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## 내시경 레이저 광응고술을 이용한 후방비출혈 환자의 치료

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= Abstract =

## Treatment of Posterior Epistaxis with Posterior Endoscopic Laser Photocoagulation

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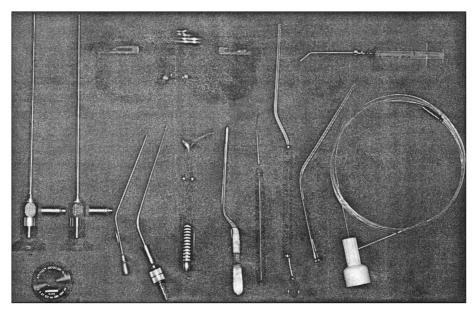
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Epistaxis is a common otolaryngologic emergency. Posterior epitaxis is more frequent in the elderly and associates with hypertension and arteriosclerosis. This is apt to be more vigorous in volume, is more difficult to identify the active bleeding point, and is more troublesome to contol. A number of different treatments are used to control the posterior epistaxis. Some of these are deep anterior packing, posterior packing, nasal balloon tamponade, arterial ligation, arterial embolization and posterior endoscopic cautery. Recently we directly photocoagulated the bleeding points in 7 cases of posterior epistaxis using endoscope and KTP/532 laser. The epistaxis was controlled in all cases without any significant complication. (Korean J Otolaryngol 40: 3, 1997)

KEY WORDS: Posterior epistaxis · Woodruff s plexus · Endoscopic surgery · KTP/532 lase.

. 1949 Woodruff<sup>14)</sup> (cardiovascular epistaxis) 서 론 (naso - nasopharyngeal . Hara<sup>5)</sup> Woodruff plexus) 가 (Woodruff's nasopharyngeal plexus) . Woodruff 1cm : 1996 3 : 1997 20

1997 15) 6.1 , balloon 1. 수술방법 가 Wurman 15) 가 (posterior endoscopic cautery) 0° 4mm Hopkins 30° 90% telescope(Karl storz, Tuttlingen, Germany)(Fig. 1) 4% xylocaine 1:1000 epinep hrine 10 대상 및 방법 1% xylocaine 1: 1995 1996 epinephrine 25G 20 ΚT P/532 laser(Laserscope, San Jose, USA) (handpiece) 가 4 가 3 17 4 6 (continuous beam) 63 44 (noncontact type) 가



**Fig. 1.** Photograph showing instruments required for the posterior endoscopic laser photocoagulation, these include: 0° and 30° 4mm telescope, endoscope eye safety filter cap, nasal speculum, suction tips, bayonet forceps, monocle plastic safety glasses, laser handpieces and laser fiber, 25 gauge needle mounted on a syringe.

. KTP 가

(Table 1).

고 칠

Woodruff

가

Merocel®

결 과

3 가 1

가 . 160mmHg 가 5

. 가

3g/dl 2 .

5 가 3 가

1 , 1 3 Woodruff

(Fig. 2).

Woodruff 1

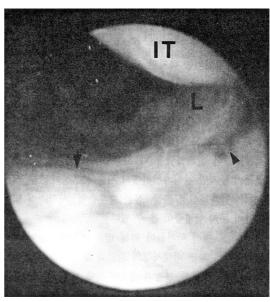


Fig. 2. Telescopic view(0 degree) of the left inferior meatus demonstrating Woodruff's plexus. There shows engorged dilated vessels(arrow) on the nasal floor and superficially located prominent vessel(arrowhead) at the lateral wall of inferior meatus.; IT, inferior turbinate; L, lateral wall of inferior meatus.

Table 1. Summary of data on 7 cases with posterior epistaxis

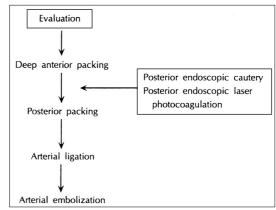
Name	Age/Sex	Blood pressure (mmHg)	Hb*/Hb* change (g/dl)	Transfusion	Bleeding site	Active bleeding	Follow-up(mo.)/ Recurrence
HSY	17/M	130/80	9.7/2.6	-	-	-	8/-
GTJ	39/F	180/120	8.4/2.3	PC <sup>†</sup> #2	lat wall of post. MM#	+	8/-
KJR	63/F	160/100	11.1/3.1	-	-	-	7/-
HGH	48/F	200/120	8.5/5.3	-	lat wall of post. MM§	+	7/-
CJM	55/M	160/100	10.7/5.2	-	- /roof of mid. IM§	- /	7/+/-
CSH	50/M	140/80	4.6/ -	PC <sup>†</sup> #6	Inf. Surface of post. IT	+	3/-
KSN	39/M	160/80	13.6/4.7	-	Roof of mid. IM§	+	3/-

5.

\*Hb: Hemoglobin <sup>†</sup>PC: Pack cell \*MM: Middle meatus

§IM: Inferior meatus IT: Inferior turbinate

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**Fig. 3.** Flow diagram showing steps in management of posterior epistaxis patient.

(greater pala -

, , , , 4)10)13) 가 .

. 1988 Wurman <sup>15)</sup> 14). 가

- 400 -

5 3 가

(Fig. 3).

결 론

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