# Rhinitis in Laryngectomy Patients

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# Introduction

This study evaluates the sinonasal complaints in patients that have undergone laryngectomy and determines if any associated factors contribute to worsening symptom complaints including radiation therapy, chemotherapy, surgery, and if any objective evidence of sinusitis on post operative imaging for these patients.

# Methods

#### Design:

 A retrospective chart review was performed of the UTHSC laryngectomy database.

#### **Inclusion Criteria:**

 Patients >/= 18 year of age that have had a laryngectomy between 2015 and May 2022.

#### **Data Collected:**

Evaluated the following characteristics: Gender,

race, date of laryngectomy, overall staging, recurrence, chemotherapy before or after surgery, radiation before or after surgery, complaints of sinonasal symptoms after surgery, and sinusitis on imaging before or after surgery.

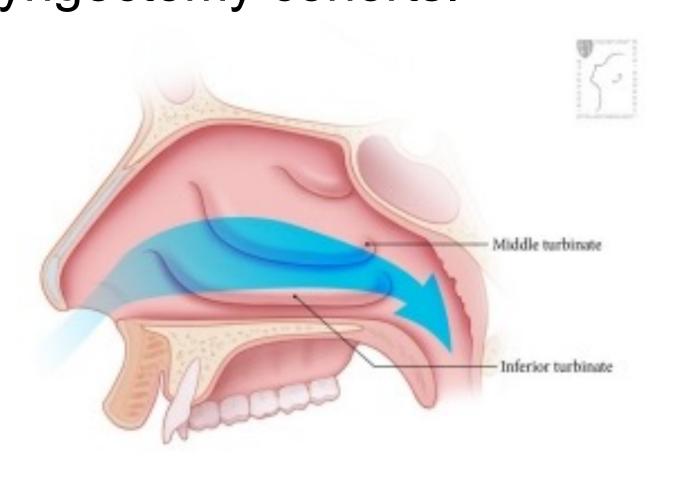
#### **Analysis:**

167 patients were included in chart review.
 Prism-9 software was used for creation of contingency tables. Fisher's Exact and Chisquare Analysis were performed.

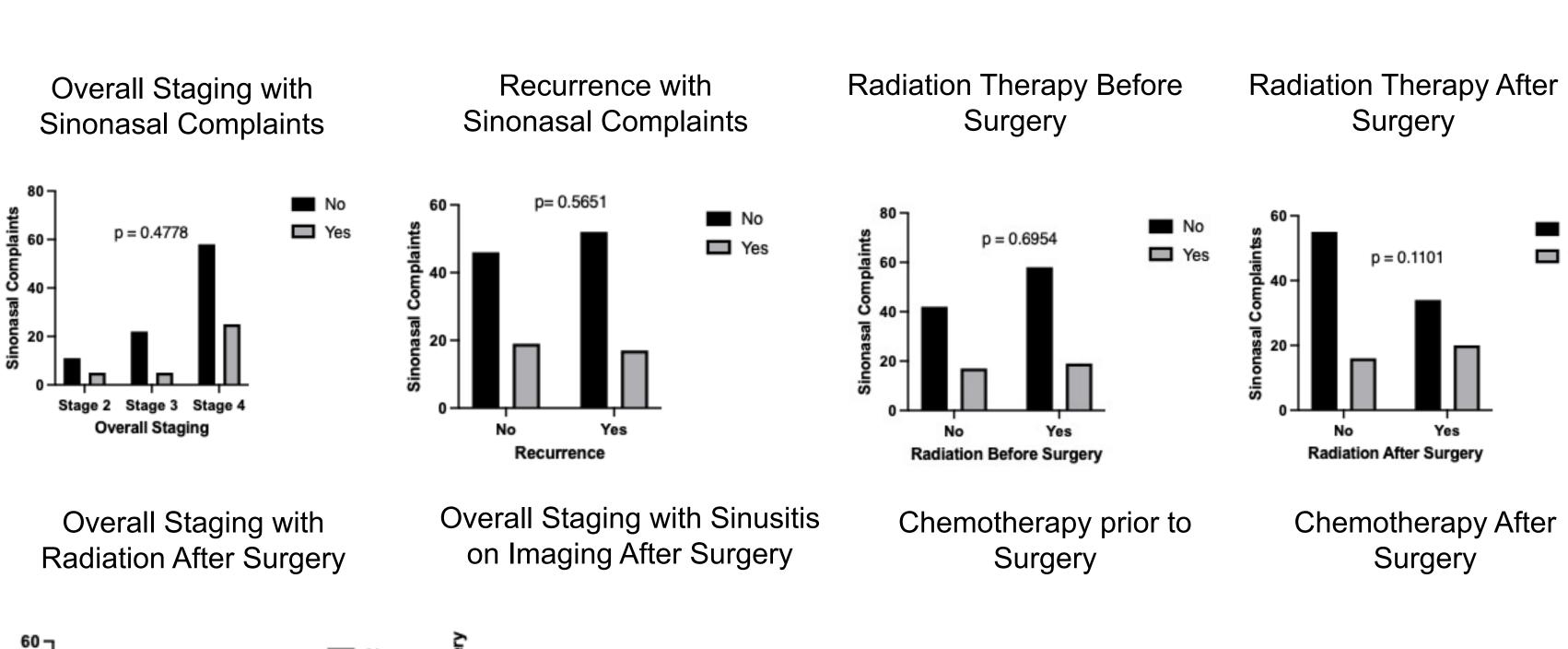
# Background NORMAL NECK TRACHEOSTOMY LARYNGEC Epiglottis Thyroid Cartilage Cricold Cartilage Trachea Oceanhause

