



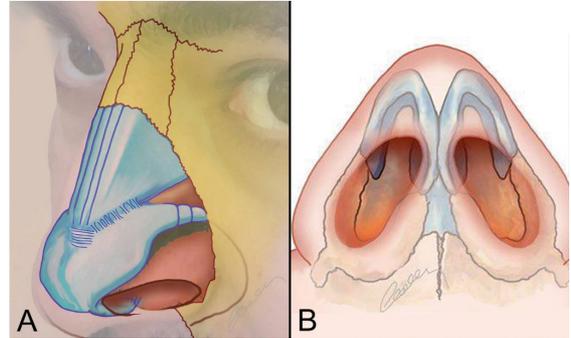
MAKSİLLOFASYAL TRAVMALAR

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BURUN KIRIKLARI

Burun solunum sisteminin en üst kısmını oluşturur. Kranial kavite ile oral kaviteyi birbirine bağlar. Yüzün en çıkıntılı kısmını oluşturur. Piramid biçiminde olan burnun üst kısmı kemik alt kısmı kıkırdaktan oluşmuştur. Burnun eksternal yapısının üst kısmı kemik alt kısmı kıkırdaktan oluşmuştur. Kemik çatıyı nazal kemik, frontal kemiğin nazal spini, maksillanın frontal proçesi oluşturur. Kıkırdak çatı ise septal kartilaj, alar kartilaj ve üst lateral kartilajlar tarafından oluşturulur şekil (1). Burun kırıklarının en sık nedenleri motorlu taşıt kazaları, darp, spor yaralanmaları ve düşmelerdir (1). Nazal kemik künt fasyal travmalarda en sık kırılan kemiktir (2). Tüm kemikler içinde en sık kırılan 3. kemiktir (3). Burun kırıkları sıklıkla kıkırdak ve yumuşak doku yaralanmaları ile ilişkilidir. Nazal kemik önden gelen travmalara karşı daha dirençlidir. Önden gelen travmalarda nazal kemiğin daha çok alt 1/3 lük kısmı kırılır. Nazal kemiğin frontal kemiğe yakın üst 2/3 lük kısmı daha kalındır ve travmalara karşı daha dirençlidir. Burun kırıkları 2. ve 3. dekatlar da daha sık görü-

lür. Burun kırığının redüksiyonu sadece kozmetik açıdan değil sağlıklı bir nazal solunum içinde önemlidir. Erkeklerde kadınlardan daha sık görülür (1,4,5,6).



Şekil 1. Burun eksternal görünüm

CERRAHİ ANATOMİ

Burun iskeleti kemik ve kıkırdak yapıdan oluşur. Piramit şeklinde olan burnun eksternal yapısının üst kısmı kemikten alt kısmı ise kıkırdaktan oluşmuştur. Kemik çatıyı nazal kemikler, maksillanın frontal procesi ve frontal kemiğin nazal spini oluşturur. Kemik çatının altında etmoid kemiğin perpendicular laminası ve vomer bulunur.

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