

Xolboyev Farhod Shavlat o'g'li

Samarkand State Medical University, Samarkand, Uzbekistan

Abstract: *Although benign vascular tumors of the head and neck are common, external auditory canal tumors are incredibly uncommon. We present three examples of external auditory canal-specific benign vascular tumors.*

Key words: *diagnosis, treatment, tumors, ear.*

Introduction: To enhance the effectiveness of treatment and prevention of recurrences in patients with vascular tumors of the ear by improving early diagnosis and surgical treatment methods through an appropriate combination of surgical intervention and cryodestruction.

Materials and Methods: The study is based on the results of examination and comprehensive treatment of 28 patients with vascular tumors of the ear, conducted at the ENT department of the Samarkand State Medical University multidisciplinary clinic from 2018 to 2024. The patients were divided into three groups: Group I (chemodectoma) with 10 patients (%), Group II (capillary hemangioma of the auricle) with 7 patients (%), and Group III (glomus tumors of the middle ear) with 4 patients (%).

Results: Most patients (10, or 47.6%) were in the age group of 15-20 years, 8 patients (19%) were 25-30 years old, 3 patients (14%) were over 50 years old. There were 11 female patients (52.4%) and 10 male patients (47.6%), indicating an almost equal distribution by gender. The main complaints of patients were pulsatile tinnitus (90%), hearing loss (7%), ear pain (2%), dizziness, and purulent discharge with blood from the ear (1%). Surgical treatment results (tumor excision) showed no recurrence in 17 patients (81%), while recurrences occurred in 4 patients (19%). In cases of combined treatment (surgical tumor removal + cryotherapy), the condition of patients improved significantly.

Conclusions: Based on the above, it can be noted that vascular tumors were present in all age groups with an equal frequency in both genders. Additionally, it is noteworthy that hemangiomas and chemodectomas present with symptoms such as tinnitus, hearing loss, purulent discharge with blood from the ear (in cases of middle ear tumors), and ear pain. The combination of these symptoms serves as a preventive criterion for oncological vigilance among doctors.

References

1. Casler JD, White JD, Montgomery E. Pyogenic granuloma of the external auditory canal. *Ear Nose Throat J.* 1989;68:266–267.
2. Courtney MJ, Koleda CB, Titchener G. Aural granuloma gravidarum. *Otolaryngol Head Neck Surg.* 2003;129:149–151. doi: 10.1016/S0194-5998(03)00145-1.
3. Covelli E, De Seta E, Zardo F, De Seta D, Filipo R. Cavernous haemangioma of external ear canal. *J Laryngol Otol.* 2008;122:e19. doi: 10.1017/S0022215108002909.
4. Hawke M, van Nostrand P. Cavernous hemangioma of the external ear canal. *J Otolaryngol.* 1987;1(16):40–42.
5. Hsu CH, Chen HC, Wang CH. Bilateral external auditory canal pyogenic granuloma. *Otolaryngol Head Neck Surg.* 2008;139:596–597. doi: 10.1016/j.otohns.2008.06.029.
6. Krueger RA, Porto D. Pathologic quiz case 2. Benign capillary hemangioma. *Arch Otolaryngol Head Neck Surg.* 1988;11(1480–1481):1483.
7. Limb CJ, Mabrie DC, Carey JP. Hemangioma of the external auditory canal. *Otolaryngol Head Neck Surg.* 2002;126:74–75. doi: 10.1067/mhn.2002.120697.
8. Luca O, de Zinis Redaelli, Galtelli C, Marconi A. Benign vascular lesions involving the external ear canal. *Auris Nasus Larynx.* 2007;34:369–374. doi: 10.1016/j.anl.2006.11.002.

9. Mangham CA, Carberry JN, Brackmann DE. Management of intratemporal vascular tumors. *Laryngoscope*. 1981;91:867–876. doi: 10.1288/00005537-198106000-00002.
10. Martines F, Bentivegna D, Maira E, Marasà S, Ferrara S. Cavernous haemangioma of the external auditory canal: clinical case and review of the literature. *Acta Otorhinolaryngol Ital*. 2012;32:54–57.