

Preface

Sinusitis



Jeffrey H. Spiegel, MD, FACS
Guest Editor

According to the US Centers for Disease Control and Prevention National Center for Health Statistics, sinusitis resulted in 13.6 million outpatient physician visits in 2001 alone. Furthermore, more than 16% of the adult population in the United States has been diagnosed with sinusitis.

As otolaryngologists, we have the responsibility of caring for these patients. Although primary care physicians are able to evaluate and care for the majority of these more than 32 million people, the recurrent, chronic, complicated, and otherwise recalcitrant cases need the attention of an otolaryngologist. It is also the otolaryngologist's privilege and duty to continually expand the scope of knowledge about sinusitis and to develop new and better treatment modalities.

Relatively recent advances in sinusitis treatment are many and stem from improved understanding of the pathophysiology of the disease process, including recognition of the importance of sinus mucociliary clearance patterns. Coupled with technological advances, this improved understanding has contributed to the development of new surgical techniques including ever-expanding endoscopic approaches, powered instrumentation, and increasingly valuable image guidance systems.

However, while these may be the most evident advances in sinusitis treatment, improved comprehension of the pathophysiology and treatment of fungal sinusitis and nasal polyps is simultaneously occurring. Similarly, odontogenic sources of sinus disease, anosmia, the prevention and management of skull base complications, and even the clinical importance of subtle anatomic variations are increasingly understood.

I am indebted to the many contributing authors who have devoted their time and expertise to the creation of this issue of the *Otolaryngologic Clinics of North America*. Among these authors are physicians from within the field of otolaryngology and sinusitis experts who provide their valuable points of view as physicians other than head and neck surgeons. I would also like to dedicate this issue to my parents and my son Jacob Harris Spiegel, with gratitude for the many wonderful opportunities you have each provided me.

In putting together this issue, I tried to select topics that will help with specifically challenging clinical situations. When confronted with patients suffering from recalcitrant sinusitis despite prior treatment, sinus headaches, or isolated sphenoid sinusitis, and so forth, I hope you will find the articles in this issue to be valuable and concise guides.

It is my wish that you will enjoy reading this text and will find yourself both enlightened and excited by the renewed vitality within the field of rhinology. It is this excitement, which comes with the recognition of what may be possible, that leads us to the next great advance: allowing us to provide the best possible patient care and keeping otolaryngology as the most vibrant of medical specialties.

Jeffrey H. Spiegel, MD, FACS

Assistant Professor, Department of Otolaryngology–

Head and Neck Surgery

Boston University School of Medicine

88 East Newton Street, D-616

Boston, MA 02118, USA

E-mail address: jeffrey.spiegel@bmc.org