

Causse Ear Clinic / Clinique Causse

Colombiers (France)



13th International Otology Course 13^{ème} Cours International d'Otologie

June 30 - July 2 / 30 Juin - 2 Juillet

Otosclerosis

Otospongiosis

Cholesteatoma

Cholestéatome

Implantable hearing aids

Prothèses implantables

Ossiculoplasty

Ossiculoplastie

PROGRAM / PROGRAMME

Honorary Guest Faculty



Erwin Offeciers MD PhD, Chairman Univ. ENT Department Sint-Augustinus, Antwerp-Belgium. European Regional Secretary IFOS since 1991. Board member EUFOS since 1991. Founder Member and former President EAONO (2006-2008). Founder Member EAORL-HNS. Former Board Member Politzer Society (1995-2005). Director of the Antwerp Cochlear Implant Program MISA. Main research interests: cochlear implant research, development and clinical application; chronic middle ear pathology; functional and reconstructive middle ear surgery; implantable devices; acoustic neuroma surgery. Prof Offeciers is author / co-author of an extensive list of papers in peer reviewed journals, and have lectured on and demonstrated ear surgery widely throughout the world.



Dennis I Bojrab MD, Chairman and Professor, Otolaryngology Head and Neck Surgery Oakland University William Beaumont School of Medicine, Rochester MI-USA. Dennis Bojrab is the CEO and Director of Research at the Michigan Ear Institute since 1986. He is internationally respected for his expertise in evaluation and management of the patient afflicted with dizziness, medical and surgical treatment of chronic ear infections, hearing restoration, treatment of facial nerve disorders and skull base tumors. Dr. Bojrab has over seventy-five publications and a book published on Cholesteatoma. He works with the industry on developing medical devices to improve the care of patients with hearing loss, ear infections and surgery of the skull base.

International Permanent Faculty



Chris Aldren, FRCS works in Windsor-UK. He has a large otological practice particularly in primary and revision stapes surgery and ossiculoplasty. He runs a highly rated Advanced Middle Ear Surgery Course every year in May at Wexham Park Hospital. He lectures and operates internationally. He is a Board member of LION and the British Society of Otology. He is on the Faculty of the Course since 12 years



David Bowdler, FRCS is a Consultant ENT Surgeon at University Hospital Lewisham, London-UK with a special interest in otology, in particular chronic ear disease and middle ear reconstruction. He is an authority on technologies in middle ear surgery especially the otoendoscope, laser and facial nerve monitoring. He has lectured and written extensively in these areas, internationally. He is on the Faculty of the Course since 13 years..



Silvio Caldas, MD PhD, Professor and Chairman, Otolaryngology Department, Federal University of Pernambuco, Recife-Brazil. Dr Caldas is the President of the Brazilian Otology Society. He has a special interest in Otology, Cochlear Implant and Skull Base Surgery. He is on the Faculty of the Otology Course since 4 years.



Oswaldo Laercio Mendonça Cruz, MD PhD, Professor ENT Department, Otology-Neurotology division, Federal University of Sao Paulo-Brazil. Coordinator of the Otology Center of the Hospital Sírio-Libanês, where he runs several courses yearly. He has a special interest in cholesteatoma, neurotology and skull base procedures and has published numerous articles in these fields. He is on the Faculty of the Course since 5 years.



Sady Selamen Da Costa, Professor ENT Department Federal University of Porto Allegre-Brazil. He is the past President of the Brazilian Society of Otology. Dr Da Costa is a member of several international ENT societies and has published numerous articles in international journals. He is on the Faculty of the Course since 5 years.



Wilko Grolman, MD PhD, Professor and Chairman, Dept. of Otolaryngology University Medical Center Utrecht-Netherlands. He heads the University's training program in ENT. and is Vice President and Director of Research and Education. His primary clinical interests are stapes surgery and cochlear implantation, and has published many publications in these fields. Dr Grolman is President of LION. He is on the Faculty of the Course since 5 years.



Leon Lindsay, FRCS, consultant ENT surgeon at Sunderland Royal Hospital-UK. He has a special interest in Otology and in software engineering and signal processing relating to Otology and Voice. Advisor of the British Standards Panel Medical imaging and multimedia and the Royal College of Surgeon of Edinburgh. He is on the Faculty of the Course since 9 years.



William Moretz Jr, Clinical Professor at the Medical College of Georgia, Augusta-USA. Dr. Moretz has designed more than 60 ventilation tubes, middle ear prostheses and instruments.. He continues to work in the research and development of microsurgical techniques and instrumentation in otology Over 25 years experience having performed more than 9,000 ear surgical procedures. He is on the Faculty of the Course since 4 years.





