Editorial

The preceding two issues of *ORL Nova* were dedicated to the subject of 'Otitis media in Children' (Vol. 8, No. 3, 1998) and to the subject of 'Perilymphatic Fistula' (Vol. 8, No. 4, 1998). They are the first two issues of a projected series of 'controversies in ORL' edited by J.-P. Guyot, in which recognized experts express their viewpoints on chosen topics. From the numerous positive responses received, it appears that this approach has sparked our readers' interest. In fact, the first manuscript in the current issue, 'Antibiotics Are Not Effective for Otitis media with Effusion: Reanalysis of Meta-Analysis' by E.I. Cantekin and T.W. McGuire, continues the debate about the efficacy of antibiotics in otitis media that was initiated in our first issue on controversies (Vol. 8, No. 3, 1998). We are delighted with this because the editors of *ORL Nova* would like to encourage interactions with our readers concerning papers published in the journal. Commentaries can be submitted in English, German or French.

A particularly interesting aspect of Cantekin and McGuire's paper is that it demonstrates that meta-analysis, which is used with increasing frequency in today's evidence-based medicine, also has limits and pitfalls. From the article it becomes clear that meta-analysis can be influenced by subjective factors such as the choice of papers included, the importance given to each of the evaluation criteria and the methods chosen for statistical analysis. Such arbitrary choices may result in differing and even opposing conclusions.

Another highlight of the current issue is the paper by Gacek and Gacek concerning the histopathological findings in inner ears and vestibular nerves of patients who suffered from paroxysmal positional vertigo. This common vertigo syndrome has been considered to be due to a change in motion mechanics of the posterior semicircular canal, resulting from cupulolithiasis or canalolithiasis. The observations made by Gacek and Gacek provide histopathological evidence of a neural component involving posterior semicircular canal afferent neurons in this particular type of vertigo. These histological findings suggest that the condition is caused by viral infection of the inferior vestibular ganglion. The effectiveness of selective ablation (singular neurectomy) in their extensive series and in a small personal series (article by Häusler and Marchal in the present issue) is based on these correlates of histopathology.

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