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When is the best time for naso-orbital-ethmoidal fracture repair?

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Naso-Orbito Ethmoidal (NOE) fractures are arguably the most challenging fractures of the facial skeleton. The goal of surgical repair is to reestablish the aesthetics and function of the face. The best management strategy for reconstruction of orbital hypertelorism is to avoid late complications by repairing these deformities early, near the time of the original fractures. Nevertheless, eventually; the clinical conditions of the patient may not allow the surgical team to realize the appropriate surgical approach. NOE fractures are classified into three types regarding the Medial Canthal Tendon Insertion (MCTI) and degree of lacrimal bone comminution. Our goal is to discuss, when is the best time for NOE repair? Does late repair provide worse results? Here we report a case of a severe trauma in a young man resulting in a NOE type 2 (Markowitz) treated in what is considered a late stage by the current literature (twenty five days late). After a motorcycle accident, a 30 years old man suffered multiple injuries resulting head femur dislocation, multiple wounds with substantial loss and a NOE fracture type 2. The facial injury promoted the complete right orbital dislocation and the NOE fracture with disruption of Canthal Tendon containing the bone (characterizing the type 2), resulting the hypertelorism (abnormally increased distance between the two eyes.) After 25 days of injury, a late time for NOE repair, we performed the surgical facial correction including the NOE fracture. We used the previous skin injury, also performed additional incisions intra-orally (mucosal incision), right inferior palpebral and “Z” shape glabellar incision, to have access to the entire orbit. We used titanium plates and screws. Even when considered late time for NOE repair, the surgeon must consider the approach as soon as possible, avoiding facial complications.

Biography

Carlos Jose Gaspar is currently under Plastic Surgery Residency Program at Santa Casa de São José do Rio Preto, São Paulo / Brazil. He has presented this case-report at the 52 Brazilian Congress of Plastic Surgery and has received a congratulating letter from the President of Brazilian Society of Plastic Surgery who also gave him Letters of Recommendation.

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