경유법으로 치험하였기에 문헌적 고찰과 함께 보고하는 바이다.

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上顎骨에 발생한 含齒性囊腫1例

전북의대

홍기환 • 조규모 • 김홍수

含齒性囊腫은 顎骨內에 發生하는 齒系囊腫의 일종으로 齒牙形成後期에 생기는 것으로서 顎骨內 어느 部位에서나 發生하나 주로 下顎骨에 빈번히 발생한다. 발생연령은 주로 20代와 30代에서 호발하여 男子가 女子보다 약간 높은 發生빈도를 갖는다.

이囊腫은 囊胞에 둘러싸여있기 때문에 隨胞性囊腫이라고도 하는데 흔히 매복되거나 轉移된 齒牙 또는과잉치에서 발현된다고 한다. 上顎洞內로 轉移된 齒牙는 특별한 증상없이 지내는 수도 있으나 때로는 만성염증, 범랑아세포종(Ameloblastoma) 또는 편평상피암(Squamous cell Carcinoma)으로된다는 報告도있다. 따라서 이에 대한 조기진단과 적절한 外科的 처치가 중요하다 하겠다.

齒牙가 鼻腔 또는 上顎洞 및 上顎骨등의 이상위치에서 發生된 例는 1754年 Albinus가 처음 報告한이래 우리나라에서도 朴, 劉, 趙등에 의한 報告例가 있다.

外科的 처치로는 Enucleation, Marsupialization, Decompression 方法이 있는데 囊腫의 發生部位, 크기, 감염여부, 주위조직과의 관계등 여러가지 임상적조건에 따라서 가장 적절한 方法을 선택해야 하겠다.

著者는 최근 전북의대 이비인후과에 右側 견치와의 腫脹및 을 主訴로 來院한 上顎骨内에 發生한 含 齒性囊腫을 enucleation 方法으로 摘出하여 좋은 結 果를 보았기에 文獻的 考察과 함께 報告하는 바이다.

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중이수술 128 례에 대한 임상적 세균학적 고찰

성분도병원

김광수 · 김정중 · 이계실 · 차인숙

만성중이염은 이비인후과의 가장 흔한 질환중의 하

나로 이에대한 수술요법은 여러가지 방법이 많이 발표되고 있으나 아직까지 어려운점이 많이 있다고 하겠다. 저자들은 1981년 2월부터 1983년 2월 까지부산성분도병원 이비인후과에서 만성중이염이란 진단하에 수술을 받은 환자 128예에 대해서 임상적 세균학적 관찰을 실시하여 다음과 같은 결론을 얻었다.

- 1) 성별과 연령비는 여자가 68예(53.1%), 남자가 60예(46.9%), 또한 연령별로는 20대가 48예(37.5%), 10대가 37예(28.9%) 그리고 30대가 27예(21.1%)의 순서였다.
- 2) 환측별은 우측이 71예(55.5%), 좌측이 57예 (44.5%) 이었다.
- 3) 수술전청력검사상 중등도의 손실이 64예(50%)로 가장 많았고 다음으로 경도손실이 32예(25%)이었다.
- 4) 고막천공의 상태는 중심성천공이 65예(50.8%), 전결손이 44예(34.4%), 이완부천공이 12예(9.4%) 그리고 변연성천공이 7예(5.4%)이었다.
 - 5) 진주종이 전체의 36.7 %인 47 예에서 나타났다.
- 6) 피부절개및 수술경로는 postaural incision 이 123예(96.1%) 이었다.
 - 7) 국소마취가 95예(74.2%) 이었다.
- 8) 수술방법은 intact canal wall tympanoplasty with mastoidectomy 가 53예(41.4%), tympanoplasty without mastoidectomy 가 42예(32.8%) modified radical mastoidectomy 23예(18%) 그리고 radical mastoidectomy 가 10예(7.8%)이었다.
- 9) Culture 를 시행하여 분리된 균주 93 총 중 proteus 가 29 총(31.2%), staphylococcus가 27총(28.7%), pseudomonas 가 22 총(23.7%) 그리고 streptococcus 가 7예(7.5%) 이었다.

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鐙骨固定症에 대한 鐙骨切除術

서울의대 **金宗善・李光善・趙愛英**

鑑骨固定症은 先天的 畸型으로서 단독 또는 他畸型 과 동반되어 발생되거나,後天的으로 耳硬化症이나 혹은 中耳炎의 후유증으로 발생될 수 있다.

저자들은 先天性 鐙骨固定症이 있는 4例(5耳)와 慢性中耳炎失후에 발생된 鐙骨固定症 2例(2耳)에 대하여 鐙骨切除衛을 실시하여 이를 보고하는 바이다.

