

Particular Localization of Foreign Bodies in the Eyelids: About Two Cases at Sikasso Hospital

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Abstract

Case Report

Palpebral trauma is common in Sikasso hospital. We report a particular localization of foreign bodies (the crystal rod of the pen (Bic) and of a fish hook) in the eyelids of two children. The injuries occurred in a context of intentional assault and battery in the school environment for pen crystal and margouillat hunting with the hook. The treatment was surgical and the postoperative course was simple. Prevention through awareness would be necessary to avoid eyelid trauma.

Keywords: Palpebral trauma, foreign bodies, Bic pen crystal, the hook.

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INTRODUCTION

Eyelid injuries are frequent ophthalmological emergencies [1] and may be associated with eye or orbital damage. They are a frequent reason for consultation in the ophthalmology department of Sikasso hospital. The incidence of pediatric ocular trauma varies from 6.8 to 8.85/100,000 inhabitants/year and can even go beyond in developing countries. These injuries mainly affect school-age children [2]. The circumstances of occurrence and the traumatic agents are multiple and vary (metallic, vegetal or plastic) depending on the continents and geographical environments [3]. Many studies have been conducted on eyelid trauma [2].

We report a particular localization of foreign bodies in the eyelids about two cases. One occurred in a context of intentional assault and battery in a school environment and the other while hunting margouillat with a hook. The treatment was surgical and the postoperative course was simple.

COMMENTS

1st Case:

Patient SK, 14 years old, male, who suffered an ocular trauma in a context of intentional blow and injury between students and the facts dated back to 6 years ago. The traumatizing agent had not been identified causing swelling of the eyelid (figure A).

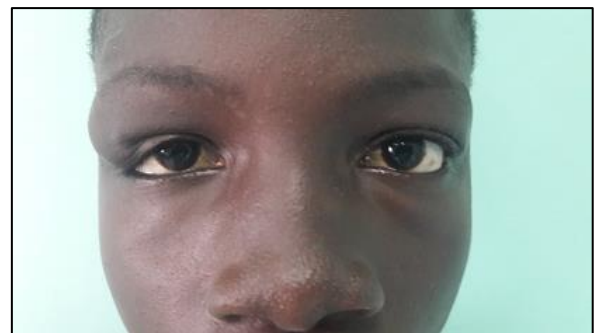


Figure A: Swelling of the upper outer eyelid of the right eye

Faced with the persistence of this swelling, the parents decided to undergo traditional treatment without

success (figure B).



Figure B: Scar from front door and scar from traditional treatment at eyebrow level of right eye

Received in August 2018; the ophthalmological examination will reveal:

A visual acuity of 8/10 on the right and 10/10 on the left; intraocular pressure was 12 mm Hg in both eyes. The external examination will find on the right, a slight fall of the external 1/3 of the upper eyelid associated with a non-painful mobile tumefaction.

On biomicroscopy, the anterior and posterior segments were unremarkable in both eyes. This clinical picture evoked a cyst of the tail of the eyebrow.

Orbito-cerebral CT suggested a dermoid cyst. Surgical management was decided and the preoperative blood test requested was normal. Intraoperatively we were surprised to extract three pieces of pen crystals (figure C).



Figure C: Pen crystal pieces

2nd Case

This is a 4-year-old patient YD, received on September 11, 2018 for hook trauma in a context of

margouillat hunting with a particular wire and hook technique (figure D). Formerly which was done by slingshot.

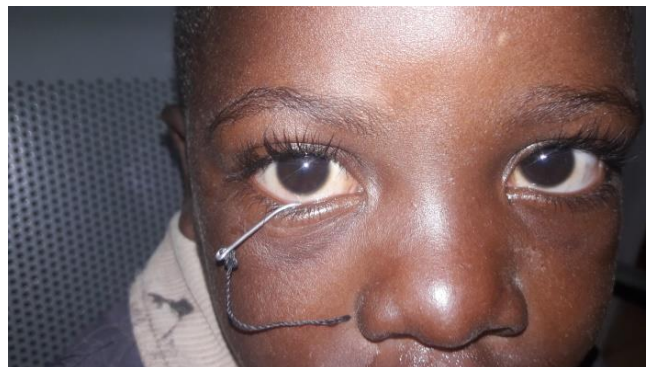


Figure D: On admission with the hook attached to the posterior surface of the lower eyelid of the right eye

On admission, the hook was attached to the posterior surface of the lower eyelid of the right eye. The bulbar conjunctiva and the eyeball were unremarkable. The left eye was normal.

