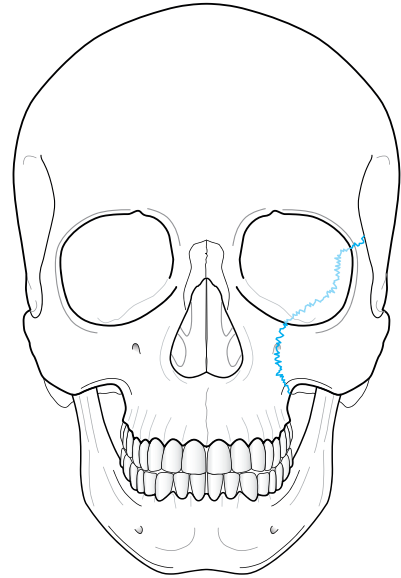


# Fractures of the Cheekbone and Eye Socket

## Oral & Maxillofacial Surgical Services

This is an advice sheet to answer common questions and improve your understanding of the management of injuries to the cheekbone and/or the eye socket. Most fractures are caused by fights, sporting injuries or road traffic accidents. Occasionally, just the floor or a wall of the eye socket may fracture, known as a “blow-out”.



### Symptoms

- Pain, swelling and bruising around the cheek and eye
- Numb cheek, nose and upper teeth
- Bloodshot and tender eye
- Blurred and double vision
- Restricted eye movement
- Occasionally “sunken” eye
- Painful and reduced mouth opening
- Flattening of the cheek.

### Tests and treatment

#### What tests will be required?

##### One or more of the following:

- X rays
- CT scan
- Eye vision & movement

#### Why would it need an operation?

##### On the cheekbone to improve:

- Appearance of face
- Mouth opening
- Pain and numbness
- Position of eye socket

##### On the eye socket to improve:

- Double vision
- Eye movement
- Appearance of eye

#### What does the operation involve?

- A general anaesthetic (you are asleep).
- Often just the cheekbone needs treatment.
- Sometimes the eye socket also needs exploration.

Treatment is indicated if the fracture is extensive, causes marked double vision, restricted eye movement or is likely to lead to a sunken eye appearance.

Occasionally, just the eye socket needs repair.

## The operation

### The cheekbone operation:

- A small cut in the temple within the hair line.
- The cheekbone is repositioned.
- If it is unstable, metal plates and screws are used to fix it in position.

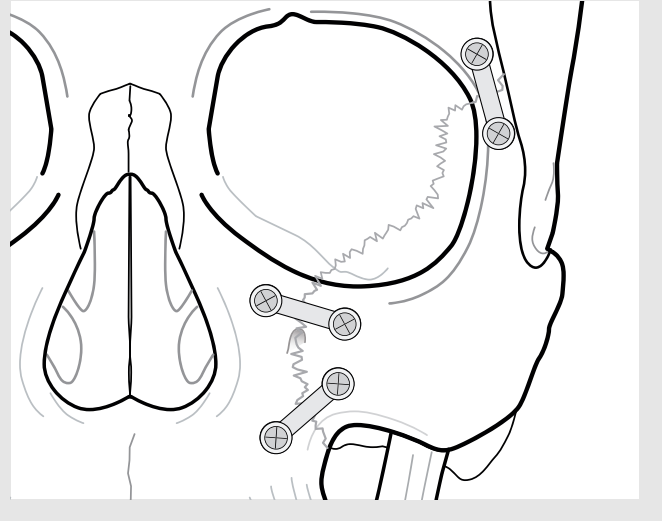
#### One or more extra incisions are required, including:

- skin crease in the outer upper eyelid
- skin crease below the lower eyelashes
- skin crease at corner of eye
- inside of the lower eyelid
- in the mouth, in the gum above the teeth.

### The eye socket operation:

- The same incisions are used.
- An implant of a thin sheet of plastic is often required to support the eyeball. Occasionally, bone is taken from the skull, hip or elsewhere.

### Metal plates used to fix the fracture



## Recovery

### What can I expect after the operation?

- One night in hospital and occasionally longer.
- Your eye will be closely monitored
- Discomfort and swelling
- Regular painkillers
- Blurred and double vision, numbness of the face and teeth may worsen before improving.
- Antibiotics, if required.
- X-rays to check position of the cheekbone.
- Wound drains are usually removed after about a week by your GP or in the maxillofacial department. Stitches in the mouth usually dissolve.
- At least one week off work and a month to recover more fully
- Numbness improves over several months, but may not go completely.

### Will there be any scars?

- Incisions are largely hidden
- All incisions leave a scar, but, over 12 months, the majority fade.

### Care instructions

- Avoid strenuous activity
- Do not blow the nose for two weeks
- Do not drive for the first 24 hours
- Only drive if your eyesight is good
- Inform your insurance company if your eyesight is affected.
- Avoid injury for eight weeks to prevent movement of the fracture
- No contact sports for three months

## Risks and complications

### What are the possible problems?

#### Occasionally:

- Bleeding in the mouth or at incision sites
- Infection of wounds, plates or implant
- Tenderness of the plates requiring removal
- Sensitive or visible incisions
- Abnormal healing of the eyelid
- Damage to teeth near the fracture site
- Complex fractures cannot be repositioned perfectly
- Sunken appearance of the eye may develop over 12 months
- Second operations or persistent problems

### Serious complications

Serious complications are rare.  
The most important is bleeding in the eye socket.

- This occurs in 1 in 700 operations
- It is unpredictable
- Bleeding causes partial or complete loss of sight in one eye.

## Important

**If you experience problems with your eye, you should contact... or return to the emergency department immediately.**

**Potentially serious problems include:**

**The EYE is:**

- Swollen and sticking out
- Painful
- Feels hard
- Difficult to move
- Worsening vision

## Please contact us:

**If you have any problems between appointments**

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