John Oates, FRCS works in Burton on Trent UK where he leads a busy otology tertiary referral service for otosclerosis, and ossicular reconstruction. He is an invited speaker internationally. He is the President Elect of LION. He is on the Board of the British Society of Otology, and sits on the Executive of EUFOS. He is on the Faculty of the Otology Course since its inception



John Osborne, FRCS Consultant ENT surgeon at Glan Clwyd hospital, North Wales UK. Dr Osborne developed the cochlear implant programme at Glan Clwyd hospital which was the first in Wales to carry out this surgery. He introduced multi-disciplinary paediatric hearing assessment clinic to help children with sensori-neural deafness or educational problems. He is on the Faculty of the Otology Course since its inception.



Neil Sperling, MD Associate Professor, Department of Otolaryngology, SUNY Downstate Medical College, Brooklyn, NY-USA. Alpha Omega Alpha Honor Medical Society and selected by «Best Doctors in America». Dr Sperling is an invited lecturer in many meetings and is a author or co-author of numerous articles and books' chapters in the field of Otology. He is on the Faculty of the Course since 12 years.



Thomas Lenarz, M.D., PhD, Professor and Chairman, ENT Dept, Medical University Hannover-Germany. Membership in national and international societies of ENT and skull base surgery. His Department runs the world's largest cochlear implant programme with more than 5500 patients implanted since 1984. Other fields of clinical interest are skull base surgery and brainstem and midbrain implants. He is on the Faculty of the Course since 2007.

Resident Faculty (Causse Ear Clinic)



Thibaud Dumon, joined the Causse Ear Clinic Otology Group in 2000. Dr Dumon has a special interest in implantable hearing aid and chronic otitis surgery.



Benoit Gratacap, joined the Causse Ear Clinic Otology Group in 1991. Dr Gratacap has a special interest in chronic otitis surgery.



Jacques Magnan, Professor and Chairman, Dept. of Otolaryngology Marseille University Hospital (Nord) until 2010, joined the Causse Ear Clinic Otology Group in 2011. Dr Magnan has a special interest in Neurotology and Skull Base Surgery procedures.



Renaud Pialoux, joined the Causse Ear Clinic Otology Group in 1999. Dr Pialoux has a special interest in chronic otitis and otosclerosis surgery.



Robert Vincent, joined the Causse Ear Clinic Otology Group in 1991. Dr Vincent has a special interest in otosclerosis surgery and congenital malformation.



- 08: 00 Welcome and Registration / Accueil et inscriptions
- 08: 10 Live Surgery: sessions 1A & 1B / *Chirurgie en direct sessions 1A & 1B*
 Cholesteatoma: canal wall up & down technique / Vestibular Neurotomy
Cholestéatome: technique fermée et ouverte / Neurotomie Vestibulaire
 Surgeons / Chirurgiens: Benoit Gratacap, Thibaud Dumon, Jacques Magnan
 Moderators / Modérateurs: David Bowdler, Oswaldo L. Cruz, Jon Osborne
- 10: 00 Pause
- 10: 20 Technical considerations: chronic ear surgery /
 Considérations techniques: chirurgie de l'otite chronique
 Otoendoscopy in CSOM / Endoscopie en chirurgie de l'otite chronique: David Bowdler
 Retraction Pocket / Poches de Rétraction: Neil Sperling
 CSOM surgery : Disease eradication and functional preservation /
Chirurgie de l'otite chronique: éradication de la pathologie et préservation de l'audition: Oswaldo Laercio Cruz
- 11: 20 Live Surgery: sessions 2A & 2B / *Chirurgie en direct sessions 2A & 2B*
 EAC Stenosis & Med-El Vibrant Soundbridge middle ear implantation /
Sténose du CAE & Implant d'oreille moyenne Med-El Vibrant Soundbridge
 Surgeons / Chirurgiens: Benoit Gratacap, Thibaud Dumon
 Moderators / Modérateurs: Neil Sperling, Sady Selamen Da Costa, Leon Lindsay
- 13: 00 Lunch (Grand floor) / *Lunch (Rez-de-chaussée)*
- 14: 00 Honorary guest lecture / *Conférence invité d'honneur*
 The bony obliteration technique in cholesteatoma surgery: rationale, technique & results / Technique d'oblitération osseuse en chirurgie du cholestéatome: *rationnel, technique & résultats*
 Erwin Offeciers
- 14: 30 New trends in Ossicular Reconstruction / *Nouvelles techniques d'ossiculoplastie*
 Malleus relocation, silastic banding & malleus replacement prosthesis (MRP) /
Reposition du marteau, anneau silastic et prothèse marteau (MRP)
 Robert Vincent
- 15: 00 Pause
- 15: 20 Otology-Neurotology Database (ONDB): Prospective Evaluation & Audit in Otology /
ONDB: Évaluation Prospective des Résultats & Audit en Otologie.
 Robert Vincent
- 15: 40 Cholesteatoma, middle ear disease or external ear disease ? /
Cholestéatome: pathologie de l'oreille moyenne ou de l'oreille externe ?
 Jacques Magnan
- 16: 00 Update in Implantable Hearing Aid / *Mise au point sur les prothèses implantables:*
 Thibaud Dumon
- 16: 20 The Grand Inquisition: implantable hearing aid /
Grande Inquisition: prothèses implantables
 Grand Inquisitor / Grand Inquisiteur: Jonathan Osborne
 Panel: Denis Bojrab, Silvio Caldas, Thibaud Dumon, Wilko Grolman, Thomas Lenarz, Jacques Magnan, Erwin Offeciers
- 17: 20 Adjourn / *Fin du programme scientifique*
- 17: 40 Free shuttle bus service from the Clinic to Béziers downtown / Service de navette gratuite vers le centre de ville de Béziers
- 20: 30 Welcome reception & dinner / *Réception de bienvenue et dîner*
 Chateau de la Tour, Montady - Spanish Dressage Horse Show / *Démonstration de Dressage: Andalucia de Doma Vaquera:* Jean-Michel Nègre, National French Champion / *Champion de France* - Free shuttle bus service from Béziers Downtown at 19:30 / Service de navette gratuite depuis le centre de ville de Béziers à 19h 30
 Departure by bus from the Clinic at 20: 15 / *Départ de la Clinique par bus à 20h 15*



