


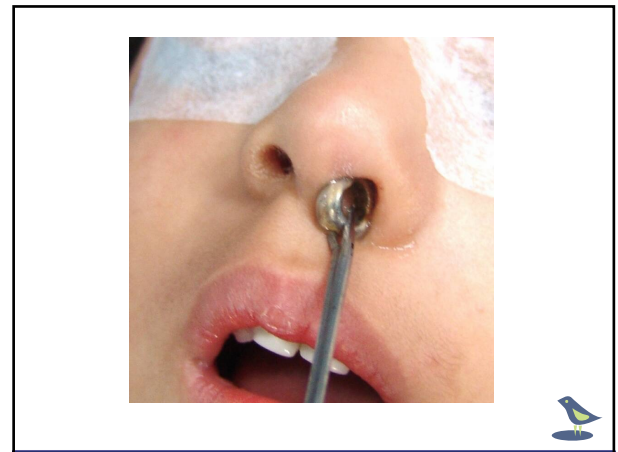
ThinkAskLearn
Health Professional Education

Ears, Nose and Dental Emergencies

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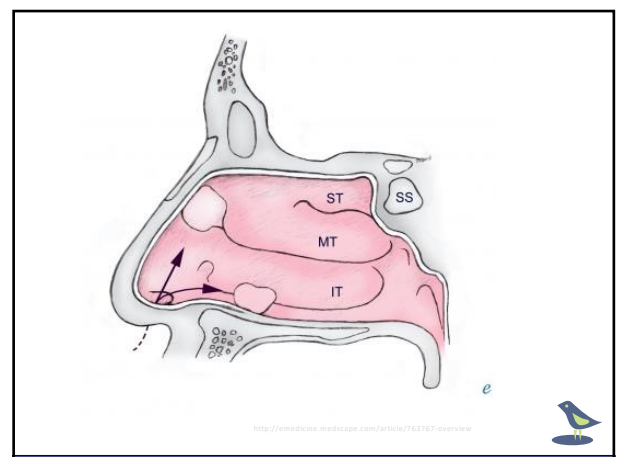
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Up your nose with a rubber hose

- Multiple objects – peas, corn, small balls, beads, lego!
- Kids between 2 and 5, males slightly more common
- Presents after witnessed or admitted insertion
- May complain of fullness in nose
- Running offensive discharge
- Incidental finding




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Mother's Kiss



AFP Volume 42, No.5, May 2013




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Not just blowing in the mouth

- Occlude the unaffected nostril
- Parent then blows in the mouth until they feel the resistance caused by closure of the child's glottis
- Then the adult gives a sharp exhalation to deliver a short puff of air into the child's mouth
- Maybe repeated a number of times
- No reported incidence of tympanic membrane rupture or barotrauma
- Successful in approx 60% of cases


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Hi Flow Nasal Positive Pressure


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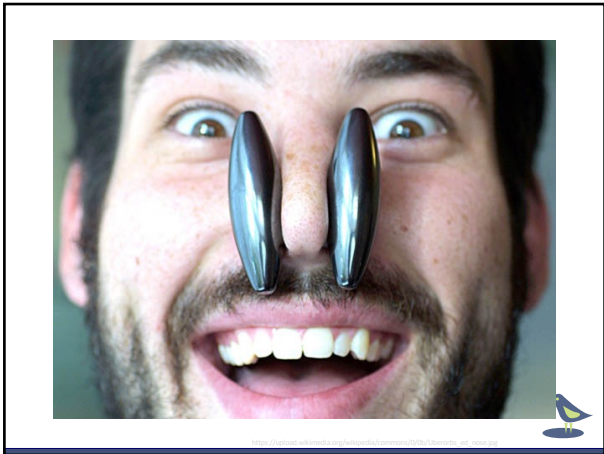
- Titrate oxygen to 10-15 l/min
- ‘Periorbital emphysema or blowing a globe out of its socket reflects a lack of understanding of the term titration.’
- Would need to have mouth closed ???

