



P134 - Temporal fascia flap and orbitoplasty for orbital reconstruction in case of severe microphthalmia

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Resumen

Introduction: Microphthalmia is a rare condition which is often associated with micro-orbitism causing facial dissymetry. We report our method for orbital reconstruction for patients with severe microphthalmia.

Case reports: We present three cases of severe microphthalmia, first of all, eye had previously removed by ophthalmologists and they were carrying a little eye conformer, surgery was carried by pediatric neurosurgeon and plastic surgeons. Osteotomies of the superior orbital rim and frontal bone were performed following an oval design in the frontal osteotomy, a lower strip of the removal bone was cut and taken off to increase the height of the orbit. The orbit was reconstructed repositioning the bone fragments to conform a new orbit (image osteotomies). The internal orbital coverage was provided by a temporal fascial flap from the ipsilateral side. (image temporal-flap) We first designed the flap and determined the pivotal point, just under the repositioned orbital rim. We concluded the surgery with an external canthoplasty (image canthoplasty) After one week eye conformer was located in the reconstructed orbit, this is left in the orbit for 6-8 weeks, and finally replaced for an eye prosthesis. In our patients we achieved an excellent result with an appropriate orbital size and volume, and a good coverage of the orbital cavity with temporal fascial flap.

Discussion: There are several options to reconstruct the orbit, being the temporal fascial flap an interesting option for its features of thinness and softness, and ability of filling up the dead space and maintain the convex shape of the eye socket. Quality in orbital reconstruction is essential to achieve good cosmetic and functional results, but reconstruction options need to be all considered and choose the proper procedure based on the size, volume, shape, and area of defect, as well as the patient's features.