ISSHL. A survey of 373 otolaryngologists of the Dutch Society for Oto-Rhino-Laryngology and Cervico-Facial Surgery was carried out with a response rate of 64%. In the Netherlands ISSHL is diagnosed by otolaryngologists in 1100-1500 patients per year. The most popular hypotheses with regard to the aetiology of ISSHL are impairment of the labyrinthine blood supply (71%) or a virus infection of the labyrinth (55%). Auto-immune labyrinthitis (30%) or inner ear membrane rupture (13%) are less frequently proposed as possible causes of ISSHL.

Psychoacoustic tests for the estimation of hearing status
TH.S.KAPTEYN, S.E.KRAMER, J.M.FESTEN & H.TOBI (Amsterdam)

Auditory disability is a result of hearing impairment and is concerned with difficulties that hearing impaired subjects experience in daily life. Since it is known that pure-tone audiometry is a poor predictor of (facets of) auditory difficulty in everyday life, self-reporting became an important tool in order to probe the domain of hearing disability. In our study we developed the Amsterdam Inventory of Hearing Disability and Handicap, including 30 questions, dealing with everyday life situations. Factor analysis on the reports of 274 subjects resulted in five factors, interpreted as: distinction of sounds, intelligibility in quiet, intelligibility in noise, auditory localization, detection of sounds. In an attempt to predict these separated facets of disability from psychoacoustic tests, a test battery was developed. Included were: PTA, speech discrimination, speech reception threshold in quiet and in noise, voice recognition, localization. Scale scores and test results of 50 individuals were subjected to multivariate regression analysis. Close multiple correlations (ranging from 0.53 to 0.78) were found between predicted and reported scale scores. Different facets of disability related to specific auditory tests.

This study emphasizes that both the inventory and the psychoacoustic test battery are useful tools in validating different aspects of hearing status.

Long-term results of conservative and surgical treatment of nasal polyps
E.W.J.WIELINGA, L.OLE-LENGINE, P.L.M.HUYGEN & J.J.S.MULDER (Nijmegen)

The results of treatment of nasal polyps are often disappointing in the long term. In several studies recurrence rates of 5 to 60% are mentioned, irrespective of the method of treatment.

The aim of this study was the evaluation and comparison of several methods of treatment. The methods used over a period of 11 years were: conservative treatment with corticosteroids, conventional surgery (polypectomy, Caldwell-Luc operation, Luc de Lima and external ethmoidectomy) and functional endoscopic sinus surgery (FESS).

A retrospective analysis was conducted among 449 patients, who were treated for nasal polyps at the ENT department of the Academic Hospital Nijmegen between 1981 and 1992. The recurrence after polypectomy was 50%, after conventional surgery 32% and after FESS 15%. The recurrence percentage after corticosteroid therapy was 80%. By means of life table analysis it was concluded that, although polypectomy, conventional surgery and FESS have only moderate long-term results, these methods are the best that can be offered, and corticosteroids should be reserved as adjuvant medication.

Questionnaire on the use of lasers by otolorhinolaryngologists in The Netherlands
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All university hospitals and some general hospitals have CO₂ and Nd-YAG laser equipment. A number of general hospitals only have a Nd-YAG or a CO₂ laser. The Argon laser is used in one university hospital. Photodynamic therapy is only used experimentally. Other lasers are not used in ENT. Most laser equipment is used together with other specialists: the CO₂ laser with gynaecologists, maxillofacial surgeons, urologists and general surgeons; the Nd-Yag laser with chest physicians, urologists, gastroenterologists, neurosurgeons and gynaecologists; the Argon laser with dermatologists and ophthalmologists.

The laser is used in approximately 1000 procedures a year for 20 different indications. The CO₂ laser is used for 75% of the procedures, the Nd-YAG laser for 20% and the argon for 5% (stapedotomy); 90% of all laser treatments are done in university hospitals. The number of complications is small. Tube ignition has been reported four times in total. A few cases of mediastinal oedema are reported after treatment of Zenkers diverticulum. No injuries to medical personnel have been reported.

The treatment of congenital and iatrogenic stenosis of the nasal vestibule
G.J.NOLST TRENITÉ (Amsterdam)

Impaired breathing due to narrowing of the nasal vestibule is a difficult problem which needs surgical treatment.

The results of surgical correction of congenital and iatrogenic stenosis is often disappointing. A good early post-operative result can be spoiled by scar tissue retraction during the process of healing. Analysis of 52 rhinoplasties in patients