Fractures of the cheek bone - zygomatic fractures

Admission and cheek bone surgery

Fractures of the facial bones may be more or less extensive depending, among others, on how the damage occurred. Therefore, the information provided here on the treatment of fractured cheek bones is a general introduction and individual cases may very well differ from what is outlined in this text. A fracture of the cheek bone will often cause one or more of the following symptoms: impaired sense of touch in the skin of the cheek, double vision, skewness of the face and pain. To remedy such discomfort, repositioning of the cheek bone through surgery is often necessary.

Introduction

For surgery of cheek bone fractures, you need to be under general anaesthesia and after the operation you will be admitted to our bed ward. Less complicated cases, however, can be treated on an outpatient basis.

Oral surgery assessment

A specialised surgeon examines your face and jaws to determine the extent of the damage and make a preliminary treatment plan.

X-ray examination

X-rays or scans are made at the casualty ward and additional images may be needed later to obtain.
more precise information about the fracture/fractures.

**Blood samples**
Blood samples will be taken to determine your haemoglobin percentage and blood group.

**Admission to a bed ward**
You will be admitted to ward NSA5-O, where you will receive more practical information about your stay at the ward.

**Anaesthesia**
An anaesthetist will examine you to plan the anaesthesia and inform you about the process. You should not eat or drink for at least six hours before general anaesthesia, and if you have been drinking alcohol, it may be necessary to empty your stomach to avoid the risk of vomiting.

**Surgery**
The surgery will be performed through the mouth, but in some cases an additional point of entry is needed and will then be made through the skin under the eye or the eyebrow. In most cases the fracture is kept in place by titanium plates, which normally do not need to be removed afterwards.

**After surgery**
After surgery you will be moved to the Recovery Ward where you will be monitored for some hours. You will have a drip in your hand.

**Medication**
During and after surgery you will receive antibiotics to prevent infection. You will also receive painkillers as needed.

**Swelling**
You should expect some swelling of the face and effusion of blood around the eyes during the first
days after surgery. This is a normal reaction, and the swelling is generally most apparent after two to three days, after which it recedes over a period of ten to fourteen days. Swelling may also occur due to air in the tissue surrounding the cheek bone. To avoid this, you should not blow your nose or sneeze for three weeks after surgery.

**Discharge**

Admission usually lasts 1-2 days.

At discharge you will receive information about diet and oral hygiene. Furthermore, you will be given a prescription and an appointment will be made for a follow-up visit.

If you have doubts about anything after you have been discharged, feel free to call

Bed Ward NSA5-O (Sengeafdeling NSA5-O) on pho.: 7846 4544 or the

Oral Surgery Clinic (Kæbekirurgisk Ambulatorium) on pho.: 7846 2927.

**X-ray follow-up**

Normally, it is not necessary to take a new set of x-ray images after surgery.

**Reduced sense of touch**

If the fracture occurred near a sensory nerve, the sense of touch may be reduced in part of your facial skin. This can be annoying, but is generally a transitory effect. However, reduced sense of touch may in rare cases last many months or be permanent.

**Diet**

Due to the sores in your mouth, you should only eat cold liquid food during the first day after surgery. Then, during the next week after surgery, you should eat "soft foods" only.
The staff at the bed ward will go over the details with you.

**Oral hygiene**
To allow the sores in your mouth to heal, it must be kept clean by rinsing with Chlorhexidine 0.12%. This may cause a discolouring of the teeth and tongue. Your dentist can remove the discolourings once you have recovered from the fracture(s).

**After discharge**
It is normal to feel tired after an operation and to need rest. You should avoid too much physical stress in the period immediately after surgery. Fractures to the cheek bone normally heal in six weeks and during this period the cheek bone should not be stressed. This means that you must avoid sports and other physical activities which carry a risk of blows or punches to the cheek bone.

**Follow-up visits**
You will receive a date for a follow-up visit after discharge. If your skin has been sutured, the stitches will be removed at the follow-up visit.

**Dental injury**
If you have lost teeth in connection with the fracture, the final treatment will normally be performed by your dentist, and therefore it is important to check if your insurance covers such treatment.

This patient information was published on the web of the Department of Oral Surgery. For further information, please see [www.kaebekir.aarhussygehus.dk](http://www.kaebekir.aarhussygehus.dk)