

Original Research

Evaluation of clinical profile of patients visited in ENT department

Rahber Akhtar Ansari

Associate Professor, Department of ENT, Career Institute of Medical Sciences Lucknow, UP

ABSTRACT

Background: The most common problems warranting a visit to a doctor or a health care provider in developing countries are related to ear nose and throat (ENT). Hence; the present study was undertaken to evaluate clinical profile of patients visited in ENT department. **Materials & methods:** A total of 1381 patients were analyzed who reported to the ENT department during the study period. Complete demographic and clinical details of all the patients were obtained. Detailed clinical history and past medical history of all the patients was taken and required investigations were advised. Final diagnosis was obtained based on the results of investigations and analysis. Assessment of incidence of different pathologies related to ENT and their age-wise and gender-wise correlation was obtained. **Results:** Most common ear pathologies detected in the present study were otitis media, hearing loss and otitis externa. Most common nose pathologies detected in the present study were fibroids in nose, Rhinosinusitis and epistaxis. Most common throat pathologies detected in the present study were upper airway obstruction, throat infection and speech disorder. Non-significant correlation was observed while correlating age-wise and gender-wise distortion of patients with clinical pathology. **Conclusion:** By spreading awareness of the common ENT pathologies and their etiologic profile will help in lowering the burden of the disease in the community.

Key words: ENT, Profile

Received: 15 March, 2019

Revised: 10 July 2019

Accepted: 23 July 2019

Corresponding author: Dr. Rahber Akhtar Ansari, Associate Professor, Department of ENT, Career Institute of Medical Sciences Lucknow, UP

This article may be cited as: Ansari RA. Evaluation of clinical profile of patients visited in ENT department. J Adv Med Dent Scie Res 2019;7(8): 68-71.

INTRODUCTION

The most common problems warranting a visit to a doctor or a health care provider in developing countries are related to ear nose and throat (ENT).^{1,2} ENT problems are the most common problems for which there are home remedies to medical treatments which are available, and most individuals manage their problem in the community without seeking help.^{3,4} In addition, due to the lack of specialist professionals in this field, these problems are treated by community practices.⁵ Wide varieties of Ear, Nose and throat diseases present to the Otorhinolaryngologist, head and neck surgeons. The pattern of these diseases may vary from community to community or hospital to hospital based on the availability of specialist personnel or facilities for the management of such diseases which are either congenital or acquired in origin. The acquired diseases include infections, inflammatory diseases, neurologic diseases, vascular diseases, trauma, benign and malignant tumors etc. Ear, Nose and throat diseases are serious public

health problems with universal distribution affecting all age groups.⁶⁻⁸

Hence; the present study was undertaken to evaluate clinical profile of patients visited in ENT department.

MATERIALS & METHODS

The present study was undertaken with the aim of assessing the clinical profile of patients visiting the ENT department. Present study was planned over a time period of six months. A total of 1381 patients were analyzed who reported to the ENT department during the study period. Complete demographic and clinical details of all the patients were obtained. Detailed clinical history and past medical history of all the patients was taken and required investigations were advised. Final diagnosis was obtained based on the results of investigations and analysis. All the patients were divided into three age groups; Patients less than 25 years of age; patients between the age group of 25 to 45; and patients more than 45 years of age. Assessment of incidence of different pathologies related to ENT and their age-wise and

gender-wise correlation was obtained. All the results were recorded in Microsoft excel sheet and were analyzed by SPSS software. Chi- square test was used for assessment of level of significance.

RESULTS

In the present study, analysis of a total of 1381 patients was done who reported to the department of ENT in the span of six months. Mean age of the patients of the present study was 28.5 years.41.20 percent of the patients of the present study belonged to the age group of 25 to 45 years. 32.88 percent of the patients of the present study belonged to the age group of more than 45 years. 25.92

percent of the patients belonged to the age group of less than 25 years.

