FREQUENCY OF CRANIAL VAULT FRACTURES IN PATIENTS WITH HEAD INJURY.

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ABSTRACT:

INTRODUCTION: The rate of frontal bone injury has been accounted for to be as high of all instances of skull fractures in patients with a head injury. The frontal bone is the fundamental bone in the brow territory. **OBJECTIVE:** The purpose is to investigate the frequency of cases and cause of head injury in patients. A one year (2019) retrospective study of head-injured patients. **PATIENTS AND METHODS:** Cause of injury, and radiological findings were analyzed of 521 patients in which the majority of patients are from rural dwellers 291 (55/9%) than urban dwellers 230 (44.1%) correspondingly. **RESULT:** The total number of cases of head injury in Radiology and Forensic Medicine Department Peoples Medical College Hospital Nawabshah in the year 2019 was 521 cases, out of those cases violent head injury was the common cause of head injury in patients 209 (38.4%). The 521 patients in which most injured cranial bone is Frontal bone 217 (39.9%). **CONCLUSION:** The study highlight that most of the patients are from rural and among them, the most common cause of head injury is violent assault and mostly injured cranial bone injury is frontal bone

KEY WORDS: Cranial Vault Injury, Head Injury, Violent Assault.

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INTRODUCTION

The rate of frontal bone injury has been accounted for to be as high of all instances of skull fractures in patients with a head injury. The frontal bone is the fundamental bone in the brow territory. A high-sway injury to the head can cause a crack of the frontal bone and floor of the sinuses. The crack is generally liable to happen in the brow that is the place the bone is the most slender and most fragile. A physical concern may make the bone be indented (pushed internal). Generous power is needed to crack the frontal bone, so frequently different wounds to the face, and

skull or neurological injury might be available. Related concern may incorporate spillage of the cerebrospinal liquid, eye wounds, and harm to the sinus pipes. The real occurrence of the frontal bone break is more likely than not higher because it has been demonstrated that numerous worldly bone injuries are missed on the x-rays and can be seen on tomography. Frontal bone cracks can be confined to facial wounds or can expand intracranial. The frontal sinus has a foremost and back divider. Breaks to the front plate alone are facial wounds, requiring restorative careful treatment whenever discouraged.

Breaks to the back plate are Calvary wounds and convey a few dangers, including intracranial disease (from the defilement of the cerebrovascular liquid with nostril air and liquid from the frontal sinus), intracranial drain, and direct horrible mind injury if crack parts are extended back. We had performed a retrospective one-year study review analysis of all cases of head injury treated in our Radiological & Forensic Medicine Department Peoples Medical College Hospital, Nawabshah, Shaheed Benazir Abad, Sindh, Pakistan. We aimed to investigate the cause of cranial vault injury and to evaluate cranial vault injury based on gender distribution, radiological findings and results.

METHODOLOGY

The clinical records of all patients with head injury conceded to the Peoples Medical College Hospital, Nawabshah, Shaheed Benazir Abad, Sindh, Pakistan) in 2019 were contemplated. All recognized outlines were inspected for radiological affirmation of frontal bone crack through conventional radiology reports. Just those graphs with affirmation by the legitimate report were remembered for the examination. Graphs were then surveyed for other relevant information identified with the injury. The study was conducted on 521 patient's male and female ages from 15 to 56 to find out the rate of frontal bone injury. Data has been collected with the consent of the patient.

DATA COLLECTION:

The clinical moral audit committee of trustees evaluated and approved the

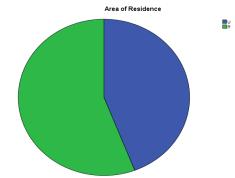
Table 1: Cause of Head Injury

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	Frequency	Percentage	Valid Percentage				
Fire Arm Injury	158	29.0	30.3				
Violent Assault	209	38.4	40.1				
Road Traffic Accident	67	12.3	12.9				
Fall From Height	24	4.4	4.6				
Sports Injury	37	6.8	7.1				
Industrial Injury	26	4.8	5.0				
Total	521	95.8	100.0				

