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A case of traumatic isolated unilateral sixth cranial nerve palsy

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Traumatic isolated sixth cranial nerve palsy is a rare condition that has been reported to be as low as 1% to 2.7% following traumatic brain injury. The sixth nerve innervates the ipsilateral lateral rectus which abducts the eye. Isolated loss of lateral gaze with no other cranial nerve signs and muscular entrapment is thought to be resulted from an injury to the peripheral nerve along its course from the brain stem to the lateral rectus. We presented a case of traumatic isolated unilateral sixth cranial nerve palsy in a 44-year-old female patient who was referred to our department with diagnosis of head trauma and multiple facial fractures after an alleged motor vehicle accident. She had suffered traumatic brain injury and transient altered level of consciousness. She complained of diplopia and restriction movement in the lateral gaze of left eye with no diminution of vision noted in both eyes. An urgent brain magnetic resonance imaging (MRI) revealed zygomaticomaxillary complex fractures and retrobulbar hemorrhage of the left eye with cerebral edema. Eye examination showed isolated sixth cranial nerve palsy. Vision tests and funduscopy examination were normal. She was undergone open reduction and internal fixation to treat the facial fractures. Systemic steroid treatment with tapering dose was also given postoperatively. Improvement of the lateral gaze restriction and reduction of diplopia were gained after ten weeks of follow up.

Biography

Wino Vrieda Vierlia has completed her Medical degree at University of Brawijaya, Indonesia in 2007. She has been interested in Neuro-ophthalmology subdivision and has joined some courses to improve the knowledge. She has attended several international ophthalmology conferences.

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