

Nasal Septal Hematoma: clinical and therapeutic particularities

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Introduction

• Nasal septal hematoma (NSH) is defined as a collection between septal cartilage and mucoperichondrium and/or mucoperiosteum. It is a therapeutic emergency because of short- and long-term morbidities.

- Sex: male in all cases.
- Average age : 23 years old (7– 59 years old).
- Trauma type: nose trauma in all cases.
- Main symptom: nasal obstruction:
 - Unilateral : 5 cases.
 - Bilateral: 3 cases.
- Average time between the trauma and the consultation: 6 days (1– 21days).
- Intranasal examination with anterior rhinoscopy: nasal septal hematoma in all cases. (Fig 1)

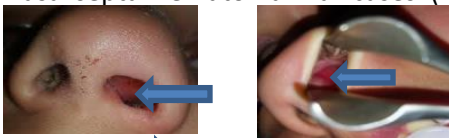


Fig 1: → Left nasal septal hematoma.

Results

- X-ray of the nasal bones: (fig 2)
- Non displaced fracture: 5 cases.
- Displaced fracture: 2 cases.

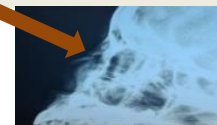


Fig2: → Displaced fracture line.

- Puncture of the NSH: 2 patients.
- Treatment: hemitransfixion incision and hematoma drainage on general anesthesia urgently.
- Bilateral anterior mesh removed after 48 hours: all patients.
- Antibiotics: based on amoxicillin clavulanic acid with an average duration of 7 days.
- Evolution: Healed incision wound in all cases.
- Post operative evolution:
 - Synechia: 2 cases.
 - Septoplasty: 1 case.

Objective

• To study clinical aspects and treatment in patients with nasal septal hematoma.

Conclusion

• NSH is a serious condition that necessitates urgent surgical management to prevent complications. Post operative complications are not exceptional.

Materials and Methods

• A retrospective study about 8 patients collected over a period of 6 years (2018 – 2023). All patients had clinical examination and treatment was recorded.

Discussion

• Nasal septal hematoma usually occurs secondary to nasal trauma and the most common symptom is the nasal obstruction (95%) which is consistent with our study. A nasal septal abscess is the major complication of in literature which is inconsistent with our study.