McNamee and Jeong 2014

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- Apply end of catheter tip to object then apply suction
- Apply 100-140mm Hg of suction
- Good for round solid objects

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You need a very still child





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Epistaxis

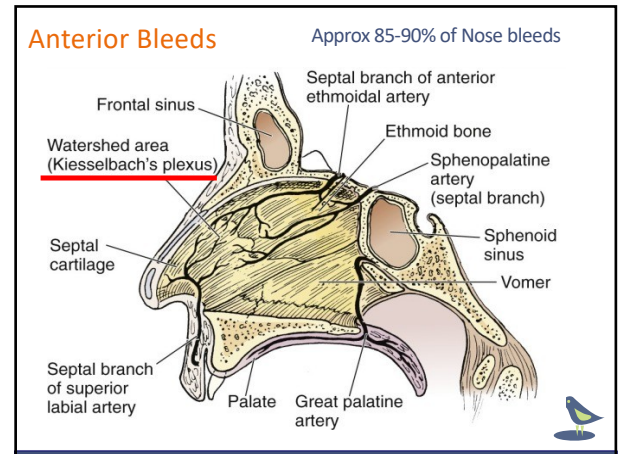
From Greek – A dripping

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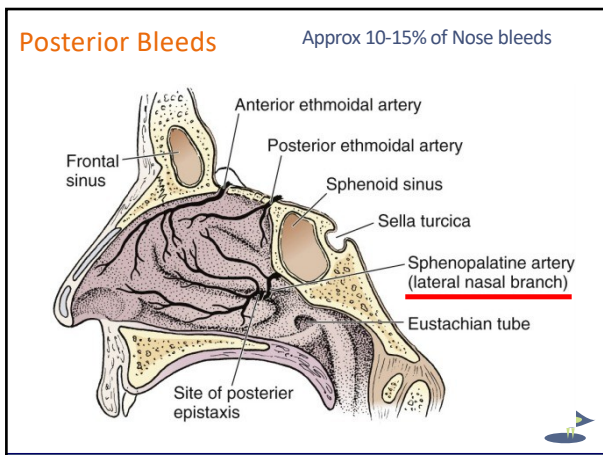
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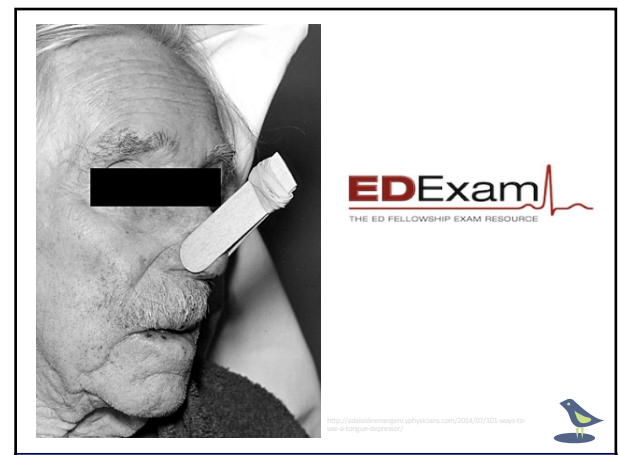
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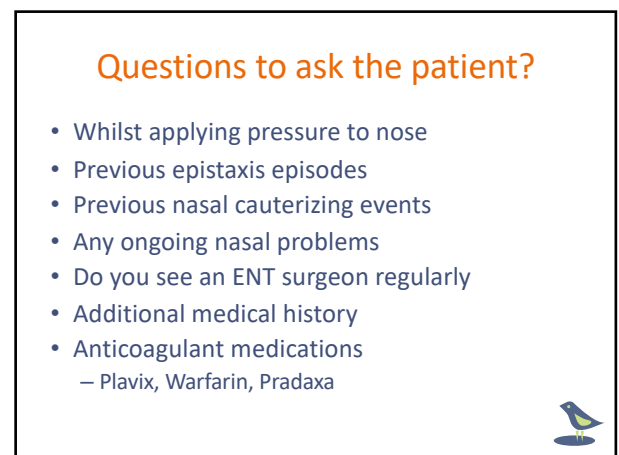
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- Trauma
 - Direct blunt trauma
 - Facial fractures
 - Intranasal lacerations
 - Digital trauma
 - Foreign body insertion
- Mucosal desiccation
- Chemicals
 - Cocaine
 - Ammonia
 - Acid fumes
 - Chromates
- Inflammation
- Allergy
- Infection
 - Viral upper respiratory infection
 - Sinusitis
- Wegener's granulomatosis
- Midline granuloma
- Nasal polyps
- Carcinoma of nose, sinuses, or nasopharynx
- Contributing Factors
 - Haematologic disorders
 - Primary clotting abnormalities
 - Hemophilia
 - Von Willebrand's disease
 - Thrombocytopenia or platelet dysfunction
 - Leukemia
 - Thrombocytopenia purpura
- Clotting abnormalities or platelet dysfunction with other diseases
 - Hepatic disease
 - Chronic renal failure
- Drug-induced clotting abnormalities, platelet dysfunction, or thrombocytosis
 - Salicylate
 - Chemotherapy
 - Coumadin therapy
- Vascular abnormalities
 - Hereditary hemorrhagic telangiectasia
 - Hemangioma
 - Arteriovenous malformation



