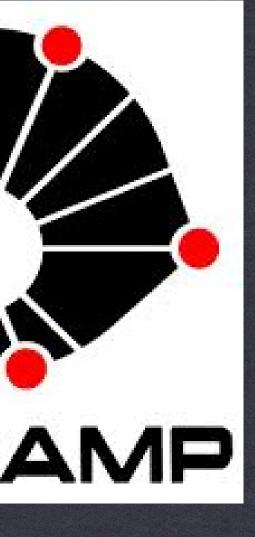
DEATIENTS WITH





anriqua Furlan Pauna* Tutiana Scaramucca

te worldwide and functional disability involving the connective tissue throu rous and mucous membranes of all al and ocular symptoms may be the c diseases

s work is to identify FNT manifestation

10

and ENT evaluations

y, ENT physical examination, audiom and flexible nasofiberlaryngoscopy

fully standardized and a normalized

1.7 years (range 22 - 70)

uration was 9.12 years (range 1-40)

al signs and symptoms				
ner's osis n = 17	Relapsing Polychondritis n = 5	Syndrome of Sjögren n = 5	Systemic Erythematos	
%)	1 (20%)	0	0	
96)	0	1 (20%)	0	
%) %) %) %)	2 (40%)	3 (60%)	1 (339	
96)	2 (40%)	4 (80%)	0	
96)	2 (40%)	2 (40%)	1 (339	
	0	0	0	
%)	3 (60%)	5 (100%)	0	
%) %)	`o ´	1(20%)	0	

al signs and symptoms					
egener's matosis n = 17	Relapsing Polychondritis n = 5	Syndrome of Sjögren n = 5	Systemic Lupu Erythematosus r		
11 (65%)	2 (40%)	5 (100%)	1 (33%)		
10 (59%)	2 (40%)	2 (40%)	1 (33%)		
6 (35%)	0	4 (80%)	0		
6 (35%)	0	2 (40%)	0		
2 (12%)	0	0	0		
1 (6%)	0	0	0		
5 (29%)	0	1 (20%)	0		
7 (41%)	2 (40%)	1 (20%)	0		

athways/pharyngal symptoms				
egener's natosis n = 17	Relapsing Polychondritis n = 5	Syndrome of Sjögren n = 5	Systemic Lup Erythematosus :	
3 (14%)	1 (20%)	2 (40%)	2 (67%)	
ł (23%)	2 (40%)	0	0	
0	0	0	0	
1 (6%)	2 (40%)	0	0	
0	0	0	О	
0	0	0	0	
5 (35%)	1 (20%)	0	1 (33%)	
1 (6%)	0	0	0	
7 (41%)	2 (40%)	3 (60%)	0	
1 (6%)	1 (20%)	2 (40%)	0	
1 (6%)	2 (40%)	0	0	

eck signs and symptoms					
gener's atosis n = 17	Relapsing Polychondritis n = 5	Syndrome of Sjögren n = 5	Systemic Lu Erythematosus		
0	1 (20%)	2 (40%)	0		
(18%)	1 (20%)	0	0		
0	0	0	0		

hysical examination				
ener's atosis n = 17	Relapsing Polychondritis n = 5	Syndrome of Sjögren n = 5	Systemic Lu Erythematosu	
(70%)	3 (60%)	5 (100%)	1 (33%)	
41%)	0	0	0	
41%)	3 (60%)	4 (80%)	2 (67%)	
41%)	2 (40%)	5 (100%)	1 (33%)	

d laryngal symptoms and audiometric change in the studied disea

	Otologic symptoms	Nasai symptoms	symptoms
	9 (53%)	11 (65%)	7 (41%)
	3 (60%)	2 (40%)	2 (40%)
	5 (100%)	5 (100%)	3 (60%)
IS	1 (33%)	1 (33%)	2 (67%)
	1 (50%)	2 (100%)	1 (50%)

ay represent an early sign of an undiag mmediate and aggressive immunosupr

large time lag between complains and

d of patients present systemic manifest

lobulinemia, autoimmune hepatitis, pulr

ith decreased hearing acuity or disci

al, medium or high frequencies al, conductive, gradual or sudden ear system involvement by vascular

ry artery

ement

range from hoarseness to respirato id ulceration, stenosis and oedema cal fold paralysis (Kraus and Guerra

, rhinosinusitis, nasal obstrution, epi foration, erosion of the vomer, crust SS:

nal stage (asthma and allergy)

hilic stage (eosinophilia and organic

c vasculitis

ons yness of lips, tongue and pharynx, d

sease

of dry mouth in 86% and eye symp

st or Rose Bengal staining (46% of p

nd recurrent parotid gland hypertrop

strated the various ENT manifestation

cation is critical to the early immuno

ADO

