

Gambaran Variasi Anatomi Septum Deviasi, Konka Bulosa, dan Sinus Etmo-Maksila Pada Populasi Nyeri Kepala Rinogenik Evaluasi dengan Pemeriksaan Tomografi Komputer = Anatomical Variations of Deviated Septal, Konka Bullosa, and Ethmo-Maxillary Sinus in Rhinogenic Headache Populations: Evaluation by Computer Tomography Examination

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Abstrak

Latar belakang: Nyeri kepala sekunder karena variasi anatomi pada mukosa hidung, konka, dan septum dikategorikan dalam lampiran pada International Classification of Headache Disorders – 3. Posisi ini berbeda dan lebih lemah dibanding dengan nyeri kepala sekunder akibat rinosinusitis akut atau eksaserbasi akut pada rinosinusitis kronik. Variasi anatomi pada rongga hidung dan sinus paranasal menjadi stimulasi mekanik berupa kompresi antar mukosa intranasal dan perubahan tekanan barometrik dalam rongga sinus. Studi ini bertujuan untuk mengetahui kecenderungan peran variasi anatomi septum deviasi, konka bulosa, dan sinus etmo-maksila (SEM) sebagai faktor risiko nyeri kepala rinogenik

Metode: Penelitian ini dilakukan dengan menggunakan desain potong lintang pada pasien nyeri kepala rinogenik di Departemen THT RSUPN Dr. Cipto Mangunkusumo, RSUP Persahabatan dan RSUP Fatmawati periode Desember 2022 – Februari 2023. Parameter yang dinilai adalah skor NPRS, NOSE, dan ESS.

Hasil: Proporsi variasi anatomi septum deviasi sebesar 73,8%, konka bulosa sebesar 52,3%, dan sinus etmomaksila sebesar 47,7% pada pasien nyeri kepala rinogenik di RSCM, RSF, dan RSP yang dievaluasi melalui tomografi komputer sinus paranasal. Terdapat perbedaan rerata yang bermakna antar kelompok derajat septum deviasi dan klasifikasi Mladina terhadap skor NPRS, NOSE, ESS ($p < 0,05$). SEM tipe 2 memiliki rerata skor NPRS yang lebih tinggi dibanding SEM tipe 1 namun tidak bermakna secara statistik. Tipe SEM memiliki perbedaan rerata yang bermakna antar kelompok terhadap skor NOSE dan ESS ($p < 0,05$). Jumlah variasi anatomi dan skor ESS memiliki kecenderungan hubungan yang bermakna terhadap skor NPRS ($p < 0,05$). Odds ratio regresi logistik jumlah variasi anatomi dan skor ESS adalah 4,98E9.

Kesimpulan: Proporsi variasi anatomi septum deviasi ditemukan paling banyak pada populasi nyeri kepala rinogenik. Derajat septum deviasi dan klasifikasi Mladina memiliki kecenderungan terhadap derajat nyeri kepala rinogenik. Tipe SEM memiliki kecenderungan hubungan dengan sumbatan hidung dan gangguan napas saat tidur. Jumlah variasi anatomi dan skor ESS menjadi faktor prediktor untuk derajat nyeri kepala rinogenik.

.....Background: Secondary headaches due to anatomic variations in the nasal mucosa, turbinates, and septum are categorized in the appendix to the International Classification of Headache Disorders – 3. This position is different and weaker than secondary headaches due to acute rhinosinusitis or acute exacerbations of chronic rhinosinusitis. This study aims to determine the trend of the role of anatomical variations of septum deviation, concha bullosa, and ethmo-maxillary sinus (SEM) as risk factors for rhinogenic headache. Methods: This study was conducted using a cross-sectional design in rhinogenic headache patients at the

ENT Department of RSUPN Dr. Cipto Mangunkusumo, Friendship Hospital and Fatmawati Hospital for the period December 2022 - February 2023. The parameters assessed were the NPRS, NOSE, and ESS scores. Results: –The proportion of anatomical variations of septum deviation was 73.8%, concha bullosa was 52.3%, and ethmoidmaxillary sinus was 47.7% in patients with rhinogenic headaches at RSCM, RSF, and RSP which were evaluated by computer tomography of the paranasal sinuses. There was a significant mean difference between the groups with the degree of septum deviation and the Mladina classification on the NPRS, NOSE, and ESS scores ($p < 0.05$). SEM type 2 has a higher average NPRS score than SEM type 1 but it is not statistically significant. The SEM type had a significant difference between groups in the NOSE and ESS scores ($p < 0.05$). The number of anatomic variations and the ESS score tended to have a significant relationship with the NPRS score ($p < 0.05$). The logistic regression odds ratio for the number of anatomic variations and the ESS score is 4.98E9.

Conclusion: The proportion of anatomical variations of septum deviation was found to be the highest in the rhinogenic headache population. The degree of septal deviation and the Mladina classification tend to the degree of rhinogenic headache. The SEM type tends to be associated with nasal obstruction and difficulty breathing during sleep. The amount of anatomic variation and ESS score are predictors for the degree of rhinogenic headache.