"FUNGAL SINUSITIS AND CORRELATION WITH HISTOLOGIC FEATURES: A CASE REPORT"

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Introduction: Fungal sinusitis has been clinicopathologically defined as a major form of chronic sinusitis.

It has been classified into four main clinical categories: 2 non-invasive types, the allergic and fungus ball (mycetoma), and 2 invasive types, chronic (indolent) and acute (fulminant). Aspergillus, Actinomices, Mucormycetes and Candida species are the most common causative organism

Objective: In this report the authors describe the correlation between fungal sinusitis and histological features.

Method: We report a case of a patient with an invasive chronic sphenoidal sinusitis. He had a history of diplopia, headache, sense of smell reduction. He was studied by nasal endoscopy, paranasal computed tomography (CT) scans and magnetic resonance (MR) imaging that showed a likely malignant lesion. In addition, he underwent to histological specimens taken from the nasal lesion and from middle turbinate.

Results: The histological features consisted of fragmentes of mucosa with necrosis areas, infiammatory cell infiltrates and fungus hyphae. The culture of nasal fluid showed no evidence of fungal colonization. In view of these reports, thick greenish tissue and necrotic bony sequestra were removed with endoscopic synus surgery. His postoperative course was uneventful. Today nasal lesions had not progressed.

Conclusion: Histological test represent the "gold standard" for diagnosis of fungal sinusitis even if fungal cultures may provide some supportive evidence helpful in the diagnosis. Key words: Fungal sinusitis, Paranasal sinuses desease, Chronic Invasive sinusitis