Live Surgery
Chirurgie en direct

Session 1A : Benoit Gratacap

CHOLESTEATOMA

OR / Bloc 6

CHOLESTEATOMA

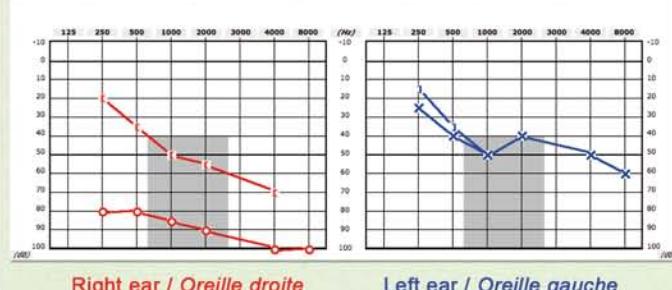
OR / Bloc 5

Right ear: Tympanoplasty for CSOM with cholesteatoma. Canal wall up technique. **Oreille gauche:** Tympanoplastie en technique fermée pour cholestéatome.

Clinical: 79 y.old male. Progressive right-sided hearing loss with intermittent otorrhoea. Otoscopy: right attical cholesteatoma; left ear normal.

Clinique: Homme de 79 ans. Surdité droite progressive avec otorrhée intermittente. Otoscopie: cholestéatome attical droit; oreille gauche normale.

Pure tone audiometry / audiométrie tonale



Live Surgery
Chirurgie en direct

Session 1B : Thibaud Dumon

CHOLESTEATOMA

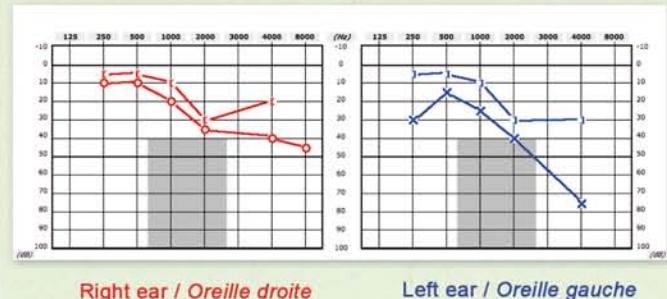
OR / Bloc 5

Left ear: Tympanoplasty for CSOM with cholesteatoma. Canal wall down technique. **Oreille gauche:** Tympanoplastie en technique ouverte pour cholestéatome.

Clinical: 63 y.old male. Previous left tympanoplasty for CSOM with cholesteatoma (other surgeon) in 1980. Left progressive hearing loss with chronic otorrhoea. Otoscopy: right ear, atrophic TM with myringoincudopexy; left ear, posterior TM perforation unstable open cavity.

Clinique: Homme de 63 ans. Tympanoplastie gauche pour cholestéatome en 1980 (autre chirurgien). Surdité gauche progressive avec otorrhée chronique. Otoscopie: oreille droite, tympan atrophique et myringo uncudopexie; oreille gauche, perforation postérieure et cavité ouverte instable.

Pure tone audiometry / audiométrie tonale



Live Surgery
Chirurgie en direct

Session 1C : Jacques Magnan

VESTIBULAR NEUROTOMY

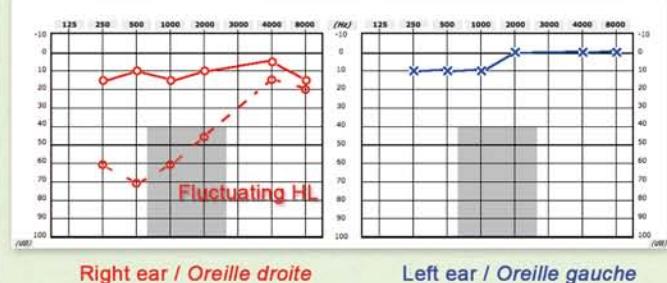
OR / Bloc Ch

Right ear: Vestibular neurotomy for Meniere's Disease. Retrolabyrinthine approach. **Oreille droite:** Neurotomie vestibulaire pour Maladie de Ménière. Voie rétro-labyrinthique.

