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Outcomes of dacryocystorhinostomy (DCR) in failure cases of probing of congenital nasal duct obstruction

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Abstract

Outcomes of external dacryocystorhinostomy (DCR) in failure cases of probing of congenital naso-lacrimal duct obstruction (CNLDO) is very successful. External DCR is indicated in failure cases of probing. Probing is modality of choice in CNLDO below one year.

Keywords: Dacryocystorhinostomy, Congenital naso-lacrimal duct obstruction

Introduction

In 1912, Schaeffer^[1] emphasized that irregularities in the naso-lacrimal duct and diverticula are common congenital aberrations.

Busse and colleagues (1980)^[2] provided photographic documentation of these particular anatomic variations at the nasal end of the naso-lacrimal duct.

The incidence of congenital naso-lacrimal duct obstruction ranges from 1.75% to 5% (Cassady, 1948)^[3].

Some ophthalmologists advise a conservative approach (topical antibiotics and sac massage with various techniques) till 12-13 months of age.

Materials and methods

The present study is a retrospective comparative case series. The inclusion criteria were either sex, failure cases of probing beyond 4 years of age, nosystemic disorder, and available followup of at least 3 months. Any patient who did not confirm to above was excluded from the study.

Results

In 12 children with 18 eyes with failure cases of probing in congenital naso-lacrimal duct obstruction in which DCR done were subjected to this study.

Table 1: Sex Distribution

Sex	No. of patients	Percentage
Male	8	66.67
Female	4	33.33

Out of 12 patients of naso-lacrimal duct obstruction under study, 8 were males and 4 were females.

Table 2: Incidence of Side Affected

Laterality	No. of patients	No. of cases	%
Right eye only	4	6	33.33
Left eye only	5	8	41.67
Both eyes	3	6	25

The above table showed that 75% of patients had unilateral congenital naso-lacrimal duct obstruction. Each naso-lacrimal duct obstruction was considered as one case.

Family History: None of the cases under study had positive family history of similar complaints in the blood relations of the child.

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Table 3: Obstetrical History

Mode of delivery	No. of patients	Percentage
Normal delivery	9	75
Forceps delivery	1	8.33
Caesarean section	2	16.67

The mode of delivery of the child was normal in 75 % of patients.

Success Rate of Dcr

DCR done in 18 cases of failure of probing cases in which 16 cases responded to surgery and till their 3 month follow up they did not complain of any symptoms. Success rate of 88.89 % was found in our study.

Discussion

Many factors must enter the decision of when and how to treat congenital naso-lacrimal duct obstruction. The age at which the child presents to the hospital is an important consideration

Conclusions

These are different clinical spectrum of congenital nasal duct obstruction. Earlier diagnosis helps in management.

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