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It is not hypertension!!!!


- Many patients are hypertensive with epistaxis
- Hypertension has being debunked as cause
 - Eur Arch Otorhinolaryngol. 2011 Dec;268(12):1749-53. Epub 2011 Jun 9.
 - Blood Press. 2003;12(3):145-8.
 - Int J Cardiol. 2009 May 29;134(3):e107-9. Epub 2008 May 21.
- Epistaxis causes hypertension



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MANAGEMENT AIMS


- Resuscitate the patient (Rare)
 - IV cannula, fluid resuscitation
- Establish site of bleeding
 - Anterior (90%), Posterior (10%)
- Stop the bleeding
 - Direct pressure, Packing, Drugs, Product
- Treat the cause
 - Consider reversing warfarin





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Stop the bleeding

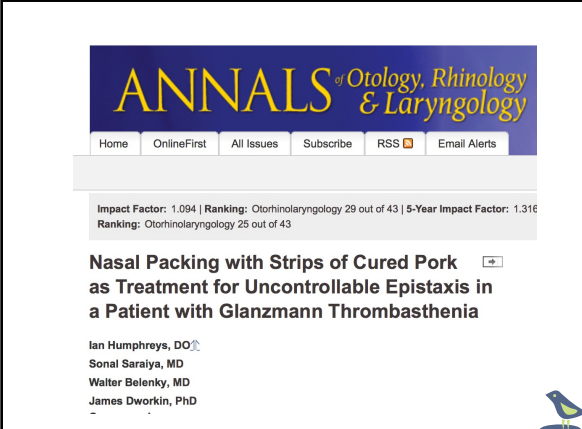

- Direct pressure is 90% successful
- Vasoconstrictive agents on pledgets
 - Adrenaline with lignocaine
- Have suction available
- Chemical (Silver Nitrate) or Electrical Cautery (usually ENT)
- Packing
 - Many options



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Summary

- Epistaxis is rarely but is potentially life threatening
- Hypertension is not a cause but patients are usually stressed
- Simple and direct pressure solves most episodes of epistaxis
- Packing noses presents multiple problems



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Traumatic Dental Emergencies



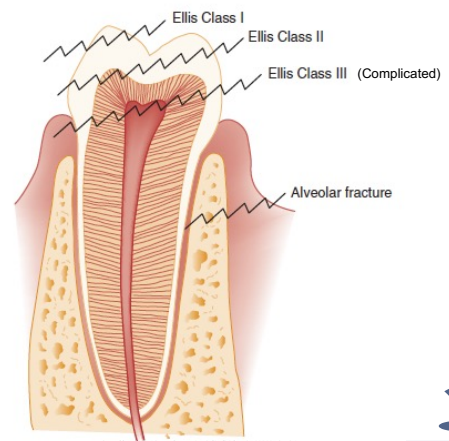
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Dental crown fractures

