

Common presentations of ETD



Frequent flyer

Symptoms during air travel
May last hours to days after landing.
May be relieved by decongestants.

Candidate for BDET



Newcomer

Generally healthy
May have allergic rhinitis
Spontaneous onset in mid-adulthood with no known trigger

Candidate for BDET



Deviator

Acute onset during URI*, persists after resolution of sinonasal symptoms
Less than 3 months
May be unilateral
May be relieved with decongestants

Candidate for BDET if chronic



Sinus sufferer

Year-round symptoms, persistent or episodic.
Prominent congestion, postnasal drip, sinus pressure.
Generally not relieved by antibiotics or nasal sprays, may improve with systemic steroids.

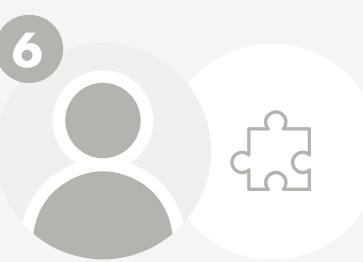
Candidate for BDET as adjunct to ESS



Lifer

Ear problems continuously since childhood
Often multiple sets of PE tubes.
Not typically relieved with sprays or sinus pills.

Candidate for BDET



Puzzler

Persistent symptoms include aural fullness without hearing loss.
No vertigo, autophony, or TMJ symptoms.
Typically bilateral.

May not benefit from BDET

Presented in Dr. McCoul's webinar on BDET patient selection 4278-459 rA <https://youtu.be/ZWLbz4Pi40k?si=GhegPoN6LX69bpxN>

*Upper Respiratory Infection

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