A B S T R A C T

Background: The exact assessment of a tonsil carcinoma’s size is often difficult because of the tumour’s submucosal extension and deep infiltration.

Aim: The aim of the study is to assess the usefulness of intraoperative ultrasonography in tonsil cancer.

Material: Twenty patients with carcinoma of the tonsil were included in the study (squamous cell carcinoma keratosis – 12, squamous cell carcinoma akeratosis – 6, diffuse large B cell lymphoma – 1, neoplasma malignum microcellulare – 1).

Method: Transcutaneous, endoscopic, and intraoperative ultrasonography were performed using a linear 7.5MHz probe.

Results: The difference in the results was statistically significant between palpation examination and intraoperative ultrasonographic examination, between transcutaneous ultrasonographic examination and intraoperative ultrasonographic examination, and between endoscopic ultrasonographic examination and intraoperative ultrasonographic examination in tonsil tumours. Generally, tumour size assessed by intraoperative ultrasonography was more advanced than those assessed by other methods.

Conclusions: Intraoperative ultrasonography is a safe, non-invasive method, which can be repeated at every stage of surgery. Therewere no contraindications or side effects. In all cases histological margins corresponded to sonographic margins. Intraoperative ultrasonography provides a quick and reliable orientation during resection of tonsil carcinoma.

Keywords: Tonsil carcinoma, Intraoperative ultrasonography (USG)