In the present study, most common ear pathologies detected in the present study were otitis media, hearing loss and otitis externa. Most common nose pathologies detected in the present study were fibroids in nose, Rhinosinusitis and epistaxis. Most common throat pathologies detected in the present study were upper airway obstruction, throat infection and speech disorder. In the present study, non-significant correlation was observed while correlating age-wise and gender-wise distortion of patients with clinical pathology.

Table 1: Age-wise and gender-wise distribution of patients

Parameter		Number of patients	Percentage of patients
Age group (years)	Less than 25	358	25.92
	25 to 45	569	41.20
	More than 45	454	32.88
Gender	Males	756	54.74
	Females	625	45.26

Table 2: Distribution of patients

Disorder	Disease	Number of patients
Ear	Otitis media	165
	Hearing loss	105
	Otitis externa	67
	Others	23
Nose	Fibroids in nose	196
	Epistaxis	125
	Rhinosinusitis	146
	Others	88
Throat	Throat infection	135
	Upper air way obstruction	152
	Speech disorder	98
	Others	81

Table 3: Distribution of patients according to age group

Disorder	Age group (years)			p- value
	Less than 25	25 to 45	More than 45	
Ear 360	78	180	102	0.48
Nose 555	145	232	178	
Throat 466	135	157	174	

Graph 1: Distribution of patients according to age group

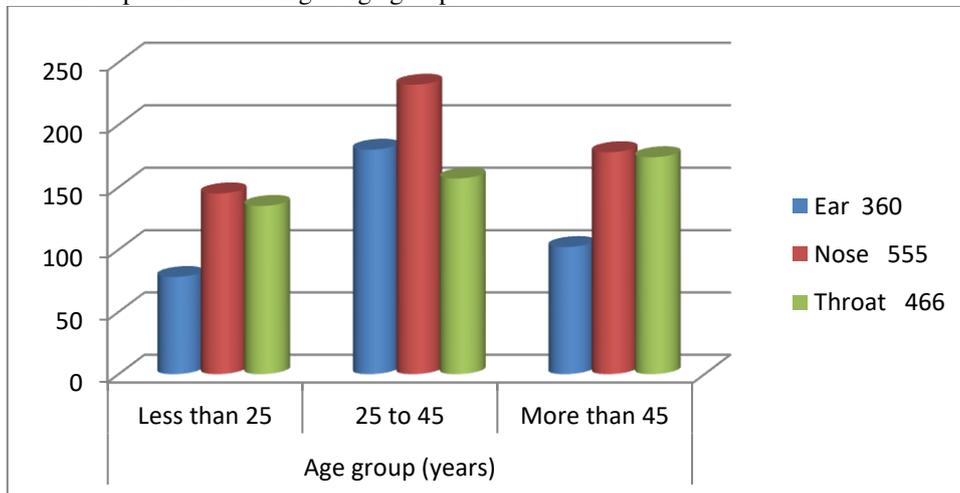
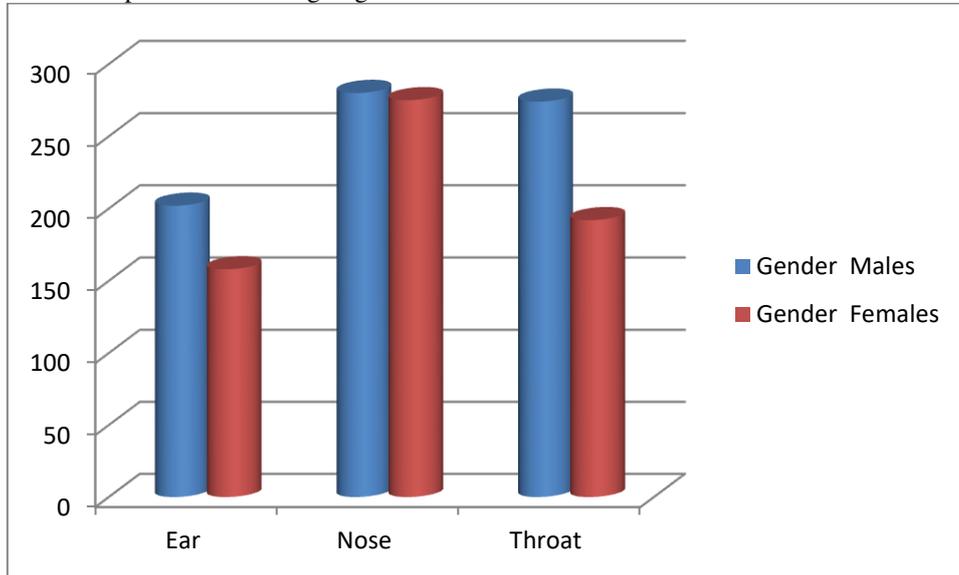


