

Modern Aspects of Trauma of the Nasal Cavities

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Abstract: This article provides prevention, treatment, and prevention of life-threatening factors of nasal injuries, injuries to the cavities adjacent to the nose, manifested by rupture of the wall of the nasal cavity, fracture, and penetration of bone fragments into the cavity.

Keywords: Injuries, nasal bones, nasal cavity, symptoms of nasal trauma, diagnosis.

Injuries of the lateral cavities to the nose and nose occur more often in life, which occur in military and sports activities, in manufacturing enterprises, in blind transport events, during an epilepsy attack.

Depending on the strength and nature of the impact of the body that caused the stroke, its direction and how deep it penetrates into the tissue, the injury to the nose can be either open (open wound of the skin covering) or closed (non - breaking of the skin covering).

Closed wounds include-eating lat, bleeding into soft tissues, swelling, fracture of the nasal bones, accompanied by the appearance of concomitant cavities in the nose by the walls, the eyelid, cheekbone, the silcification or siljimas of the excretory cavity cages.

Open jarring is divided into torn, cut, superficial and chukur, wounds that have penetrated or have not penetrated the nasal cavity. Injuries that enter the nasal cavity are most often caused by a body with an acute tip. Bunda is accompanied by a rupture of the mucous membrane of the nasal cavity, blood flow from the nose, infection into the nasal cavity and adjacent cavities in the nose, the development of nasal obstruction hematoma and abscess. When the direction of the body with an acute tip is directed to the upper wall of the nasal cavity, a fracture of the sieve plate can be observed, in which the patient flows the cerebrospinal fluid.

Often, as a result of the fracture of the cartilage of the nasal bones and nasal barrier, or protrusion between the nasal bones and the forehead growth of the upper jaw, the outer nose is smoothed to the side. Sometimes a forehead swelling fracture of the upper jaw is observed.

Often, in facial injuries, there is a decrease or complete loss of visual acuity (amnesia), blood flow to the bottom of the eye alma (hyphemas), tuberculosis of the eye alma (enoftalm), paralysis (diplopia) as a result of compression of the eye-moving muscles.

Injury of the lateral cavities to the nose is manifested by rupture of the wall of the cavities, fracture, penetration of bone fragments into the cavity. In addition, they are divided into injuries that do not spread or spread to the cranial cavity.

A fracture of the wedge cavity walls is also a fracture of the base of the skull, a relatively threeraydi and vision nerve fiber, accompanied by an injury of the internal sleeping artery, causing a blood flow or aneurysm of the wall of the last sleeping artery from the wound to the cause of death.

In the case of a nasal injury, blood flows from the nose, bruises appear on the skin of the nose and on the eyelids, a swelling of soft tissues and subcutaneous emphysema, silcification of bone fragments are observed. As a result of a violation of the breathing activity of the nose or the closure of smell cognition cracks, the patient's ability to know the smell decreases, when the smell cognition nerve fibers are disconnected – the smell cognition activity of the nose is completely lost.

It is put on the basis of patient complaints, Anamnesis, external examination, palpation, sensing, rhinoscopy, endoscopy X-ray, computer tomography.

When external examination and palpation, it is determined that the area of the jarohat hurts, there is a swelling of soft tissues, a violation of the external nasal shape. The fact that the nose is shaken to the side, majagled, the joints when the nose is palpated (a sign of a staircase), the pathological mobility of the bones and the fragility of the bone fragments indicate that the bones of the nose are broken, when pressing, the subcutaneous gnashing - the excretory bone is broken and the mucous membrane is torn.

The nature of the injury of the lateral cavities to the nose and nostrils, the depth, the general condition of the be-Marie are taken into account. Emergency medical care consists in pain relief, stopping bleeding, giving primary surgery and sending the patient to the hospital immediately. In the case of an open wound of soft tissues or a lump, primary surgery is performed on the contaminated area of the larynx; the area of the larynx is first washed with an antiseptic solution, then with the help of a special spoon, fragments of broken bones and cartilage are removed, soft tissue is left. The patient is given ana-toxin against tetanus (if vaccinated - 0.5 ml, if not vaccinated - from 1 ml under the skin), blood serum against tetanus (3000 me) on Bezredko after intra-skin test. After the first medical help, when the animal bites the nose area, the patient is vaccinated against rabies. The primary seam is laid after a day after the injury.

Usually, after the broken nasal bones are fixed in their place, the blood flow from the nose stops on its own. In most cases, the front nasal congestion, sometimes the back nasal congestion, is performed. The stuffing is replaced every 24-48 hours. Children are usually put on an elastic stuffing. In order to reduce bruises and soft tissue edema on the injured nasal skin, pieces of Ice are placed on the skin of the nose for 5-6 hours.

The main method of treatment is the restoration (putting in its place) of the walls of the bones of the nose and nasal adjacent cavities, as well as the practice of inaction of bone fragments from the inside or outside, when the bones of the nose are broken, silenced from their place, as well as the appearance of an external cosmetic defect. It has an important cosmetic ahami-Yat to put bone fragments in their place. The practice of putting the bones in their place (reposition), performed on the first day of the injury, is recognized as the most optimal method, but in severe complications of the skull, the skull can perform it for the last 3 weeks from the injury.

In the sitting position of the patient's course, the nasal cavity is anesthetized locally (10% lidocaine spraying on the mucous membrane, 2% dicaine rubbing, 5% cocaine or sending 1% novocaine, 2% lidocaine solutions to the broken area). In children, it is acceptable to perform the act of reposition under general anesthesia.

The method of putting a broken piece of bone in its place with the help of a finger. Under general anesthesia, when the outer nose is shaken to the left, broken bone fragments are placed on their place with the thumb of the right hand and the thumb of the left hand when shaking to the right. When the bone fragments fall into their place, a specific creaking sound is heard.

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