Nasal Foreign Body Through the Cheek

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Children constitute a large majority of patients with foreign bodies in the nose. Adults with foreign bodies in the nose are usually mentally disturbed, and may be the victims of penetrating injuries or of operation on the nose.

Foreign bodies enter the nose through the anterior naris, posterior naris, penetrating wound, ... etc.

Authors experienced a case of the broken pencil, 3.5cm in length, which entered the nose through the cheek and stayed there for 4 days.

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2 Cases of Bilateral Choanal Atresia

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Choanal atresia, described first by Johann Roedere (1755) is an obstruction between the nasal cavity and nasopharyngeal vault, and the diagnosis and treatment were developed because of severity of the disease.

Embryologically, incomplete development of olfactory pit, or failure of nasobuccal membrane to rupture, or persistant remaining of buccopharyngeal membrane, etc, all forms the congenital choanal atresia. And the acquired type was the result from syphilis or diphtheria with a resultant stenosing ci-

catrix and after the inexpert surgery and the trauma. Multiple abnormalities may be present particularly affecting the head, the heart and the alimentary system in the congenital type.

The operative technique employed would depend upon the type of obstruction (whether membranous or bony), the age of the patient, and the presence or absence of any associated pathologic condition. Since Emmert (1853) first tried blind puncture of the atretic plate with the trocar, other surgical techniques have been introduced over the years for the correction of choanal atresia, which were the transnasal, transpalatal, transantral and the transseptal approach. Among them, transpalatal approach was proved to be a popular technique, that it provides a direct route, thus permitting an exact reconstruction and low restenosis rate.

Recently, we have experienced two cases of choanal atresia and treated successfully with transpalatal approach, so authors report these cases with a review of the literature.

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A Case of Dentigerous Cyst of the Maxilla

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The dentigerous cyst involving maxilla is rare disease in Otolaryngologic field. A case of 22-year-old male patient involving dentigerous cyst of the maxilla with chronic inflammatory signs has been presented.

The occurence of odontogenic epithelium in the wall of dentigerous cyst is a well known entity. This epithelium usually remains inactive and does not have clinical significance, but these small inactive islands of epithelium may be stimulated, resulting in chronic inflammation, ameloblastoma and squamous cell carcinoma. Therefore correct diagnosis and proper treatment are very important.

The authors have recently experienced a case of dentigerous cyst causing a mild disfigulation of face. The cyst was surgically enucleated through sublabial approach.

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Clinical and Bacteriological Observation of 128 Cases of Chronic Otitis Media

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A Clinical and bacteriological observation was performed 128 cases of chronic otitis media who had taken middle ear surgery at Dept. of otolaryngology of St. Benedict Hospital during the period of Feb. 1981 to Feb. 1983.

The following results were obtained.

- 1) Among total 128 cases, male were 60 cases (46.9%) and female were 68 cases (53.1%) and age distribution showed 48 cases (37.5%) in 3rd decade, 37 cases (28.9%) in 2nd decade and 27 cases (21.1%) in 4th decade.
- 2) Site distribution were 71 cases (55.5%) in right, 57 cases (44.5%) in left.
- 3) Degree of preoperative hearing loss were 64 cases (50%) in moderate, 32 cases (25%) in mild, 27 cases (21.1%) in severe and 5 cases (3.9%) were normal.
- 4) Central perforation were observed in 65 cases (50.8%), total perforation in 44 cases (34.4%), attic perforation in 12 cases (9.4%) and marginal perforation in 7 cases (5.4%).
- 5) Pathologic changes of middle ear and mastoid antrum showed granulation in 81 cases (63.3%), cholesteatoma in 47 cases (36.

7%).

- 6) The route of approach were 123 cases (96.1%) in postauricular, 3 cases (2.3%) in transmeatal and 2 cases (1.6%) in endaural.
- 7) Type of operation were 53 cases (41.4%) in intact canal wall tympanoplasty with mastoidectomy, 42 cases (32.8%) in tympanoplasty without mastoidectomy, 23 cases (18%) in modified radical mastoidectomy and 10 cases (7.8%) in radical mastoidectomy.
- 8) Type of anesthesia were 95 cases (74.2 %) by local anesthesia, 33 cases (25.8 %) were by general anesthesia.
- 9) Among 93 specimens of culture, proteus (31.2%), staphylococcus (28.7%), pseudomonas (23.7%), streptococcus (7.5%) and etc. (8.7%) in order of frequency.

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Stapedectomy for Stapedes Fixation

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Congenital stapes fixation may develop alone or with other systemic anomalis. Acquired stapes fixation is found in otosclerosis or in chronic otitis media.

It is our intent to review 4 cases (5ears) of congenital stapedial fixation and 2 cases (2 ears) of acquired stapedial fixation following chronic otitis media, treated by stapedectomy

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A Case of Perilymph Fistula

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A 40-year-old man was admitted with ch-