

Bioinformatics, tonsillectomy and visual illusions

The first article in this issue is the second part of our commissioned review on the subject of 'Bioinformatics in otolaryngology research'.¹ In this article, Ow and colleagues develop the theme of bioinformatics and document the research modalities available to molecular biologists, which include array comparative genome hybridisation, single nucleotide polymorphism arrays, microarray technology and proteomics.

Returning to clinical matters, Soni-Jaiswal and colleagues investigate the impact of tonsillitis on the quality of life of children suffering from tonsillitis.² The quality of life scores for children with severe tonsillitis are comparable to those of children with juvenile arthritis and severe asthma. This effect on quality of life justifies the value of tonsillectomy in these severely affected children. Children with mild to moderate tonsillitis, however, show only moderate improvement in quality of life following tonsillectomy, with benefit possibly not justified on a risk or cost-benefit basis. Clement previously demonstrated a significant increase in the percentage of children undergoing tonsillectomy for sleep-related breathing disorders or obstructive sleep apnoea syndrome, possibly reflecting the additional benefit in this severely affected subgroup.³ In adults undergoing tonsillectomy, there is evidence of prolonged, cost-effective quality of life improvement following tonsillectomy, as shown by Andreou and colleagues in their systematic review.⁴

Two articles in this issue discuss contemporary management of patients with disorders of balance. These patients form a significant percentage of referrals to an otology service. Kasbekar and colleagues describe the development of a physiotherapy-led balance

clinic.⁵ This approach has resulted in a reduced waiting time for assessment. Half of patients required a single hospital visit and there was a high level of patient satisfaction. The availability of a motivated clinician when required was key to the success of this initiative. The second article reports the success of an approach using a computer-based virtual reality protocol, which was highly successful in an individual patient with dizziness following gentamicin ototoxicity.⁶ Such computer-aided rehabilitation programmes might represent an important advance in gait and posture training.

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