- Ellis I - enamel only, painless
 - White fracture surface
- Ellis II - enamel and dentin, painful
 - Yellow fracture surface
- Ellis III (complicated) - pulp involved, painful
 - Red fracture surface



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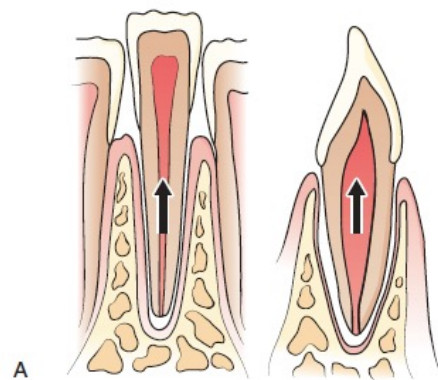
Dental Trauma Terminology

- Usual Conservative management
 - Concussion - pain but stable, nondisplaced
 - Subluxation - loose, nondisplaced
- Usual intervention required
 - Luxation - loose, displaced, malocclusion Can be intrusive, extrusive or lateral
 - Avulsion - completely removed from socket
 - Intrusion - forced into alveolar bone

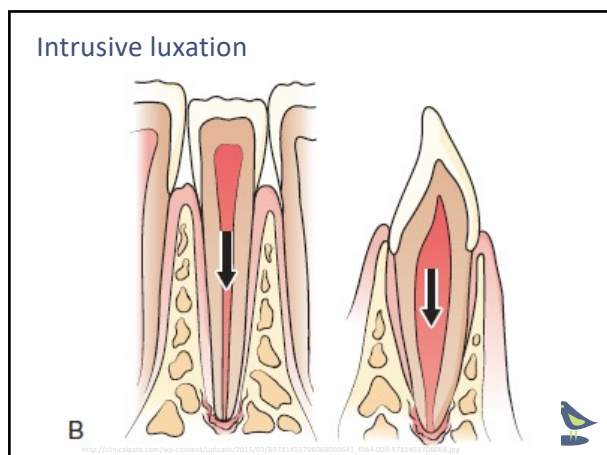


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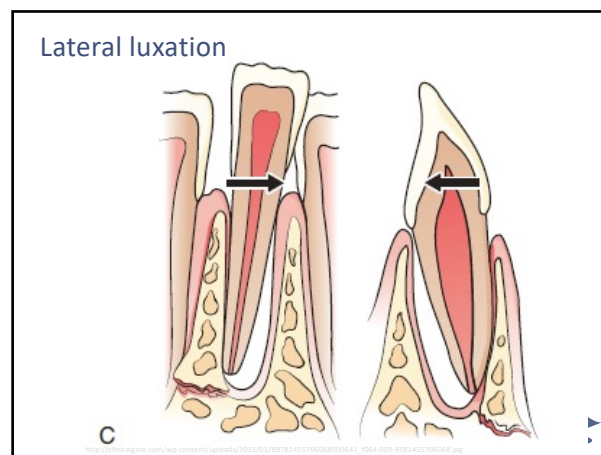
Extrusive luxation



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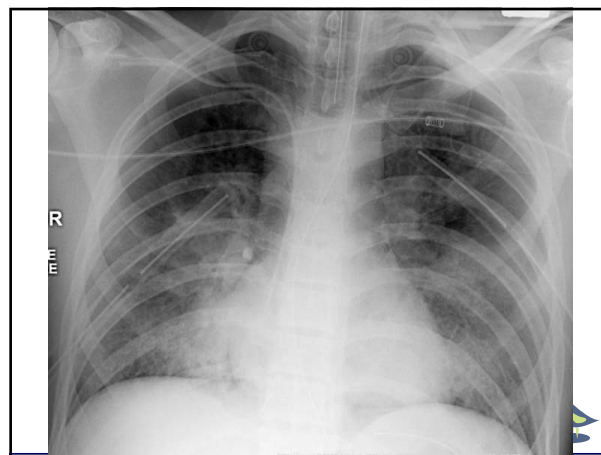


