

Editorial

Rhinology was practiced as early as about 4000 BC, for we find an inscription on the tomb of Seklet-n-ankl, an old Egyptian physician, that 'he healed the King's nostrils'. It has undergone a great change from the times of open mutilating surgeries of the face to the minimally invasive esthetically acceptable endoscopic surgeries. The last decade has seen a major shift from the morbid external procedures to the minimally invasive techniques. Better diagnostic support, improved instrumentation and computer-aided surgeries have helped rhinologists explore successfully those areas, which were once considered to be beyond their scope. Today, rhinologists are pursuing endoscopic approaches to the skull base, and thus endoscopic techniques for transsphenoidal hypophysectomy, resection of fibro-osseous lesions, clivus tumors and even paranasal sinus neoplasms.



With every issue, we make a sincere effort to bring forward the experiences from our fellow colleagues all over the country and the world, so that we can develop a wholesome understanding of the subject and enrich our existing knowledge. This issue of 'Clinical Rhinology' presents you with a wide range of articles from the latest development in surgical rhinology to the interesting case reports.

I would request all our authors to contribute more of original articles and case series, so that we can achieve our goal of getting this journal indexed in PubMed too.

I acknowledge and thank all the authors for sharing their ideas at this forum, which will drive the future innovations that help in patient care.

Editor-in-Chief

Ashok K Gupta

MS DLO FAMS FICS

Professor and Head

Department of Otolaryngology and

Head and Neck Surgery (Unit II)

Postgraduate Institute of

Medical Education and Research

Chandigarh, India