specification- 9 patient, acute tonsillitis- 8 patients, chronic tonsillopharyngitis- 3 patients and chronic compensated tonsillitis- 1 patient. Bilateral tonsillectomy was performed in 166 cases (79.8%), in one case there was only left side tonsillectomy done (0.48%). For 40 patients (40%) bilateral tonsillectomy was a planned procedure as well as the only one unilateral tonsillectomy (0.48%). As an acute procedure, the tonsillectomy was performed for 60 patients because of the unilateral peritonsillar abscess, but six patients had bilateral peritonsillar abscesses (2.9%). Postoperative complications had 170 (82%) patients. The most common complaints were following: 70 (34%) patients had dry throat, discomfort in the throat, 47 (23%) patients had pain in the throat, 51 (24%) patients had swallowing difficulties, 1 (0.48%) patient had bleeding, 1 (0.48%) patient had temperature 38.1°C.

Conclusions. Most of cases tonsillectomy were done as an acute surgery because of the complications of chronic tonsillitis. There were no significant complications after both- planned and acute surgeries. By increasing tonsillectomy rate as a planned procedure, it would be possible to avoid complications of chronic tonsillitis.

SURGICAL TREATMENT OF SECRETORY OTITIS MEDIA IN CHILDREN’S UNIVERSITY HOSPITAL 2012-2014
Author: Silva Smagare¹, Dace Danberga¹
Scientific research supervisor: Janis Sokolovs²
¹Riga Stradiņš university, Faculty of Medicine
²Children’s University Hospital

Introduction. Otitis media with effusion (OME) is one of the commonest conditions of childhood. Approximately 80% of children suffer from OME at some point before reaching school age. It can lead to conductive hearing loss. While hearing loss can lead to delayed speech and language development. Many treatment options are available medical as well as surgical. Well known surgical options are - paracentesis or myringotomy, tympanostomy and their combinations with adenoidectomy.

Children in whom OME persists after 3 months may require action which include surgery.

Aim. To gather latest data of surgical manipulations in Children’s University hospital, Latvia and compare it to previous statistical research data made in 2010. Also obtain differences between age groups and sexes. As well
as explore mutual dynamics of surgical manipulations used in treatment of secretory otitis media.

**Results.** There were collected data about 738 operations performed in Children’s Clinical University Hospital during time period from 1st November of 2012 to 31st January of 2014 and compared it with 821 same operations in period of time from 31st October of 2008 to 31st December of 2009.

Results shows that there is 4.6% decrease in number of manipulations used in treatment of OME. There was also statistically significant differences between age groups (p < 0.001), with over 60% of all manipulations done in two age groups (3-4 and 5-6 years).

According to our data, surgical treatment of secretory otitis media is done more frequently in males (56.7%) than females (43.2%). There are no significant differences between sexes and exact manipulations performed.

Reviewing changes of number of manipulations, the most rapid decrease (28%) since 2009 is in number of myringotomies. There is also decrease in tympanostomies (25.5%).

Considerable decrease is seen in number of myringotomies combined with adenoectomies (20.2%). The less prominent changes we can observe in combination of tympanostomies and adenoectomies (13.2%).

The latest data and analysis about year 2014 will follow in poster presentation in RSU International Student Conference 2015.

**Conclusion.** Surgical manipulations to treat OME are decreasing comparing with previous data. More often done in age groups of 3-4 and 5-6 years. Myringotomies has the most remarkable decrease.

Cases of surgical treatment of OME decreases due to improvement of conservative and etiological therapy.