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Avulsion

- Where is the tooth?
- Consider XR if "missing"
- Reimplant or place tooth in physiologic medium ASAP
- Avoid traumatizing periodontal ligament
- Chance of successful reimplantation inversely proportional to time out of socket
- Handle by crown, not by root
- Rinse gently, place in milk or saline solution

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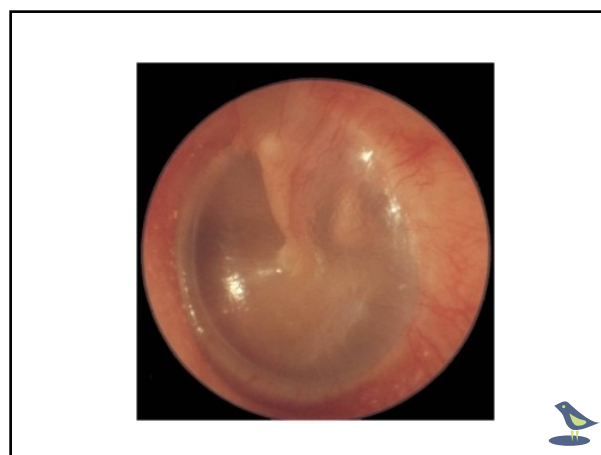
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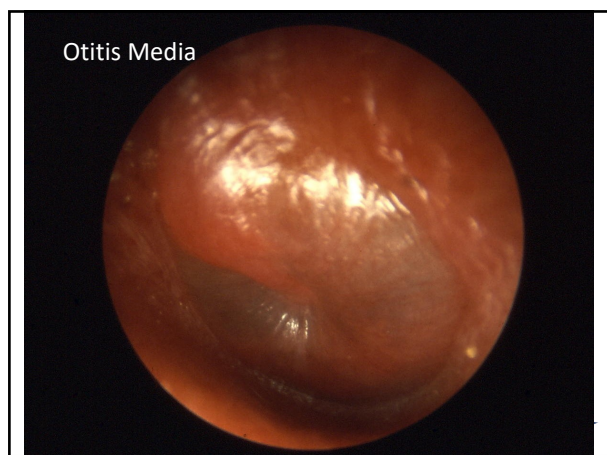
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Otitis Media

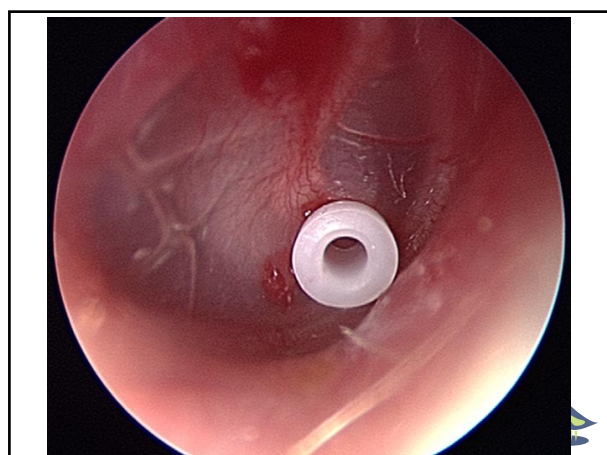
- Caused by virus and bacteria
- Common in the preschool child
- Peak incidence in 6-18 months
- 80% resolve spontaneously
- Pain in commonest problem
- Fever and being miserable

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Antibiotics for Otitis Media

- Most resolve spontaneously
- Only approx 25% caused by bacteria
- NNT 20 for pain reduction
- NNT 33 to prevent perforation
- NNT 11 to prevent opposite ear infection
- Risk vs Benefit for AB
- Diarrhoea, vomiting or rash common

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