Title  BALLOON EUSTACHIAN TUBOPLASTY FOR TREATMENT OF EUSTACHIAN TUBE DYSFUNCTION

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Aim
To review evidence on the effectiveness, safety, cost-effectiveness and organizational aspect of Balloon Eustachian Tuboplasty (BET) for treatment of Eustachian Tube Dysfunction (ETD).

Conclusions and results
There were five articles included in this review; a systematic review, a randomised control trial (RCT), and three pre-and post-intervention studies.

From results showed that, there were limited fair level of retrievable evidence on BET in the treatment of ETD. The evidence suggests that BET was effective in reducing ETD symptoms and improving hearing function in mild and chronic ETD patients.

For safety aspect, results showed that there were no major complications (mortality and morbidity) reported with the use of BET for treatment of ETD. However, there were minor complications such as epistaxis, emphysema, acute otitis media, retraction of tympanic membrane and mild rhinitis symptoms post operatively.

This technology has been certified by DQS Medizinprodukte GmbH under Annex V of Council Directive 93/42/EEC concerning medical devices with the Identification Number 0297.

There was no evidence retrieved on cost and cost-effectiveness of this technology and the price for BET catheter set is RM 2862.00.

There was no retrievable evidence on organisational aspect of BET for treatment of ETD.

Recommendations (if any)
Based on the above review, the use of BET for treatment of ETD is recommended for research purpose to provide more quality evidence.

Methods
Electronic databases were searched, which included PubMed, Medline, Journal @ Ovid full text via OVID, OVID EBM Reviews - Cochrane central register of controlled trials, EBM Reviews - Cochrane database of systematic review, EBM Reviews-Cochrane Central Register of Controlled Trials, EBM Reviews–Database of Abstracts of Review of Effects, EBM Reviews-Health Technology Assessment, NHS economic evaluation database - Google search engine. In addition, a cross-referencing of the articles retrieved was also carried out accordingly to the topic. Relevant articles were critically appraised and evidence graded using US/Canadian Preventive Services Task Force.

Further research/reviews required
Further research on this technology is required.

Written by
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