Summary:

Introduction: The stenosis of the pyriform aperture is a rare cause of nasal obstruction in neonates. The clinic is characterized by episodes of apnea and cyanosis that worsen during feeding and improve with crying, common symptomatology at the choanal atresia. The diagnosis is suspected in the nasofibroscopy, a narrowing of the nasal vestibule is detected and confirmed with the CT (pyriform aperture with a maximal diameter < 11mm). The treatment will depend on the severity of the symptoms, it is recommended to try conservative measures with corticosteroids and topical decongestants for at least 2 weeks if it possible. In failed cases, a surgical intervention will be practiced to extend pyriform aperture laterally, with satisfactory results in more than 90% of patients

Material and Method: We present 3 cases diagnosed in the University Hospital of Burgos in the last 2 years.  
  
Results: 2 of the 3 patients required surgical treatment that focused on bone removal from the margin of the pyriform aperture through a sublabial approach and 1 evolved favorably with conservative measures. Two children also present a solitary median maxillary central incisor (which is associated in 60% of the cases) and one arterial hypertension by stenosis of both renal arteries.  
  
Conclusions: Congenital pyriform aperture stenosis is a rare disorder, but it should be considered in the differential diagnosis of nasal respiratory distress in the newborn. It is essential to perform the CT scan. And although the treatment is initially conservative, in cases with poor evolution it will be associated with a surgical intervention.

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| Keywords: | stenosis, aperture, pyriform |