CERVICAL SPINE INJURY IN MAXILLOFACIAL TRAUMA - A CLINICAL STUDY

Surgery, College of De BY Surgery, Manipal. This dissertation was

DR. LALANI ZAHID S.

UNDER THE GUIDANCE

OF

DR.K.M.CARIAPPA, M.D.S.

Professor and Head
Department of Oral and Maxillofacial Surgery,
College of Dental Surgery,
Manipal.

Dissertation submitted to the Mangalore University in partial fulfilment of the requirements for the degree of Master of Dental Surgery (M.D.S.)

in

Oral and Maxillofacial Surgery

Manipal

June 1994.

Our world has become completely mobile relatively smaller, as scientists and engineers develop faster and more sophisticated modes of transport; and consequently trauma has emerged as one of our leading health problems. lofacial trauma is no exception and injuries of the face and jaws are among those most frequently seen in the emergency rooms of hospitals. Severe facial trauma is in most instances encountered with concomittant injuries to the various body systems and traumatic morbidity is affected by the organs and systems involved. In fact, facial trauma is no longer considered as an independent entity, but both as a factor causing the morbid state, and relation to assessment and medical intervention. One amongst plethora of injuries associated with maxillofacial trauma cervical spine injury. The spinal cord connects the to other organs in the body. If this cord is injured, connections between the brain and muscle groups or organs below the level of cord injury are damaged or severed and the part of the body involved may become functionally incommunicando. In severe cervical spine injuries with cord involvement, if the patient vives, he becomes for the rest of his life a prisoner in his own body, dependent on other people and machines for his needs. Once this damage has been done, there is almost no cure. Early diagnosis of injuries which may lead to cervical spinal cord damage is therefore of paramount importance.