

Images in clinical medicine



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Penetrating intracranial wooden stick injury in an 11-year-old boy

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Image in medicine

Traumatic brain injury caused by wood is unusual in a child. We report the case of an 11-year-old boy who sustained a penetrating wooden stick injury through the occipital bone (A), as a result of an incident occurred while playing. Neurologic examination was normal. Computed tomography (CT) scan showed the foreign body with the radiological appearance of a dry wood, similar to air (B). Angiotomography was not done as it was unavailable. The patient was transferred to the operating room, with the patient under general anesthesia, intubated and ventilated, installed in the prone position, the occiput at the zenith, and then proper cleaning and draping of the surrounding area was applied. We performed a





midline occipital skin incision, a trephine hole adjacent to the craniocerebral wound, and then a lost bone craniotomy with Kerrison rongeurs around the wound was performed. The wooden stick had pierced the dura over a 20mm length and we found bleeding from the brain wound. The wooden stick was carefully extracted (C). The wound was irrigated profusely, the dura plasty was performed with fascia, and the skin was closed. The patient received two weeks of antibiotic prophylaxis covered gram-positive, gram-negative and anaerobic bacteria. Brain CT scan performed on postoperative day three, showed a small brain edema (D). He was discharged home four days after the surgery with normal neurological status.



Figure 1: penetrating intracranial wooden stick injury through the occipital bone; (A) the patient in operating room, installed in the prone position; (B) CT scan shows around the foreign body the appearance of dry wood; (C) The wooden stick extracted, intracranial portion turned black; (D) Brain CT scan showed a small brain edema