Clinical: 48 y.old female. Right-sided Meniere's disease since 2 years despite medical treatment. Severe attacks of rotatory vertigo with right-sided fluctuating hearing loss: 1 per month.

Clinique: Femme de 48 ans. Maladie de Ménière droite évoluant depuis 2 ans malgré un traitement médical bien suivi. 1 crise par mois avec vertiges rotatoires et surdité droite fluctuante.

Pure tone audiometry / audiométrie tonale



Live Surgery
Chirurgie en direct
Session 2A : Benoit Gratacap

EAC STENOSIS
OR / Bloc 6

Live Surgery
Chirurgie en direct
Session 2B : Thibaud Dumon

MIDDLE EAR IMPLANT
OR / Bloc 5



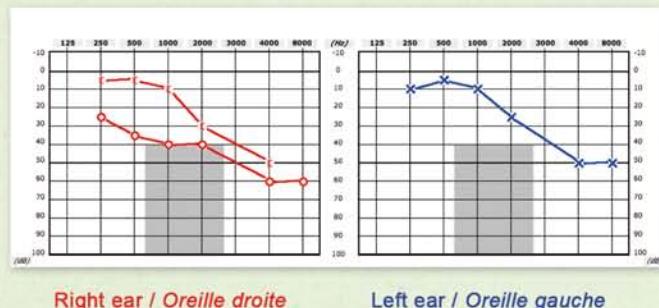
Right ear: Skin grafting technique for EAC stenosis.

Oreille droite: Greffe de peau pour sténose du CAE

Clinical: 57 y.old male. History of repeated right-sided external otitis with myringitis. No history of ear surgery. Long-term stable right hearing loss.No otorrhoea. Otoscopy: right ear, medial stenosis of the EAC; left ear normal

Clinique: Homme de 57 ans. Otites externes droites répétées avec myringite. Pas d'antécédent chirurgical. Surdité droite stable. Pas d'otorrhée. Otoscopie: oreille droite, sténose partie profonde du CAE; oreille gauche normale.

Pure tone audiometry / Audiométrie tonale



Left ear: Med-El Vibrant Soundbridge middle ear implant.
Oreille gauche: Implant d'oreille moyenne Med-El Vibrant Soundbridge.

Clinical: 74 y.old female. History of CSOM. Progressive bilateral hearing loss more severe on the left ear. Intermittent left otorrhoea. This patient is using a conventional hearing aid on her right ear. Otoscopy: left ear, EAC stenosis; right ear, normal.

Clinique: Femme de 74 ans. Long passé d'otite chronique. Surdité progressive bilatérale plus sévère à gauche. Otorrhée gauche intermittente. Appareillage auditif sur l'oreille droite. Otoscopie : oreille gauche, sténose du CAE; oreille droite normale.

Pure tone audiometry / Audiométrie tonale



08: 00	Welcome / Accueil
08: 10	<p>Live Surgery: session 3A & 3B / <i>Chirurgie en direct sessions 3A & 3B</i> Otosclerotic stapes fixation. Primary surgery: CO₂ laser with Omniduide fiber stapedotomy / <i>Fixation stapédienne par otospongiose. Chirurgie primaire: Stapédotomie avec laser CO₂ et fibre Omniduide</i> Surgeons / Chirurgiens: Renaud Pialoux, Robert Vincent Moderators / Modérateurs: John Oates, Silvio Caldas, William Moretz</p>
09: 10	<p>Technical considerations: otosclerosis / Chronic otitis <i>Considérations techniques: otospongiose / otite chronique</i> Primary Otosclerosis / <i>Otospongiose primaire:</i> Sady Selamen Da Costa, Wilko Grolman Ossicular reconstruction / <i>Reconstruction ossiculaire:</i> William Moretz</p>
10: 10	Pause
10: 30	<p>Live Surgery: session 4A & 4B / <i>Chirurgie en direct sessions 4A & 4B</i> Primary and revision surgery for otosclerosis: CO₂ laser with Omniduide fiber stapedotomy / <i>Otospongiose primaire et reprise: Stapédotomie avec laser CO₂ et fibre Omniduide</i> Surgeons / Chirurgiens: Renaud Pialoux, Robert Vincent Moderators / Modérateurs: Chris Aldren, Sady Selamen Da Costa, Leon Lindsay</p>
11: 30	<p>Interventions into the inner ear - current status of hearing preservation, cochlear implantation and beyond / <i>Chirurgie sur l'oreille interne - préservation de l'audition, implant cochléaire et au-delà.</i> Thomas Lenarz</p>
12: 00	Lunch (Grand floor) / <i>Lunch (Rez-de-chaussée)</i>
14: 00	<p>Honorary guest lecture / Conférence invité d'honneur Ossicular Reconstruction: How I Do It / <i>Reconstruction Ossiculaire: Mes Techniques</i> Denis Bojrab</p>
14: 30	<p>Stapes surgery: Otosclerosis & Congenital Malformation. Rules & Hints / <i>Chirurgie stapédienne: otospongiose et malformations congénitales. Règles & Principes</i> John Oates, Robert Vincent</p>
15: 30	Pause
15: 50	<p>The Grand Inquisition in stapes surgery / <i>Grande Inquisition en chirurgie stapédienne</i> Grand Inquisitor / <i>Grand Inquisiteur:</i> Neil Sperling Panel: Chris Aldren, Denis Bojrab, Oswaldo Laercio Cruz, Sady Selamen Da Costa, Thomas Lenarz, John Oates, Erwin Offeciers, Wilko Grolman</p>
17: 00	Adjourn / <i>Fin du programme scientifique</i>
17: 20	Free shuttle bus service from the Clinic to Béziers downtown / <i>Service de navette gratuite vers le centre de ville de Béziers</i>
20: 00	<p>Gala dinner / <i>Dîner de gala</i> Registration is required for the gala dinner as sitting is limited / <i>Inscription obligatoire pour le dîner de gala car nombre de places limité</i> <i>(Dressing code: casual / Habillement: informel)</i> Hôtel Château de Lignan (Lignan sur Orb) Free shuttle bus service from Béziers Downtown at 19:00 / <i>Service de navette gratuite depuis le centre de ville de Béziers à 19h 00</i> Departure by bus from the Clinic at 19:30 / <i>Départ par bus de la Clinique à 19h 30</i></p>

Live Surgery
Chirurgie en direct
Session 3A : Renaud Pialoux

STAPES SURGERY

OR / Bloc 5

Live Surgery
Chirurgie en direct
Session 3B : Robert Vincent

STAPES SURGERY

OR / Bloc 6



Right ear: Otosclerosis primary surgery. Stapedotomy with vein graft interposition. Transcanal approach. CO₂ laser with the Omniduide fiber. **Oreille droite:** Otospongiose primaire. Stapédotomie avec interposition veineuse. Abord trans-canalaire. Laser CO₂ avec fibre Omniduide.

Clinical: 47 y.old female. Progressive right-sided hearing loss. No tinnitus nor dizziness. No family history of deafness. Otoscopy: normal. Tuning fork: Weber test lateralized towards the right ear.

Clinique: Femme de 47 ans. Surdité droite progressive sans acouphène ni vertige. Pas d'antécédents familiaux de surdité. Otoscopie: normale. Diapason: Weber latéralisé sur l'oreille droite.

Pure tone audiometry / Audiométrie tonale



Right ear / Oreille droite

Left ear / Oreille gauche

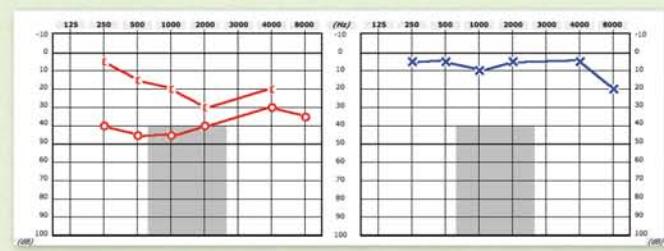


Right ear: Otosclerosis primary surgery. Stapedotomy with vein graft interposition. Transcanal approach. CO₂ laser with the Omniduide fiber. **Oreille droite:** Otospongiose primaire. Stapédotomie avec interposition veineuse. Abord trans-canalaire. Laser CO₂ avec fibre Omniduide.

Clinical: 47 y. old male. Progressive right-sided hearing loss. No tinnitus nor dizziness. Personal and family history negative. Otoscopy: normal both sides. Tuning fork: Weber tests lateralized towards the right ear.

Clinique: Homme de 47 ans. Surdité droite progressive. Antécédents personnels négatifs. Otoscopie normale des 2 côtés. Diapason: Weber latéralisé vers l'oreille droite.

Pure tone audiometry / Audiométrie tonale



Right ear / Oreille droite

Left ear / Oreille gauche



Live Surgery

Chirurgie en direct

Session 4A : Renaud Pialoux

STAPES SURGERY

OR / Bloc 5

Live Surgery

Chirurgie en direct

Session 4B : Robert Vincent

STAPES SURGERY

OR / Bloc 6

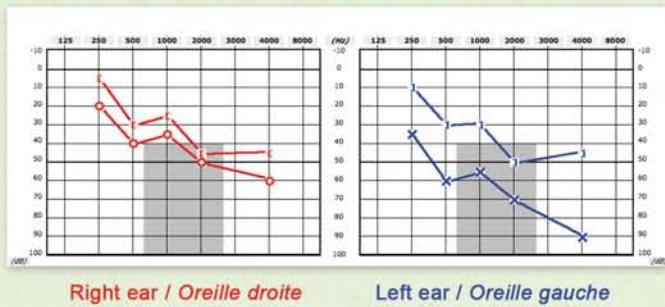


Left ear: Otosclerosis primary surgery. Stapedotomy with vein graft interposition. Transcanal approach. CO₂ laser with the Omnidrive fiber. **Oreille gauche:** Otospongiosis primaire Stapédotomie avec interposition veineuse. Abord trans-canalaire. Laser CO₂ avec fibre Omnidrive.

Clinical: 44 y.old male. Bilateral progressive hearing loss more severe on the left ear. No tinnitus nor dizziness. No family history of deafness. Otoscopy: normal. Tuning fork: Weber lateralised towards the left ear.

Clinique: Homme de 44 ans. Surdité bilatérale progressive plus importante à droite. Aucun acouphène ni vertige. Pas d'antécédents familiaux de surdité. Otoscopie: normale. Acoumétrie au diapason: Weber latéralisé sur l'oreille gauche.

Pure tone audiometry / Audiométrie tonale



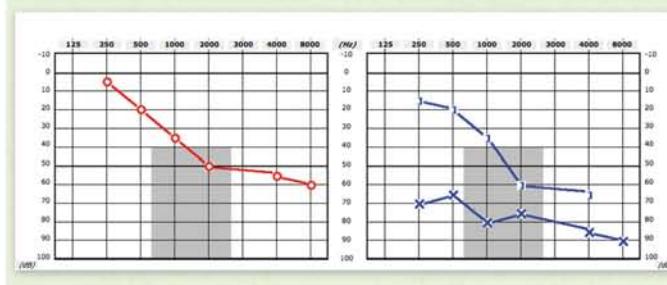
Left ear: Revision tympanoplasty. Transcanal approach. CO₂ laser with the Omnidrive stapedotomy.

Oreille gauche: Reprise tympanoplastie. Abord transcanalaire. Stapédotomie avec laser CO₂ et fibre Omnidrive.

Clinical: 53 y.old male. Long-term history of repeated otitis. Left-sided stable hearing loss without otorrhoea. History of 2 previous tympanoplasty (other surgeon). Last operation in 2009: middle ear exploration revealed a stapes fixation. No stapedectomy was attempted. Otoscopy: normal. Family history of deafness. Tuning fork: Weber lateralized towards the left ear.

Clinique: Homme de 53 ans. Long passé d'otite chronique. Surdité gauche stable sans otorrhée. 2 précédentes tympanoplasties (autre chirurgien). Lors de la dernière intervention en 2009, découverte d'une ankylose stapédiennne non traitée. Surdité familiale. Otoscopie: normale. Acoumétrie: Weber latéralisé vers l'oreille gauche au diapason.

Pure tone audiometry / Audiométrie tonale



- 08: 30 Welcome / Accueil
- 08: 40 Live Surgery: session 5A & 5B / Chirurgie en direct sessions 5A & 5B
Ossiculoplasty with titanium and HA/titanium prosthesis - Malleus relocation & silastic banding technique - Malleus Replacement Prosthesis (MRP) / *Ossiculoplastie par prothèse titane et HA/titane - Reposition du marteau et anneau silastic - Prothèse néo-malleus (MRP)*
Surgeons / Chirurgiens: Thibaud Dumon, Robert Vincent
Moderators / Modérateurs: Neil Sperling, Jonathan Osborne, William Moretz
- 09: 40 Technical considerations: Ossicular reconstruction /
Considérations techniques: Reconstruction ossiculaire
Technical aspects of Ossiculoplasty / Techniques d'ossiculoplastie: Chris Aldren
Hearing preservation & disease eradication in CSOM / *Préservation de l'audition et traitement curatif en chirurgie de l'otite chronique*: Silvio Caldas
- 10: 20 Pause
- 11: 00 Live Surgery: session 5C & 5D / Chirurgie en direct sessions 5C & 5D
Ossiculoplasty with titanium and HA/titanium prosthesis - Malleus relocation & silastic banding technique /
Ossiculoplastie par prothèse titane et HA/titane - Reposition du marteau et anneau silastic
Surgeons / Chirurgiens: Renaud Pialoux, Benoit Gratacap
Moderators / Modérateurs: Sady Selamen Da Costa, William Moretz,
- 12: 30 Adjourn / Fin du programme scientifique -
Lunch (ground floor) / Lunch (rez-de-chaussée)

