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Nasal injury/ Nasal fracture

Nasal fractures are very common fractures that can be seen as a result of accidents, motor vehicle accidents, sports, and fights.

Common presenting symptoms include a change in the appearance of the nose, nasal bleeding, nasal obstruction, and bruising around the nose and eyes. Xrays are often obtained. However, on examination, if there is evidence of external deformity of the nose and nasal obstruction, this is sufficient to diagnose nasal fracture and injury.

Typically, even as soon as several hours after the injury, swelling may make it difficult to determine whether there is any external deformity. Elevation of the head and cold compresses may be useful to decrease the swelling. On examination, it is important to evaluate for septal hematoma or concomitant facial fractures.

There is a small window of time around the time of injury if repair is desired. Repair is typically attempted within 2 weeks of the time of injury. Any longer, the bones have begun to heal. If the nasal deformity is subtle and there is no nasal obstruction, surgery may not be indicated. Also, if a patient presents past the window for closed treatment, it is best to wait at least 3-6 months prior to consideration of open reduction or septorhinoplasty (if repair is desired).

Closed reduction is a procedure, which can be done to attempt to restore the nose to its preinjury state. Unfortunately, even despite an optimal surgery, the nose may never look as it did prior to the fracture.

Post-operatively, the patient is advised to rest without elevation of blood pressure. Bleeding, swelling, and discomfort can occur. Antibiotics and pain medication are prescribed. Nasal saline irrigation may also be prescribed to assist with nasal crusting. External splints or nasal packing can be used and are removed post-operatively.