Sinonasal polyposis management in Samter's triad patients

Bouatay R,Ben Khalifa O,Bouaziz N,Gueddari M,Ferjaoui M,El Korbi A,Kolsi N,Harrathi K,Koubaa J
Otorhinolaryngology and head and neck surgery departement of Monastir (Tunisia)

RHINOLOGY

Introduction

Samter's triad also known as widal trial is caracterised by nasal polyposis, asthma and aspirine intolerance. This syndrom tends to be more severe and difficult to assess by conventional medical and surgical therapy, thus it poses a challenge to the clinician. Actually there's no standarized protocol in the management of this syndrom.

Objective

We aim to describe our experience in the management of samter's syndrome.

Methods and materials

A retrospective study including 47 patients with samter's triad during the period from January 2002 to December 2021.

Results

The main complaints: nasal obstruction (100%), anosmia (80%), rhinorrhea (59,6%), cranio facial pain (53,2%) and sneezing (53,2%).

The endoscopic staging of sinonasal polyps: stage III of Jankowski (60%) and stage IV (26,5%) (Figure 1)

Medical treatment: All patients required short courses of oral corticosteroids at the dose of 1mg/kg/day for 10 days in addition to their regular use of intra nasal steroid spray and nasal lavage →The results of medical treatment were mediocre.

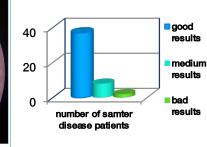
Surgical treatment: Functional endoscopic sinus surgery (FESS)

Results of surgical treatment: improvement of nasal obstruction (100%), olfaction recuperation (68,1%) and diminution of rhinorrhea (87,2%), improvement of asthma symptoms (72,3%) after 12 months of FESS (Figures 2 & 3)

Recurrence: objected in **21,3%** of patients after 36 months in average. Among them, **4,3%** required polypectomy under general anesthesia..

Adjuvant treatment: None of our patients underwent aspirin desensitization or immunomodulatory therapy





■ inchanged asthma
■ improvement asthma

13

34

number of patients

Figure1:Stage IV of Jankowski

Figure2: Results after 12 months of FESS

Figure3: Results of asthma 12 months after FESS

Conclusion

Sinonasal polyps in samter's syndrome are often extensive, difficult to treat and have high tendency to recur after FESS. Aspirin desensitization and immunomodulatory therapy are new and effective pattern in management of samter's syndrom.

References

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