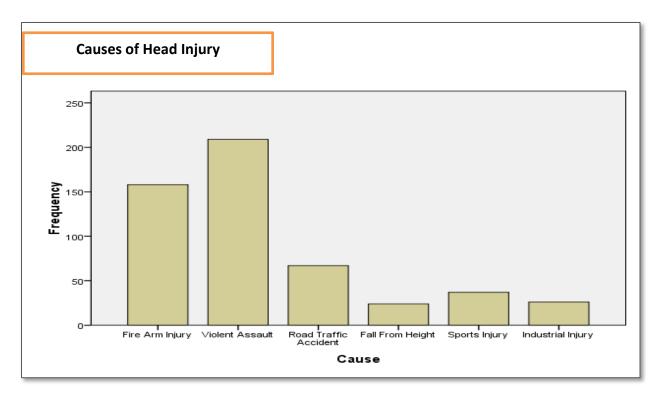
examination procedure prior to the start of the evaluation, and each patient gave informed consent. Proforma content has been gathered and is presented in table format, with the version of the software used to evaluate it (SPSS) 17. For quantitative characteristics such as age, the mean and standard deviation were calculated.

RESULTS:

The 521 number of patients were included in this study from 18 years to 56 old patients. In which the majority of patients are from rural dwellers 291 (55/9%) than urban dwellers 230 (44.1%) correspondingly.



Area of Residence									
		Frequenc y	Percen t	Valid Percent	Cumulativ e Percent				
Valid	Urba n	230	44.1	44.1	44.1				
	Rura l	291	55.9	55.9	100.0				
	Total	521	100.0	100.0					



The total number of cases of head injury in year 2019 was 521 cases, and cause of those are illustrated in Table 1. Out of those cases violent head injury was the common cause of head injury in patients 209 (38.4%).

ı		Frequency	Percentage	Valid Percent
Valid	Frontal Bone	217	39.9	41.7
	Temporal Bone	139	25.6	26.7
	Occipital Bone	60	11.0	11.5
	Parietal Bone	49	9.0	9.4
	Nasal Bone	56	10.3	10.7
	Total	521	95.8	100.0

The 521 patients in which most injured cranial bone is Frontal bone 217 (39.9%) which is illustrated in Table 2.

DISCUSSION:

Frontal bone injuries are common and happen in of maxillofacial injuries and have a higher level or occurrence whenever contrasted with the rest of the sorts of break including the maxillofacial locale.⁴

The frontal bone in a grown-up is an unpaired bone that is an aspect of the boney structure that frames the foremost and prevalent bits of the skull. Toward the start of life, it is a bone isolated by a transitory stitch called the frontal stitch. It at that point changes into a solitary front bone, missing the stitch much of the time. All through life, it assumes a fundamental part in ensuring significant neural structures and structures the prevalent

part of the circle. Frontal bone cracks happen in generally 5% to 15% of every single facial break. In our study we collected the data of 521 patients and analyze the most cause of injured bone was violent assault and which cranial bone highly injured is frontal bone.

As the frontal bone is the most foremost neurocranium bone in the skull, it is flanked by both the encompassing neurocranial bones and the most prevalent viscerocranial bones.⁵

Frontal bone breaks can be detached facial wounds or can broaden intracranially. The frontal sinus has a foremost and back divider. Breaks to the foremost plate alone are facial wounds, requiring restorative careful treatment whenever discouraged. 6-8

Breaks to the back plate are calvarial wounds and convey a few dangers, including intracranial disease (from defilement of the cerebrospinal liquid with no sterile air and liquid from the frontal sinus), intracranial drain, and direct horrendous mind injury if crack parts are extended posteriorly. Assess for frontal sinus injury first utilizing bone windows and afterward utilizing cerebrum windows. This is justifiably so as skull base wounds are regularly ignored while treating more dangerous wounds in Emergency Departments. Notwithstanding, it ought to be recalled that Frontal bone fracture can prompt genuine long haul horribleness and sequelae. In this manner over and over we ought to be reminded to altogether look at our patients in any conditions we are in.

CONCLUSION:

The results of the study highlight that most of the patients are from rural and among them, the most common cause of head injury is violent assault and mostly injured cranial bone injury is frontal bone.

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No competing interest declared.

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