# Nasal Fractures.

- (1) Common
- (2) Often undiagnosed
- (3) Often patients do not attend for treatment.

#### CLINICAL FEATURES.

- (1) Swelling
- (2) Deviation
- (3) Pain on Palpation
- (4) Sometimes steps along medial 1/3 of infraorbital margin.
- (5) Septal deviation
- (6) Septal Haematoma
  - Look up nose with otoscope
  - Feel septum with cotton bud
- (7) Numbness bridge/dorsum nose
- (8) Epistaxis

### RADIOGRAPHS

Plain Radiographs - but not always or even clearly seen on plain radiographs.

#### TREATMENT

## Treatment consists of either:

- (1) Conservative management
- (2) Surgical management.
  - Manipulation
  - Open reduction
- Significant Deformity
- Where manipulation unsuccessful
- Compound/displaced noses
- Concomitant fractures with midfacial injury.

(It is not uncommon for patients not to attend outpatient clinic after injury).

## PRE-OPERATIVE CARE.

- (1) Little usually necessary
- (2) Control epistaxis if needed
- (3) Consider steroid IV if operative treatment envisaged to reduce/control swelling
- (4) No need for antibiotics until compound or septal haematoma.
- (5) Non urgent treatment in most cases. May consider easy intervention prior to development of significant swelling.