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Aim of the Work

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Nasal obstruction is the presenting complaint of a large number of patients in otolaryngologic practice (Beckingham et al., 1989).

The most common causes of such obstruction are allergic rhinitis, non-allergic rhinitis or hypertrophy of the turbinates of unknown reason (Langer et al., 1999).

Bhatt, 1997 stated that all patients with turbinate dysfunction should have a trial of medical treatment before surgical intervention.

When conservative medical management of symptomatically enlarged inferior turbinate is ineffective, the obstructing tissue may be reduced by an intramucosal or extramucosal destructive procedure, or by conservative surgical resection (Mabry RL, 1998).

Coblation-technology (high frequency cold plasma ablation) is a new method of surgical intervention which is based on an ionic "bombardment" of the biological tissue at the intervention site, which leads to ruptures of intermolecular cohesions (Sergeev VN,Belov SV ;2003).

The application of the coblation for the treatment of chronic nasal congestion and snoring started in 1999 (Mandani,Mansoor 1999).

Submucous diathermy of the inferior turbinate is a widely practiced procedure. The effect of submucosal diathermy is achieved by coagulation of the venous sinusoids within the turbinate, leading to submucosal fibrosis (Jones and Lancer, 1987).