Table 4: Distribution of patients according to gender

Disorder	Gender		p- value
	Males	Females	
Ear	202	158	0.71
Nose	280	275	
Throat	274	192	

Graph 2: Distribution of patients according to gender



DISCUSSION

Ear, nose and throat emergencies are common in all communities. Early diagnosis and management will result in reduction of morbidity and mortality. Ear, nose and throat emergencies require specialized anatomical knowledge and special instruments and equipments are required to manage the situation. With the increasing incidence of road traffic accidents, industrial disasters, ENT as well as head and neck emergencies are on a rise and thus posing a challenge to the attending ENT surgeon.^{6, 7}

Studies have shown that the workload of otorhinolaryngologist (ENT specialists) have been on an increase due to increasing number of cases of ENT emergencies. This is due to increasing incidence of road traffic accidents and industrial disasters that affect the facial, orofacial and cervical regions of the body, creating a challenge to the attending ENT surgeon. Immigration and increase in life-expectancy are other factors suspected to have probably influenced this increase. ORL emergencies can be particularly devastating and may carry grave consequences.⁸Hence; the present study was undertaken to evaluate clinical profile of patients visited in ENT department.

In the present study, analysis of a total of 1381 patients was done who reported to the department of ENT in the span of six months. Mean age of the patients of the present study was 28.5 years.41.20 percent of the patients of the present study belonged to the age group of 25 to 45 years. 32.88 percent of the patients of the present study belonged to the age group of more than 45 years. 25.92 percent of the patients belonged to the age group of less

than 25 years. The prevalence of traditional practices increased the disease morbidity requiring surgical management. Postal survey using questionnaire methods was used to assess the prevalence of ENT-related disorders in a community.⁹Diseases of the ear, nose and throat (ENT) affect the functioning of adults as well as children, often with significant impairment of the daily life of affected patients. It has been envisaged that with increase in global population, infections remain the most important causes of disease, with upper respiratory infections causing hearing loss and learning disability particularly in children. Ear infections such as chronic otitis-media have serious consequences in developing countries, such as retarded language development and progress in school among children. Allergic rhinitis (AR) is characterized by the inflammation of the nasal mucosa. It is induced by exposure to allergens that trigger an immunoglobulin E (IgE) mediated inflammatory response that can result in chronic or recurrent symptoms of rhinorrhea, congestion, and sneezing. The condition can be seasonal or chronic and originates from airborne agents such as pollens, mold spores, and dust-borne mites.^{10, 11}

In the present study, most common ear pathologies detected in the present study were otitis media, hearing loss and otitis externa. Most common nose pathologies detected in the present study were fibroids in nose, Rhinosinusitis and epistaxis. Most common throat pathologies detected in the present study were upper airway obstruction, throat infection and speech disorder. Diseases of the ear, nose and throat can be caused by a variety of microorganisms. Rhinoviruses are the leading

cause for common cold in all age groups for example, while enteroviruses are frequently associated. Acute pharyngitis/nosillitis is mainly associated with respiratory viruses, although bacteria, especially *Streptococcus* spp. are found in some patients.^{8,9}

