Evaluation of Gunshot Injuries, Effects, Diagnosis and Early Management of Facial Injuries at the Present Conditions

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Summary

A prospective study was conducted in AL-Karkh General Hospital for the period from, Nov. 2003 to Oct. 2004, on 73 patients with GSWs of the face. The male to female ratio was 9:1, Age was between 7-62 (mean 34.5 years) the majority of the patients were injured by military high velocity rifles 38 representing 52%, a 25 patients of them were intentionally caused an avulsive and perforating type of wounds, 12 & 15 patients respectively, handguns caused 18 injuries, 12 patients of them caused penetrating type of wounds, 15 of the patients injured by bomb accidentally and only 2 patients injured by airgun pellets. The midface was the most common site of injury and represents 21 patients whom have injuries to the adjacent structures, and the facial nerve was more frequently injured structure, which represent 71.4% followed by eye and ear injuries represented, 33.3%, intracranial injuries were 14.3% and great vessel injuries were observed in 4 patients 3 of them detected by angiography. Loss of bone and soft tissue occurred just due to high velocity rifles and bombs. From 41 patients with facial skeleton fractures there were 16 patients with middle 3rd fractures, 14 with mandibular fractures and, 2 patients with upper 3rd & middle 3rd fractures and 9 patients with lower 3rd & middle 3rd fractures, 3 of them required airway intervention. Patients need ORDSF were 20.5%, 15.1% underwent CRISF, 17.8% treated conservatively and 2.74% functional. From 22 patients with soft tissue loss 11 treated by primary closure, 5 of them have wound dehiscence, 7 needed flaps for reconstruction, 2 of them underwent flap necrosis 3 left opened to heal by granulation tissue for later skin graft and one patient treated by tissue traction. Complications were significantly increased in patients with avulsive and perforated injuries. The complications rate for patients with gunshot injuries can be very high, particularly when injured by high velocity missile. The severity of GSWs of the face injuries depends on many factors, in our study the type of weapon used and the anatomic locations involved were the most important.