

Urazy oczodołu

Orbital trauma

Andrzej Skorek, Czesław Stankiewicz, Dariusz Babiński, Anna Ostrowska, Dominik Stoduski

Summary

Introduction. Single or multifragmental orbital fractures may be a difficult diagnostic and therapeutic dilemma. Dislocation of the orbital content into maxillary and ethmoid sinus may take place during trauma. The main topic is when and what surgical technique should be applied in these cases. **Material and methods.** Material consists of retrospective analysis of 23 cases with fracture of medial and inferior wall of orbit hospitalized in ENT Department of Medical University in Gdansk from 1999 to 2005. External ethmoidectomy was performed in cases with medial wall fracture and loose bone fragments are removed with reposition of orbit tissue. Transantral approach was applied in cases with inferior wall fractures. Loose bone fragments were replaced with autogenic bone or fascia graft, or synthetic material - bone cement. **Results.** Complete or partial recovery was achieved in 91% of cases. Only in 2 cases (9%) recovery was not obtained after surgery - in these cases treatment started later than 60 days after fracture. **Conclusions.** In our opinion the optimal results of surgery may be achieved when treatment is beginning before 14 days after fracture. If the later treatment is applied the worse results are achieved. Most of the cases must have been completed by rehabilitation after surgery.