In the present study, non-significant correlation was observed while correlating age-wise and gender-wise distortion of patients with clinical pathology. Sethi RK et al characterized practice patterns in this setting and to provide insight into the epidemiology of all-comer, urgent otolaryngologic complaints in the United States. Electronic medical records were reviewed for all patients who registered for otolaryngologic care. Descriptive analysis was performed to characterize utilization and diagnostic patterns. Predictors of inpatient admission were identified using multivariable regression. Geocoding analysis was performed to characterize catchment area. A total of 12,234 patient visits were evaluated with a mean age of 44.7. Auditory and vestibular problems constituted the most frequent diagnoses (50.0%). The majority of patients were discharged home (92.3%). Forty-three percent of patients underwent a procedure in the ER; the most common procedure was diagnostic nasolaryngoscopy (52%). Predictors of inpatient admission were post-operative complaint, arrival overnight and laryngeal complaint. Patients travelled farther for evaluation of hearing loss and less for common diagnoses including impacted cerumen. In this report, they investigate practice patterns of a dedicated otolaryngology emergency room to explore an alternative to standard acute otolaryngologic health care delivery mechanisms.¹²

CONCLUSION

Under the light of above obtained data, the authors concluded that by spreading awareness of the common ENT pathologies and their etiologic profile will help in lowering the burden of the disease in the community.

REFERENCES

1. Kishve SP, Kumar N, Kishve PS, Aarif SMM, Kalakoti P. Ear, nose and throat disorders in paediatric patients at a rural hospital in India. *Australasian Medical Journal*. 2010;3(12):786–790.
2. Zakzouk SM, Jamal TS, Daghistani KJ. Epidemiology of acute otitis media among Saudi children. *International Journal of Pediatric Otorhinolaryngology*. 2002;62(3):219–222.
3. Timsit CA, Bouchene K, Olfatpour B, Harman P, Tran Ba Huy P. Epidemiology and clinical findings in 20, 563 patients attending the Lariboisiere Hospital ENT adult emergency clinic. *Ann OtolaryngolChirCervicofac*. 2011;118(4):215–224.
4. Peterkin GA. Otitis externa. *J Laryngol Otol*. 1979;88:15–21.
5. Monasta L, Ronfani L, Marchetti F, et al. Burden of disease caused by otitis media: systematic review and global estimates. *PLoS ONE*. 2012;7(4):e36226.
6. McCormick A, Fleming D, Charlton J. 4th National Study 1992-1993. London, UK: Office of National Statistics, HMSO; 1995. Morbidity statistics from general practice.
7. Rupa V, Jacob A, Joseph A. Chronic suppurative otitis media: prevalence and practices among rural South Indian children. *International Journal of Pediatric Otorhinolaryngology*. 1999;48(3):217–221.
8. Prasad KC, Prasad SC, Shenoy S, Kumar A. Management of head and neck trauma in a developing country. *Indian J Otolaryngol Head Neck Surg*. 2009;61(suppl 1):35–43.
9. Vaamonde LP, Lechuga GM, Beltran MI, Frade GC, Soto VA, Bartual MJ, Labella CT. Epistaxis: a prospective study on emergency care at the hospital level. *Acta Otolaryngol Esp*. 2000; 51(8):697–702.
10. IbiapinaCda C, Sarinho ES, Camargos PA, Andrade CR, Cruz Filho AA. Allergic rhinitis: epidemiological aspects, diagnosis and treatment. *J Bras Pneumol*. 2008;34:230–40.
11. D'Alonzo GE Jr. Scope and impact of allergic rhinitis. *J Am Osteopath Assoc*. 2002;102(6 Suppl 2):S2–6.
12. Sethi RK, Kozin ED, Remenschneider AK, et al. Subspecialty emergency room as alternative model for otolaryngologic care: implications for emergency health care delivery. *Am J Otolaryngol*. 2014;35(6):758–765.