

FREQUENCY OF OCCURRENCE OF POSTTRAUMATIC SINUSITIS OF THE UPPER JAW (MAXILLA) IN PATIENTS WITH COMBINED FACIAL BONE INJURIES

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ABSTRACT: Severe traumatic injuries are the third cause of death after cardiovascular and oncological diseases, and among people of working age it ranks first. People get severe combined injury in road accidents, in work-related injuries, in sports and natural disasters. According to the authors, 100% of patients with combined injuries of the bones of the facial skeleton have brain damage of varying degrees.

KEYWORDS: patients, neurosurgery, maxillofacial surgery, industrial injury, tomography examination, sinus epithelium, combined character.

MATERIAL AND METHODS. We examined n=128 patients with combined injuries of the bones of the facial skeleton (CIBFS) in the multidisciplinary clinic of the Tashkent Medical Academy in the department of neurosurgery, maxillofacial surgery and otorhinolaryngology in the period 2017-2020. The age of the patients ranged from 18 to 63 years, with 87 men and 41 women. All patients were admitted to the emergency department after an injury, they were given first aid and hospitalized in the department. Of the received 85.3% of the causes of injuries were road traffic injury, 7.2% had an industrial injury, 7.3% of patients had a sports injury. We conducted clinical and laboratory studies. The clinical examination included anamnesis of trauma, subjective and objective research methods. In addition, multispiral tomography of the paranasal sinuses, assessment of the condition of the nasal mucosa and the state of the natural excretory duct of the maxillary sinus, the state of motor activity of the atrial sinus epithelium in dynamics were performed.

RESULTS. The results of the study showed that 48 (76.3%) patients out of 63 patients of this group had unilateral lesions of the maxillary sinus, 15 (23.7%) had bilateral lesions. 2 (0.03%) patients were on a ventilator for 5 ± 1.1 days.

Among the patients, 23±0.05 had a fracture of the anterior rectus, 12±0.05 a fracture of the upper rectus, 15± 0.04 a fracture of the lateral rectus, 5±0.02 a fracture of the medial rectus. It should be noted that only 26± 0.02 (41.2%) patients had isolated damage to only one wall, and in the remaining 37± 0.03 (58.8%) cases there were simultaneous damage to two, or combined damage to the walls of the sinus. In 12± 0.05 patients, pain in the suborbital region was noted. Nosebleed was observed in 39±0.04 patients. A decrease in the sensitivity of the suborbital region was noted in 5 ± 0.02 patients. Diplopia was observed in 15±0.04 patients. Nasal breathing disorders were observed in 23±0.05 patients. Facial asymmetry was noted due to subcutaneous hematoma of the soft tissues of the subglacial region on the affected side, The presence of a hematoma in the maxillary sinus was noted in 54± 0.02 patients, we determined in 100% of patients.

All patients underwent nasal cavity endoscopy on the first day after admission and diagnosis using multispiral computed tomography examination (MCTE). The endoscopy was performed with the Karl Storz endovideosystem. At the same time, the patency of the common nasal passages was assessed, the presence of bone-cartilage fragments, hematomas, fractures of the nasal septum, ruptures of the nasal mucosa was determined. In addition, the patency of the mouth was assessed. In 33 (52.3%) patients, there was a pronounced violation of the patency of the maxillary sinus anastomosis, in 16 patients out of the total number, complete closure of the anastomosis was revealed.

CONCLUSIONS. Thus, the study showed that 69 (53.9%) patients had unilateral lesions of the maxillary sinus, the remaining 59 (46.1%) had bilateral lesions of the maxillary sinus. The most frequent type of fracture occurred in 26 = 0.03 patients, followed by a fracture of the upper wall, which was in 22 = 0.06 patients. Fractures of other walls are difficult to diagnose, they have a combined character. Fracture of the anterior wall of the maxillary sinus in most cases does not require surgical treatment.

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