907 Reduction of Nasal Fractures During COVID-19: A Single-Centre Experience

T. Crotty, M. Corbett, T. Hussain, A. Diaconescu, N. Patil Sligo University Hospital, Sligo, Ireland

Introduction: The utilization of local or regional anaesthesia for manipulation of nasal fractures (MNF) avoids the need for general anaesthetic (GA), and the risk associated with instrumentation of the airway during the COVID-19 pandemic. Furthermore, MNF under local anaesthetic (LA) provides similar results with regards to cosmesis and patient satisfaction. We present our experience of performing MNF under LA during the COVID-19 pandemic.

Method: A single-centre, prospective study of all patients undergoing MNF under LA was conducted (13th July/20-11thSeptember/20). Following reduction, pain scores and patient satisfaction surveys were administered.

Results: A total of 25 patients (M/F:16/9, median age, 25.6yr (14-52yr)) were enrolled. The majority of patients received either one or two instillations of LA (n = 19, 76%). Pain reported during the MNF procedure was 4.4/10, whilst pain during LA administration was reported as 3.2/10. 80% of patients felt instillation of LA was less painful than expected. 88% of respondents tolerated the LA well, and only 8% would have opted for general anaesthetic. 24 (96%) participants were happy with the cosmetic result.

Discussion: MNF under LA is a safe and effective alternative to MNF under GA. More literature is needed to define the best method of administering LA prior to performing MNF.