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Why is the aetiology of facial bone fractures in libyan childrens diffrent

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Incidence of facial bone fractures in pediatric populations is much less than that in adult. Fractures of facial skeleton in childhood in comparison with other bones of the body. Many factors make this age group different like bone elasticity, deciduous crown shape and probably the incomplete eruption of permanent teeth. The etiology of maxillofacial bone fractures differ from one country to another due to social, cultural factors. The main cause of these fractures is road traffic accidents, accidental falls, sport, Fights and assaults.

Objectives: The aim of this study was to perform a clinical retrospective analysis of the etiology ,incidence and treatment methods of maxillofacial fractures in Libyan children.

Materials and Methods: This study includes data of patients aged up to 16 years old who was treated at the Ali Omar Askar Neurosurgery main centre by oral and maxillofacial surgery team. This study was conducted during four years period between January 2010 to December 2014. All patients were admitted to Ali Omar Askar Neurosurgery centre ,oral and maxillofacial surgery department, Esbea, Tripoli, Libya. Age, gender, etiology, site of fractures and treatment methods were reviewed and compared with other studies.

Results: A total of 65 children up to age of 16 years old sustained a total of 80 various facial bones fractures diagnosed and treated, males to female ratio 3:1, The annual distributions of the fractures ranges from 7% in 2011 to 35% in 2012. The most common cause of the facial bone fractures was Road traffic accidents (62%), the main age group involved 6-12 years, the second most cause accidental fall (28%), of which the highest in the age group 0-5 years. 43 patients with mandibular fractures were the most common fracture in the facial bones which accounted for 54% of all the cases, and 25% in parasymphysis region, 19% in symphysis and 16% in angle and condyle, dentoalveolar is the least affected in this study 2%. Maxillary fractures forms 16% of the facial bone fractures of which the maxillary Dento alveolar fracture accounts 56%. The third cause of facial bone fractures involved in this study was zygomatico-orbital complex fractures 10%. The least was nasal bone fracture 1%.

Conclusion: Facial bone fractures relatively common occurrence in children. This study indicates mandible is the commonest bone fractures, Road traffic accidents the main etiology , either hit by car as pedestrians or in the vehicles, none of these children neither have back seat nor wearing seat belt. Accidental falls the second cause and the age group 0-5 years were representing one third of the total cases were treated. open reduction and direct osteosynthesis used in 63% of cases ,20% conservative follow up ,11% left against medical advice and only 7% with intermaxillary fixation. The need of national education and preventive programs, control speed limits required to prevent and reduce such injuries.

Biography

He is associate professor of Department Oral Maxillofacial Surgery at Ali Omar Askar (AOA) Neurosurgery University Hospital, Libya.

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