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Nasal trauma – our experiences

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The assessment of nasal injuries requires a delicate balance of history taking and clinical examination. Management of these injuries must take into consideration both functional and cosmetic aspects. Nasal bone fractures are the commonest facial fracture and make up to 39% of all maxillofacial injuries. These type of fractures are mainly seen in road traffic accidents, sports injuries and during physical confrontation. Because of this they are twice as more common in males as in females. Nasal bones are very brittle and can be broken easily with trivial impacts. Low impact forces of 30G can be sufficient to result in fracture, compared to higher impact force required to fracture other facial bones. From the structural point of view the nasal bones are divided into two halves by the inter-canthal line - into a stronger upper portion and a weaker lower portion. Most nasal bone injuries occur in the lower segment. Usually the history is very suggestive of a fracture - the patient receives a blow to the nose. Fractures of the nasal bones are compound fractures – almost always. Breaches of the skin or mucosa are present in the vast majority of cases. Hence epistaxis is the rule in most patients, and other features include Swelling of nose, Periorbital ecchymosis, Pain, Nasal deformity, Nasal obstruction, and sometimes CSF leak also. In the present study, detailed analysis of clinical presentation of nasal bone injuries both in adults and children, comparison of various classifications and their clinical utilities, along with management options for each fracture will be presented. A new classification system will also be proposed in the presentation.

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