS and F8S techniques were 97.5% and 87.5%, respectively, which was not statistically significant ($p = 0.201$). BS can produce 4.3 times more vertical vectors than F8S and F8S causes 3.7 times more torque in the same amount of misalignment in the biomechanical analysis.

Conclusions: BS and F8S are very successful techniques to fix the nasal septum. The BS technique, which creates a much larger vertical vector and less rotational force than the F8S, was also more successful, although it was not statistically significant.

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Can Mediterranean diet improve fatigue in cancer survivors?

Frantzeska Nimee and Maria Skouroliakou
Harokopio University, Greece

Background: Cancer-related Fatigue is a common symptom in many cancer survivors. It may be influenced by a variety of demographic, medical, psychosocial, behavioural and biological factors. The complexity of the etiology of fatigue, as well as the symptoms experienced by the patients themselves have led scientists to suggest various interventions in order to treat this fatigue. These interventions are divided in pharmacologic treatments and non-pharmacologic treatments. The latter include exercise, rest, cognitive interventions and nutrition.

Purpose: The aim of our interventional pilot study was to evaluate whether Mediterranean Diet would improve the cancer-related fatigue syndrome experienced by cancer survivors.

Methodology: A study with two groups of cancer survivors (≥ 3 months and≤5 years since primary treatment) was carried out. The Control group (n=18) and the Intervention group (n=21). Follow up was set at 4 weeks. The Control group received only general nutritional advice, whereas the Intervention group was provided with personalized Mediterranean Diet menus that were generated by a Clinical Decision Support System. The FACIT Fatigue Scale was used to assess Cancer-related fatigue. Med Diet Score was used to assess adherence to Mediterranean Diet.

Findings: At the study endpoint, significant ameliorations in cancer-related fatigue were recorded in the Intervention compared to Control group ($p<0.05$). 83% of the intervention group participants showed higher score in FACIT Fatigue scale, meaning better Quality of Life after the 4-week intervention. Participants in the control group showed a 28% increase in FACIT Fatigue scale . Moreover, 89% of the participants in the Intervention group displayed a higher score in Med Diet Score, revealing their adherence to the Mediterranean Diet menus they were given.

Conclusions: Mediterranean Diet can play a vital role in dealing with cancer-related fatigue in cancer survivors. More studies though, are needed to empower these findings.

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Antidiabetic effect of brassica oleracea var. capitata and Raphanus sativus in Wistar rats fed a high-sucrose diet

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Currently, type 2 diabetes (T2D) is a serious health problem and its prevalence will increase worldwide in the years ahead. The research for natural sources with antidiabetic properties could be an affordable alternative to T2D prevention and management. Cruciferous vegetables such as *Brassica oleracea* var. capitata L (green cabbage) and *Raphanus sativus* L. (radish) have beneficial functional properties for diabetes control. However, their ameliorate effects on insulin resistance are little known. The objective was to evaluate the effect of B. *oleracea* and R. *sativus* on the pre-diabetic rat model. The antidiabetic effect of B. *oleracea* and R. *sativus* was evaluated in male Wistar rats (n=35) induced with a high sucrose diet (HSD) at doses of 5 and 10 mg/kg. Zoometric and biochemical parameters were measured. Also, histological preparations of the pancreas and liver were analyzed to observe the protection effect. Over five treatment weeks, B. oleracea decreased food consumption, weight and obesity index. Both vegetables decreased fasting glucose and insulin levels compared to HSD (untreated) control, although not significantly ($p>0.05$). Both vegetables significantly ($p<0.05$) reduced HOMA-IR, HOMA-β and glucose tolerance compared to HSD. Also, it had minor damage in the pancreas and liver compared to HSD. Therefore, these crucifers are a source of bioactive compounds that act on glucose homeostasis regulation and have a protective effect on organs (pancreas and liver), thus reducing the affected complications in T2D. B. *oleracea* and R. *sativus* (crucifers) can serve an application potential in the functional food's development aimed at T2D prevention and management.

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