Extraction was decided upon and performed immediately in the operating room under general anesthesia without incident (Figure E). In peroperative the anterior and posterior segment of the eye were normal.



Figure E: In the operating room under GA for extraction

DISCUSSION

Palpebral or orbital plastic foreign bodies are uncommon with less complication [4]. They are very well tolerated without any inflammatory or infectious reaction. Unlike metallic foreign bodies; which are frequently associated with ocular or cranial lesions with a relatively moderate risk of infection [5].

Both patients were male. Male predominance was found in most series studying ocular trauma. It could be explained by the fact that men are more often engaged in traumatic risk activities [6].

We observed particular trajectories of foreign bodies lodging either the upper or lower eyelids.

In our patient observation 1, the entrance door was frontal in a context of beatings and intentional injury between students, the facts of which dated back to 6 years ago. Then the migration in the supero-temporal part of the upper eyelid stimulating the clinical picture of the cyst of the eyebrow tail.

Observation 2 the particular trajectory of the foreign body was purely towards the eyeball; it lodged in the posterior surface of the lower eyelid without affecting the eyeball. They consulted within 3 hours and the surgical management was performed under general anesthesia.

The entrance door and the trajectories can be linked to a hazard; because could reach any element of the visual apparatus. The prognosis depends on the causative agent and the affected region. In our two types of description, the prognosis was good because the damage was adnexal. According to Eladioui.K very few cases of plastic orbital foreign bodies have been reported. It was very well tolerated in our patient with no inflammatory or infectious reaction.

CONCLUSION

The particular localization of foreign bodies in the eyelids (crystal of the pen and the hook) in children denotes the imprudence and the dangerousness of certain games for children. Prevention through awareness would be necessary to avoid eyelid trauma.

REFERENCES

1. Berete, C., Kouassi, L., Sylla, F., Konan, A., Balde, A., & Fanny, A. (2017). EYELID TRAUMA: EVALUATION AND MANAGEMENT OF 36 PATIENTS IN THE OPHTHALMOLOGY DEPARTMENT OF TREICHVILLE CHU. *SOAO*, 01, 15-22.
2. Beylerian, M., & Denis, D. (2020). Ocular trauma in children. *Perfect. In Pediatrics*, flight. 3(1), 78-85. doi: 10.1016/j.perped.2020.01.019.
3. Mr. Sidibe. (2014). BRAID NEEDLE EYE TRAUMA AT THE TROPICAL INSTITUTE OF

OPHTHALMOLOGY OF AFRICA (IOTA).
Ophthalmology.

4. Chabbar, I., Serghini, L., & Berraho, A. (2020). Corps Etrangers Orbitaires Orbital Foreign Bodies”,*J. Tooth. Med. Science. IOSR-JDMS*, flight. e-ISSN: 2279-0853, p-ISSN: 2279-0861. 19(4) Ser.12 (April. 2020), PP 21-24, doi: 10.9790/0853-1904122124.
5. Eladioui, K., Benjelloun, A., & Chekkoury-Idrissi, A. (2009). An unusual orbital foreign body. *Rev. Stomatol. Chir. Maxillofac.*, flight. 110(6), 371-373. doi: 10.1016/j.stomax.2009.09.010.
6. ZABSONRE/AHNOUX, A., TRAORE, A., NIKIEMA, S. N., & SANOU, J. (2021). EYE INJURIES BY EXPLOSION IN ARTISANAL MINES IN BURKINA FASO. *J. Moroccan Society of Ophthalmology*, flight. 30, 2. doi: 10.48400/IMIST.PRSM/JSMO/25440.