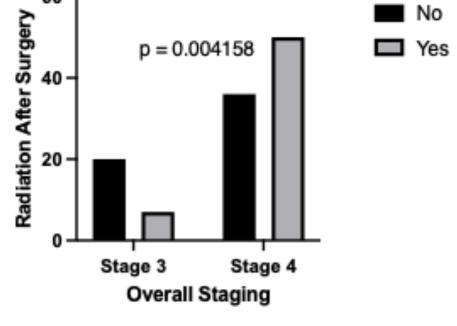
Figure 1. Nasal Airflow changes in

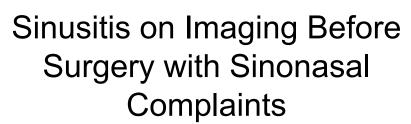
Following laryngectomy, patients no longer experience nasal airflow changing the nasal mucosa's secretory function and appearance. Patient's post-laryngectomy scored worse on symptoms of runny nose, nasal congestion, and nasal itching compared to their non-laryngectomy cohorts.



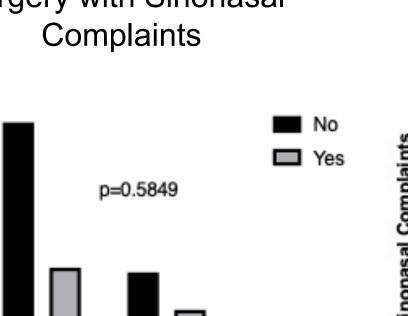
# Results







Sinusitis on Imaging Prior to Surgery



yes

No
Yes

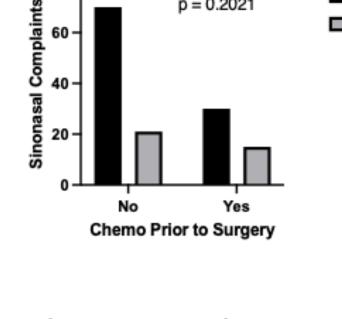
Sinusitis on Imaging After Surgery

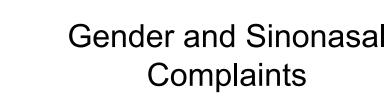
**Overall Staging** 

Sinusitis on Imaging After

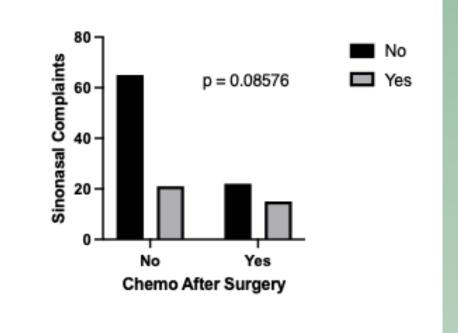
Surgery with Sinonasal

Complaints

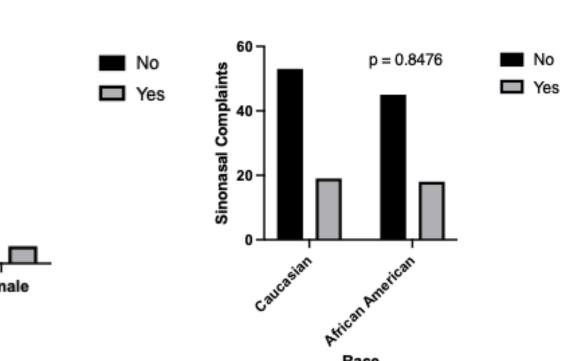




p = 0.6131



Race and Sinonasal Complaints



# Conclusions

Patients undergoing laryngectomy have a variety of impacts to their overall nasal function. Chemotherapy and Radiation contributes to a change in sinonasal mucosa in patients with late stage disease. Overall, later stage disease patients are more likely to undergo these therapies and have worsening sinonasal complaints. Further studies are needed to determine best treatment options for symptomatic control in this patient population.

# Acknowledgements

The data used in this study is from the UTHSC Database of Laryngectomy patients that is continually updated. These are patients that have undergone laryngectomy across 3 hospital systems in Memphis, TN.

### References

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