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Abstract

Thoralf Stange: Observations on the spontaneous course of nasal septal defects

Background: The question of the size progression of untreated nasal septal defects has so far been answered only unsatisfactorily.

Methodology: The present study included all septal defects, regardless of their cause, which were re-examined by the author after at least one year after initial presentation. Size comparison was mostly done in the outpatient setting by subjective assessment and intraoperatively by measuring the absolute defect size.

Results: Of a total of 1.170 patients with nasal septal defects who presented as outpatients from 2011 to 2021, 201 untreated patients were followed up for defect size progression over the course of at least 1 year up to 7 years. These included 91 patients after nasal septal surgery (size increase in 26.4%), 52 spontaneous defects (size increase in 59.6%), 34 patients with a history of known nasal cocaine use (size increase in 59.6%), 12 cases after coagulation of the nasal septum for epistaxis (size increase in 16.7%) and 7 patients with known rheumatological diseases (size increase in 57.1%). Septum buttons were removed in 5 patients (defects due to different causes) (size increase in 80 %). The nasal septal defects did not become smaller or closed in any of the cases. Stigmatising saddle formation occurred in 8 patients (4 with persistent nasal cocaine use, 4 with rheumatological diseases). After one year, postoperative and cocaine-induced nasal septal defects (1 year postoperatively and after last cocaine use, respectively) increased in size in only 4.7% and 4.5% of cases. Coagulation-related defects remained stable after this period.