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Abstract

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Introduction: Since the beginning of nasal septal reconstructive surgery, numerous surgical options for nasal septal defects (perforations) have been introduced. However, the lack of an accurate preoperative classification of nasal septal defects in terms of their intraoperative difficulty prevents a valid comparison of these different surgical procedures. Therefore, the author's 2011 proposal for preoperative categorization of nasal septal defects is presented here using a large number of cases.

Methods: Between 2008 and 2020, the author performed a total of 894 nasal septal reconstructions using a three-layer surgical technique, of which 753 could be followed up with a follow-up period of 3-11 years. The defects were divided into four groups according to preoperative size: Small septal defects represented a maximum of one-third of the septal height in the defect area, medium defects ranged from one-third to one-half of the septal height in the defect area, large defects ranged from one-half to two-thirds, and very large septal defects represented more than two-thirds of the septal height in the defect area.

Results: Of the 753 nasal septal defects examined, 672 (89.2%) were successfully closed. The success rates for different defect sizes were the following: Small defects (213 patients) 95.3%; medium defects (400 patients) 94.0%; large defects (135 patients) 68.1%; very large defects (5 patients) 20.0%.

Conclusions: The presented size classification of nasal septal defects (perforations) is suitable for evaluating the chances of success of complete septal reconstruction. This classification should be used when comparing different surgical techniques.

