

ACUPUNCTURE IN CONSERVATIVE THERAPY OF CHRONIC ODONTOGENIC SINUSITIS OF MAXILLARY SINUS

Prof. I.O. Pohodenko-Chudakova MD, PhD, Dr. A.V. Surin

Belarusian Collaborating Centre of EACMFS,

Belarusian State Medical University, Minsk, Belarus

Aim was to determine acupuncture effectiveness in complex treatment of chronic odontogenic sinusitis of the maxillary sinus.

Objects and methods. We examined 16 patients with chronic odontogenic sinusitis of the maxillary sinus. Radiological examination was used for diagnosing. Patients were divided into 2 groups of 8 persons. Group I (control group) had a standard treatment, consisting of antibacterial and anti-inflammatory therapy. Focuses of chronic odontogenic infection, caused the maxillary sinus lesion, were sanified using therapeutic (endodontic treatment of tooth caused disease) and surgery (removal of the "cause" tooth) methods. Group II had acupuncture treatment, consisted of two courses by 10 sessions performed daily. Break between courses - 7 days. Following acupuncture points were irritated: GI4, GI10, GI11, GI20, IG3, VB20, P7, E6, E36, V2, V10, V20, V62, RP4, RP6, VG11b PC14, PC123.

The results of treatment were evaluated on the basis of objective clinical and laboratory data (body temperature, degree of swelling and perimaxillary soft tissue infiltration evaluated in a three-point test, the common analysis data of peripheral blood, exudates in on average, lower nasal passages) and subjective (quantitative evaluation of pain). We studied these parameters in dynamics: 1 examination - before the complex treatment and 2, 3, 5, 10, 15, 30 days after starting the treatment. We evaluated data of radiological studies, the number of postoperative complications, recurrent of disease during the conservative therapy, duration of hospitalization and disability.

Results. We fixed improvement of the general condition 2-3 days earlier ($p < 0,02$) in group II when analyzing. It was confirmed by the formula of peripheral blood and body thermometry. We stopped the pain, swelling on the second day for

persons treated with acupuncture, whereas in group I the same result was obtained only by 5 days. On day 3 the lack of fluid in the middle nasal passage was noted in group I for 62.5%, in group 2 - 100% of patients. Terms of hospital stay in group II were reduced for $3,1 \pm 0,1$ days, time to disability - $2,7 \pm 0,15$ days. The number of postoperative complications and recurrences during conservative therapy in group II was 25% lower than in group I.

Conclusion. The results confirm effectiveness of acupuncture as one of the components of chronic odontogenic sinusitis of maxillary sinus treatment.