The influence of endoscopic treatment of isolated, small inflammatory lesions of sphenoid sinus on headache sensation

SUMMARY
One of the most frequent complaints in patients with isolated sphenoiditis is headache. In large proportion of these patients no pathologic findings are revealed in sphenoethmoidal recess endoscopically thus discrimination between sinus originated and primary headache in such cases may be especially difficult.

**The aim of this study:** was the assessment of the influence of endoscopic treatment of isolated, small inflammatory sphenoid sinus lesions on headache sensation.

**Material and method:** 13 patients suffering from headache, with CT-diagnosed isolated, small inflammatory lesions of sphenoid sinus such as mucosal thickening, polypoid tissue and cysts were treated endoscopically. Headache was assessed on the basis of five-grade scale before surgery, 1 month after surgery and after the observation period that varied between 5 to 40 months.

**Results:** In the first postoperative month the improvement in their headache was declared by 84.6% of patients, but after longer observation the success rate lowered to 61.5%. The improvement was observed both in patient whose the only complaint was headache and in patients with negative endoscopic findings.

**Conclusions:** Small isolated sphenoid sinus lesions constitute a group of specific pathologies of paranasal sinuses, which is still difficult to diagnose despite of technological advancement. The treatment of these lesions remains controversial. Decision as to operative treatment should be taken cautiously since headache in great proportion of these patients is not sinus originated. Further multicenter studies on the basis of larger group of patients are necessary to delineate the indications for surgical intervention in patients with small isolated inflammatory sphenoid sinus lesions.

**Key words:** chronic sphenoiditis, headache, endoscopic treatment