

Facial wounds/sutures

These should be kept dry in the initial healing phase and medication applied as prescribed. Sutures are usually removed between 5 and 10 days. After a further 2 weeks you may be advised to massage the scar with Vitamin E cream to break down and soften the scar. Some wounds will require a further repair.

Posture

Fractures of the nose and cheekbones are often repositioned but the bones cannot be held in position whilst healing takes place. For this reason it is imperative that NO pressure is placed on the broken bones until healing has taken place. Care needs to be taken whilst lying on the side and going into crowded areas, i.e. pubs, so as not to displace the bones.

Pain

Facial injuries often look much worse than they feel. Simple analgesia such as Paracetamol or Aspirin/Nurofen should be all that is required. You may be prescribed alternative painkillers to be taken as prescribed.

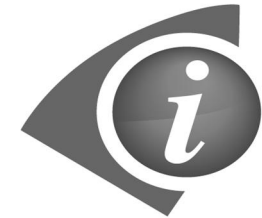
**If you have any questions
about this information leaflet
please contact the Oral &
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South Devon Healthcare **NHS**
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PATIENT INFORMATION



Treatment of Facial Fractures

This leaflet gives information about a broad range of injuries to the face, so not all the information will be relevant to you.

Why is treatment necessary?

The facial skeleton is very important because it acts as a shock absorber to prevent injury to the brain in severe trauma. Some or all of the following structures may be damaged; the nose, the eye sockets, the cheekbones and the upper jaw.

How is it done?

The treatment will be done under general anaesthetic and you will stay in hospital for one or two nights. It may be necessary to make a small cut in the side of your head (within the hairline) or close to your eye, to gain access to the fractured bones. The bones are usually repaired with small metal plates which screw in place each side of the fracture. The plates are designed to be permanent. Sometimes, surgery is done in stages to obtain best results.

Potential Consequences of Facial Trauma

- **Infection**

Occasionally the plates may become infected, break or feel uncomfortable. In these cases, it is necessary to remove the plates under a general anaesthetic.

- **Nerve damage/altered sensation**

A common consequence of facial trauma is reduced sensation to the upper lip/side of nose. It may take several months to regain sensation and this damage is occasionally permanent.

- **Smell**

Nasal and mid-face fractures are associated with a reduction in the sense of smell and altered taste and both should improve with time.

- **Vision**

Eye injuries in association with facial trauma are common. A frequent problem is double vision if the eye socket is damaged. This may persist for some time following repair of the bone due to swelling. Occasionally the damage is permanent.

- **Damaged Teeth**

Teeth may be damaged or lost as a consequence of trauma. Teeth can be

damaged and cause problems later. After facial injuries you should inform your dentist so that particular attention is given to damaged teeth. The bite may be altered by the trauma and require correction surgically.

- **CSF (Cerebro-Spinal Fluid)**

In severe nasal and mid-face injury it is possible to have leakage of the fluid that surrounds the brain, via the nose or ears. This usually stops following bone repair but may require specific surgery. There is a low risk of late onset infection and patients should be aware that severe headache, neck stiffness or pain in bright light are symptoms that must be reported to their GP urgently.

Cleaning/Oral hygiene

Following facial trauma you should clean your mouth and teeth carefully. Mouthwashes – warm saltwater mouthwashes of ½ pint at a time should be used, 4 times a day, rinsed thoroughly around your mouth. This should be followed by antiseptic mouthwash as prescribed. Your teeth should be thoroughly cleaned twice a day by tooth-brushing and the use of floss or inter-dental cleaning as treatment permits.