

Results achieved in **reconstructive and conservative surgery** of the middle ear, which is now clearly defined in its parameters, will be difficult to surpass.

The operating microscope, which has become irreplaceable, and the availability of prostheses which are increasingly biocompatible and reflective of the mechanical and physiological characteristics of the tympano-ossicular system, have made it possible not only to resolve the phlogistic processes of the middle ear, but also to restore functionality and regain normal hearing thresholds, which in the case of otosclerosis can reach 95%.

The adoption in the field of laryngology of the operating microscope which is already used in otosurgery has enabled further progress in laryngological diagnosis and the endoscopic surgery of the larynx.

The operating microscope makes it possible to ascertain structural details and medical signs pertaining to the laryngeal mucosa which are highly significant and sometimes overlooked in common examinations.

Furthermore, with the aid of the operating microscope and other highly perfected devices, it is now possible to operate on the larynx of a patient under total anaesthetic, with the utmost calm and precision, with optimal results in terms of phonation.

It is worth emphasising that with endolaryngeal microscopy many cases of laryngeal carcinoma are detected at an early stage, thus allowing treatment to be administered in a timely fashion and resulting in high recovery rates without the mutilation of the voice entailed by laryngectomy.

In 75% of cases, conservative surgery may be employed, for instance partial laryngectomy or reconstructive laryngectomy, which combine the stable results of surgery with the preservation of phonation, breathing and deglutition.