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Live Surgery

Chirurgie en direct

Session 5A : Robert Vincent

OSSICULOPLASTY

OR / Bloc 6



Left ear: Revision tympanoplasty. Ossiculoplasty with HA-Titanium total prosthesis (TORP) and Malleus Replacement Prosthesis (MRP). **Oreille gauche:** Reprise de tympanoplastie. Ossiculoplastie par prothèse totale HA-Titane (TORP) et Prothèse Marteau (MRP)

Clinical: 63 y.old female. Long history of repeated otitis since childhood. Right type 1 tympanoplasty in 2001 (R. Vincent), with good result. Left type 1 tympanoplasty in 2002 (R. Vincent), with good initial result over 6 years. Revision left tympanoplasty in 2008 (R. Vincent) for mixed hearing loss after 6 years related to incus erosion; ossiculoplasty with TORP, malleus relocation and silastic banding technique: immediate failure. Stable residual hearing loss. Otoscopy: normal position of the prosthesis' head.

Clinique: Femme de 63 ans. Long passé d'otite chronique. Myringoplastie droite en 2001 (R. Vincent) avec bon résultat stable. Myringoplastie gauche en 2002 (R. Vincent) avec bon résultat initial puis surdité progressive après 6 ans. Reprise de tympanoplastie gauche en 2008 (R. Vincent): lyse de l'enclume. Ossiculoplastie par prothèse totale (TORP) avec reposition du marteau et anneau en silastic: échec immédiat avec surdité résiduelle stable. Otoscopie: position normale de la tête de la prothèse.

Pure tone audiometry / Audiométrie tonale



Right ear / Oreille droite

Left ear / Oreille gauche

Live Surgery

Chirurgie en direct

Session 5B : Thibaud Dumon

OSSICULOPLASTY

OR / Bloc 5

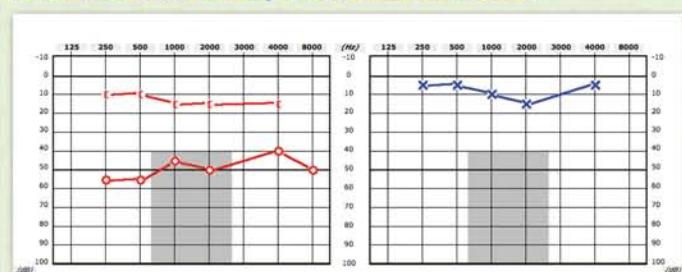


Right ear: Revision tympanoplasty with ossiculoplasty. Titanium prosthesis. **Oreille droite:** Reprise de tympanoplastie. Ossiculoplastie par prothèse titane

Clinical: 24 y.old male. History of CSOM with cholesteatoma. Previous failed right tympanoplasty (other surgeon) in 2004: canal wall down technique. Residual right TM perforation without otorrhoea. Otoscopy: right ear, TM perforation with unstable open cavity; left ear normal.

Clinique: Homme de 24 ans. Cholestéatome opéré en technique ouverte en 2004 (autre chirurgien) avec perforation tympanique résiduelle sans otorrhée. Otoscopie : oreille droite, perforation tympanique et cavité de technique ouverte avec épidermisation incomplète; oreille gauche normale.

Pure tone audiometry / Audiométrie tonale



Right ear / Oreille droite

Left ear / Oreille gauche



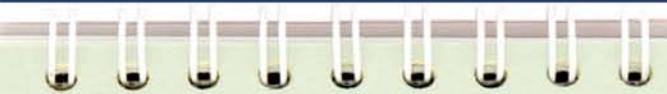
Live Surgery

Chirurgie en direct

Session 5C : Benoit Gratacap

OSSICULOPLASTY

OR / Bloc 6



Left ear: Revision tympanoplasty. Ossicular reconstruction with HA-Titanium prosthesis. Malleus relocation & silastic banding technique. **Oreille gauche:** Reprise de tympanoplastie. Reconstruction ossiculaire avec prothèse HA-Titanite. Reposition du marteau et anneau silastic.

Clinical: 67 y.old female. History of repeated otitis. 1st failed left tympanoplasty with incus transposition in 2004 (other surgeon). Revision left tympanoplasty (B. Gratacap) in 2009: ossiculoplasty with TORP (malleus to stapes footplate procedure). Good initial result over 1 year. Recurrent left hearing loss since few months. Otoscopy: left ear, prosthesis dislocation; right ear normal.

