Characterized By:

- Persistent discharge
- Deafness
- Marginal perforation
- Cholesteatoma
CHOLESTEATOMA

- Definition:
  - Epidermal & connective tissue structure
  - In the form of sac
  - Progressive & independent growth at the expense of underlying bone
  - Tendency to recur
“Medial wall of middle ear”
CHOLESTEATOMA
ETIOLOGY

- Congenital
- Acquired
  - Theories
    - Congenital cell rests
    - Metaplasia of middle ear epithelium
    - Papillary ingrowth
    - Invagination of epithelium
Congenital Cholesteotoma
Spread of cholesteatoma

- Mechanism of spread
  - Pressure theory
  - Enzyme theory
  - Hormone theory
ROUTES OF SPREAD

- Direct spread
- Through congenital dehiscence
- Through surgical dehiscence
- Through normal sutures
HISTOPATHOLOGY

- Cyst like structure
- Capsule stratified squamous epithelium
- Centre keratin squames
DIAGNOSIS

- History
  - Persistent ear discharge
    - Purulent, stained with blood
  - Foul smelling

- Associated conditions
  - Post auricular involvement
  - Facial nerve paralysis
  - Nystagmus
  - Vertigo
  - Headache
EXAMINATION

- Examination
  - Ear examination
    - Blood stained
    - Foul smell
    - Purulent + C/S
    - Post-auricular abscess
    - Facial nerve paralysis
    - Nystagmus
    - Fistula sign +ve
  - Audiological assessment
EXAMINATION UNDER MICROSCOPE

- Children under G/A
- After Suction cleaning
- Marginal perforation
- Granulation tissue/polyp
- Whitish flakes in middle ear cavity
Radiological Assessment

- X-ray mastoid
CT-SCAN

- CT scan temporal bone
  - Cholesteatoma
  - Extent
  - Normal anatomical structures
  - Bony erosion
  - Complications
TREATMENT

- Medical treatment
  - No medical treatment for cholesteatoma
  - Only for associated conditions
- Preparation for G/A
SURGICAL TREATMENT

- Aims of surgery
  - Eradicate disease
  - Prevent recurrence of infection
  - Prevent complications
  - Restore function
ROUTES OF SURGERY

- Transcanal
- Endaural
- Post-aural
- Circumferential
PROCEDURES

- Canal wall-up
  - Cortical mastoidectomy
  - Combined approach mastoidectomy
- Canal wall-down
  - Atticotomy
  - Radical mastoidectomy
  - Modified radical mastoidectomy
Extensive cholesteatoma in mastoid antrum right ear
Surgeon’s View

- Aural Polyp
- ANTERIOR
- Tympanic Membrane
- INFERIOR
- Cholesteatoma
- Keratin Flakes

RIGHT EAR - SURGEON'S VIEW
FUNCTIONAL RECONSTRUCTION

- Tympanoplasty
  - Type I (myringoplasty)
  - Type II
  - Type III
  - Type IV
  - Type V
COMPLICATIONS OF CSOM

Rout of spread
EXTRACRANIAL COMPLICATIONS

- Facial nerve palsy
- Labyrinthitis
- Acute mastoiditis
- Post-auricular fistula
- Petrositis
INTRACRANIAL COMPLICATIONS

- Extradural abscess
- Subdural abscess
- Lateral sinus thrombophlebitis
- Meningitis
- Brain abscess
- Otitic hydrocephalus
COMPLICATIONS OF CSOM

- Lat sinus thrombosis
- Brain abscess
- Subdural abscess
- Petrositis
- Petrous apex
- Labyrinth (itis)
- Extradural abscess
- Facial nerve (palsy)
- Mastoiditis
- Mastoid
MENINGITIS

SUBDURAL ABSCESS

BRAIN ABSCESS

PETROSITIS

EXTRADURAL ABSCESS

LABYRINTHITIS

FACIAL PARALYSIS

LATERAL SINUS THROMBOPHLEBITIS

MASTOIDITIS