10. CONCLUSION

- This study has developed a simple method for predicting the visualization of round window using preoperative HRCT temporal bone measurements.
- The distance between the tip of short process of incus and round window membrane, distance between oval window and round window membrane were reliable in predicting the visualization of round window.
- The anterior angle of basal turn of cochlea was not useful in predicting the visualization of round window.
- The distance between the tip of short process of incus and round window membrane; distance between oval window and round window membrane can serve as useful road map for the surgeon to access the round window.
- This study can considerably reduce surgical complications such as facial nerve palsy and misplacement of electrode.
- Reformatted images in oblique coronal view can serve as tool in predicting the round window location accurately.
- This study enables the ENT surgeon to have a better method of preoperative assessment on variations in position of round window.
Future directions

- A study of large number of cases is required to confirm these findings.

- The angles between fossa incudis and round window, oval window and round window can be studied to understand the rotation of cochlea.

- The distance between pyramidal eminence and round window membrane can be measured which would be real help for surgeons in finding round window in difficult cases.

- In cases with difficulty in visualization of round window membrane (Type 3), the distance between pyramidal eminence and round window membrane can be measured retrospectively and could be used as potential measurement for overcoming the negative correlation during surgery reported in the study.