Clinique: Femme de 67 ans. Long passé d'otites chroniques. Echec d'une 1ère tympanoplastie en 2004 avec transposition d'enclume (autre chirurgien). Reprise de tympanoplastie gauche en 2009 (B Gratacap): ossiculoplastie par TORP. Bon résultat initial stable sur 1 an suivi d'une surdité récidivante depuis quelques mois. Otoscopie : oreille gauche, bascule de la prothèse; oreille droite normale,

Pure tone audiometry / Audiométrie tonale



Live Surgery

Chirurgie en direct

Session 5D : Renaud Pialoux

OSSICULOPLASTY

OR / Bloc 5

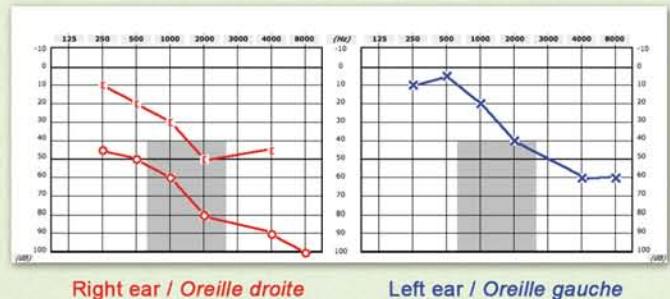


Right ear: Tympanoplasty with ossicular reconstruction. HA-Titanium prosthesis and silastic banding technique. **Oreille droite:** Tympanoplastie avec ossiculoplastie. Prothèse HA-Titanite et anneau silastic.

Clinical: 69 y.old female. Long-term history of repeated otitis. 3 previous right tympanoplasty (other surgeon). Last previous operation in 1978 with good hearing results. Progressive recurrent right hearing loss since few years. No otorrhoea. Otoscopy: right ear, atrophic TM. Left ear normal.

Clinique: Femme de 69 ans. Long passé d'otites à répétition. Antécédent de 3 précédentes tympanoplasties droites. Dernière intervention en 1978 avec bon résultat initial. Surdité droite progressive depuis quelques années. Otoscopie: oreille droite, tympan atrophique; oreille gauche normale.

Pure tone audiometry / Audiométrie tonale



Free internet access / Accès internet gratuit

Free internet access is available during the course. The 2 terminals are located at the ground floor of the clinic (F) / *Accès internet gratuit pendant le cours avec 2 bornes internet au rez-de-chaussée (F)*

Certificate of attendance - CME Credit / Certificat de présence - FMC

The 13th International Otology Course has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME) and is designed for up to 15 CME credits. Certificate of attendance and CME forms will be available at the registration desk of the course (F: ground floor) / *Le 13ème Cours International d'Otologie a été accrédité par le Conseil Européen d'Accréditation pour la FMC (EACCME) pour un maximum de 15 points. Les certificats de présence et de FMC sont à retirer au bureau des inscriptions (F: rez-de-chaussée)*

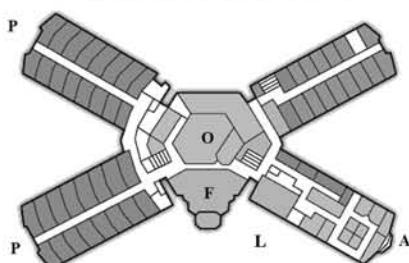
Recording of the Course / Enregistrement du Cours:

The entire program of the 13th International Otology Course will soon be available both in the e-library of the Live International Otolaryngology Website (LION) at: www.lion-web.org and on a DVD. You can pre-order the DVD at the registration desk / *Le programme complet du 13ème Cours d'Otologie sera rapidement disponible sur la e-library du site internet du Live International Otolaryngology Network (LION): www.lion-web.org, ainsi que sur DVD que vous pouvez réserver au bureau des inscriptions.*

Lunch, exhibits / Lunch, stands

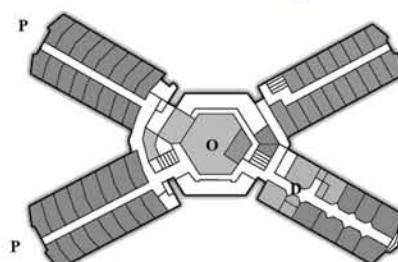
Exhibits are located at the ground floor (F) and the otology department (D) / *Les stands sont situés au rez de chaussée (F) et au niveau du département d'otologie (D).* Lunch takes place in front of the Clinic building (L) / *Lunch en face de la Clinique (L)*

Ground floor / Rez de chaussée



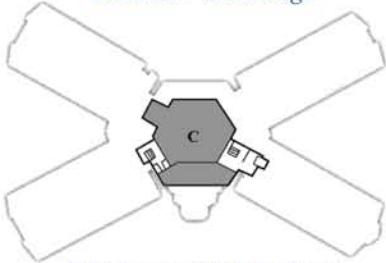
F: Front desk main entry (registration) / Bureau des inscriptions
 entrée principale - P: Patient's room / Chambres des patients -
 A: Audiometry department / Département d'audiométrie -
 O: Operating theatres 1 to 3 / Salles d'opérations 1 à 3

1st floor / 1er étage



O: Operating theatres 4 to 9 / Salles d'opérations 4 à 9 -
 D: Otology Department / Département d'otologie -
 P: Patient's room / Chambres des patients

2nd floor / 2ème étage



C: Conference room / Salle de conférence

