CASE NOTES

INJURY TO THE ORBIT*

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P. T., male, aged 21, was admitted to the White Lodge Hospital, Newmarket, on July 31, 1941.

History.—He had been standing in a lorry with a canvas top, when it ran under some trees, and a branch penetrated the top of the lorry and struck him in the face.

Examination.—His right eye socket was filled with the stump of a piece of beech wood projecting about ½" from the centre of the upper eyelid, which was driven down and puckered. At first sight it appeared as if the globe must have been completely destroyed.

On withdrawing the piece of wood with some difficulty, it was found to be 3½" long, ½" wide, and ½" thick. It had penetrated the centre of the upper eyelid, passing through the tarsal plate, and had displaced the globe backwards and outwards, there being no sign of injury to the cornea or sclerotic. It had then passed out through the lower fornix posterior to the lower tarsal plate and external to the lacrimal duct running down towards the external angle of the right nostril. When it was withdrawn a considerable ragged cavity remained. Bleeding was inconsiderable; the nose contained blood but examination showed no wound or fracture, the nose having not been penetrated.

![Figure](image_url)

**Figure.**—Patient after treatment holding the piece of wood which caused the injury.

Treatment.—The wound in the upper lid was repaired with horsehair, stitches being inserted on the outer surface only. A small rubber drain was placed from the conjunctival

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sac into the ragged cavity, which was dusted with sulphanilamide. The drain was removed after two days. No stitches were placed in the lower lid save the one holding the drain in position.

_Progress._—The patient made a rapid and uninterrupted recovery. The eye was kept covered for a week and then left open. When he left hospital after 14 days, vision in the right eye was 6/6 and in the left eye 6/12 and J1.

After discharge he had several severe headaches and found that on looking downwards he had some diplopia; he was therefore re-admitted on August 26, 1941. Miss Perrers Taylor of Cambridge then examined him, and her report was as follows:

This man has a very small error of refraction and glasses are not required. His vision is 6/9 in each eye. Both fundi are normal and his fields are full, showing that there has been no injury to the optic nerve. When he looks straight in front there is no hyperphoria, but on looking down there is a certain amount. It was 11° on September 6 but less than 1° on September 13. I think that this superior rectus has been injured but it is improving rapidly and the prognosis is good.

For the time being he will have to bend his head down whenever he wants to look to the ground, or when he is reading, but this slight disability should disappear in time.

_Later Developments._—The headache steadily improved. X-ray examination showed a slight clouding of the right frontal sinus but there seemed to be no indication for special treatment. He was discharged as fit on September 23, 1941.

When he was seen again a year later his vision was perfect and he did not complain of any disability.

One of the interesting points about the case was the lack of infection in this patient. Secondary infection is common with wound injuries due to wood. It is probable that the sulphonamide dusted into the cavity may have had a good deal to do with this smooth healing.