**COMPARISON OF LONG-TERM CLINICAL RESULTS OF MICRODEBRIDER AND COLD BLADE ADENOIDECTOMY**

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* PMID: **35271480**

**Abstract**

The advantages of endoscopic shaver adenectomy are safety, accuracy of tissue removal, and low relapse rate. However, there is a lack of information about long-term clinical results of this method in the literature that arose a necessity of conducting such a study. The objective of the study - to consider the clinical efficacy of shaver adenectomy in the long-term observation period after the surgery (12-24 months). The study presents a comparison of the long-term results of endoscopic modified microdebrider adenotomy (EMMA) (a variant of shaver transoral combined adenotomy developed by the authors) in 203 children and the cold blade adenectomy (25 children). Evaluation of the results was carried out according to the survey of parents and clinical examination of children 12-24 months after the surgery. According to the survey, EMMA was 22.02% more effective according to the "restoration of nasal breathing" criterion and by 22.5% by the "frequency of acute respiratory infections" criterion in comparison with the cold blade adenectomy. The implementation of this technique in combination with tympanopuncture in children with secretory otitis on the background of pharyngeal tonsil hypertrophy allows achieving better results in the restoration of auditory function by 16.6%. Endoscopic modified microdebrider adenectomy is an effective and safe method for treating children with adenoid hypertrophy, which, according to the results of a long-term observation, allowed achieving a better level of nasal breathing and reducing the frequency of acute respiratory infections compared with cold blade adenectomy.