## Nasal floor mucosa

The nasal floor mucosa refers to the moist lining of the nasal cavity that is located at the bottom of the nasal passage, just above the mouth. This mucosa is made up of a thin layer of epithelial cells that secrete mucus and are rich in blood vessels, which helps to humidify and warm the air as it enters the body through the nose. The nasal floor mucosa also contains numerous hair-like structures called cilia that help to filter out particles and debris from the air before it reaches the lungs. The health of the nasal floor mucosa is important for respiratory function, and it can be affected by various factors such as allergies, infections, and irritants.

In a radioanatomical study with clinical correlate, Revuelta Barbero et al. study a variation of the 'extended nasal floor mucosa' (ENFM) free-graft, the purely nasal floor mucosa (PuNFM) free-graft. The objectives of this study are to evaluate the coverage surface area provided by the PuNFM, study the adequacy of the PuNFM in the reconstruction of endoscopic endonasal approach (EEA) transsellar postoperative defects, and compare and evaluate this reconstructive technique with current sellar region reconstruction practices.

Dissections were performed on five cadaveric specimens. PuNFM were harvested bilaterally and the area provided for reconstruction was calculated. Twenty-five consecutive cases of pituitary adenomas resected through an EEA were analyzed to estimate the sellar defect surface area (SDSA) after a transsellar EEA and calculate the area of PuNFM bilaterally.

The median cadaveric SDSA was 4.77 cm2, with a median left and right side PuNFM area of 5.09 and 5.19 cm2, respectively. Clinically, the median SDSA was 5.36 cm2, and the total radiological PuNFM surface area was 5.46 cm2, with modified Knosp grade >2 tumors having larger SDSA than that of Knosp grade <2 tumors. The PuNFM graft proved to be most effective for covering modified Knosp <2 tumor defects.

The PuNFM represents a variation of the ENFM free-graft sellar defect reconstruction technique that provides a sufficient surface area to reconstruct the majority of the sellar defects related to transsellar EAA for pituitary adenomas. This technique may positively impact sinonasal function and quality of life. Future prospective clinical studies are needed to verify these findings <sup>1)</sup>

## 1)

Revuelta Barbero JM, Soriano RM, Porto E, Bray DP, Barrow E, Henriquez O, Solares CA, Pradilla G. Purely nasal floor mucosa-free graft for reconstruction after endoscopic endonasal transellar approach: an anatomical and clinical analysis. Br J Neurosurg. 2023 Apr 21:1-6. doi: 10.1080/02688697.2023.2202233. Epub ahead of print. PMID: 37082915.

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