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Frequency of infection in early vs. late surgery of compound depressed skull fracture

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Objective: To assess frequency of infectious complication in early and late operated compound depressed skull fracture.\

Material & Methods: Study design: Hospital based cross sectional comparative study. Setting: The study was carried out in the Department of Neurosurgery, Institute of Medical Sciences, Islamabad. Sample size: The study included 50 patients, divided in to two groups, managed surgically for compound depressed skull fracture. Duration of study: Six months after approval of synopsis from 09.06.2011 to 10.12.2011

Results: Twenty five cases each were randomized to early and late surgery groups. The average age was 29.5 years in early and 31.2 years in late surgery groups with overall slight female dominance (54.0%). Fall (36.0%, 32.0%) and RTAs (32.0%, 28.0%) were the two frequent causes in early and late surgery groups followed by assault (24.0%, 24.0%) respectively. On examination skin edges were contaminated in (36.0%, 44.0%), scalp defect was seen in (8.0%, 40.0%) and CSF leakage was present in (24.0%, 24.0%) in the early surgery and late surgery groups respectively. Bone fragment removal was done in (60.0%) of the cases in the early and (92.0%) in the late surgery group. Post operatively infection was found in (12.0%) cases in early surgery group and (40.0%) in the late surgery group which was statistically significant between the two groups (p-value=0.03).

Conclusion: Based on our study findings it is concluded that early surgery of compound depressed skull fractures is associated with less incidence of infection and other post operative complications. In our series of patients wound infection was significantly high in the late surgery group (>12 hours) compared to early surgery (<12 hours).

Notes: