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## Acute traumatic blow in fracture of orbital roof with transorbital encephalocele: A rare case report

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**T**raumatic encephalocele following orbital roof blow in fracture is a rare complication of blunt injury. Less than 20 such cases have been published till date. The term “blow-in” fracture was initially coined by Dingman in 1964 describing a specific fracture of the orbital floor and is now used to describe a fracture of any orbital wall where the fragments are intraorbitally displaced, as seen in our case. Clinical suspicion, early neuroimaging and neurosurgical intervention play a vital role to decrease both the intraorbital and intracranial pressures and dreadful complications including death, especially in pediatric population. We present a case of a three years old female who sustained blunt head trauma owing to vehicular accident. Due to the incident occurring at a remote setting, the patient was brought to our institution after three hours. Upon examination, the patient had a GCS of 9, laceration in the right occipital area and proptosis, chemosis and periorbital ecchymosis of the right side. Plain cranial CT study revealed intra-parenchymal hemorrhage of the left frontal lobe with subarachnoid and intra-ventricular extension with surrounding diffuse cerebral edema and rightward midline shift. A comminuted fracture of the right

medial and lateral orbital walls with displaced retrobulbar bone fragments and partial herniation of the adjacent frontal lobe displacing the intact right globe anterolaterally was seen, with entrapment of the medial rectus muscle and intact but stretched optic nerve. Even with the full neurosurgical, radiological and pediatric team approaches, the patient deteriorated and couldn't be revived. A prompt emergency ambulance service, timely clinical suspicion and pediatric neuroimaging for detection of the encephalocele and neurosurgical intervention have utmost importance in such “ticking time bomb” cases. Traumatic blow in fracture with encephalocele, a rare clinical entity, if caught early, can still be managed as shown in the literatures with early tertiary care intervention.

### Speaker Biography

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