Case Report

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A Case of Anti-Regime - A Firearm Injury

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Abstract

Many non-citizens were injured during the incidents that occurred in Syria. To draw attention to the drama an interesting case occurred in the anti regime events, presented in this case report.

Our case, a 27 year old male, wanted to escape to Turkey because of the rebellion launched against the regime in Syria. Firearms by security forces injured his right eye while attempting to cross the border. Although he was wounded, he succeeded to flee a shelter in Turkey. In his physical examination 300 degree full-thickness laceration of the right sclera, choroid and retina was observed. The retina was detached and vitreous was incarcerated to the lips of laceration. In periorbital region there was ecchymosis, edema and a laceration in the nasal side of the lower lid with tissue loss. Radiographic examination demonstrated a hyperdense metallic substance in inferonasal side of the orbit near to the apex of the orbita. Tomography of the brain did not demonstrate a pathological feature. The right eye underwent

surgery and was repaired primarily. However, the right eye completely lost its function. He was discharged 7 days after treatment. In this case, bullet of the firearm caused damage only in the eye globe and the orbital bone and stuck in the posterior wall of the orbit. Interestingly there was no damage in the brain tissue.

In addition, unmerciful shooting to an innocent citizen who is unarmed and escaping from violence, show that the life is so difficult for the people against the regime in Syria

Key Words: Gunshot wounds, human rights violations, orbital trauma.

Introduction

In recent years, substantial increases were observed in firearm injuries, because firearms shifted from civilian areas to war areas. 3.15 of 1000 people apply emergency services due to eye injury every year in America (1). In 2001, this ratio was found to be 6.98 per thousand (2). In addition, eye injuries were seen due to gunshot injury in 14.5 per 100,000 people in 1993 (3). 523 eye injuries have also been reported due to gunshot injury during the Second Gulf War between 2003 and 2006 (4).

Because of the increasing demands for reform in Arab countries after November 2010, a large number of civilian citizens were injured or killed during events and protests in Syria. Some of those who were injured during anti-regime protests were treated in Hatay Mustafa Kemal University Medical Faculty Hospital. We presented an interesting firearm injury case

who was treated in our hospital. By this way, we aimed to draw attention for people who lived drama there.

Case Report

Our case is 27-year old male. He wanted to escape to Turkey because of initiated rebellion against regime in Syria. His right eye was injured with AK-47 gun by the security forces, when he tried to cross the border. He claimed for asylum escaping in injured state.

In examination, 300 degree full layer laceration, detachment of choroid and retina, vitreous prolapse, right periorbital ecchymosis, edema, complete incision of lower nasal lid and tissue loss were detected on right sclera. The apex of right orbital posterior fossa wall had hyper dense metallic appearance of bullet. Any pathological feature was not detected on brain CT scan. Right eye was primarily repaired by surgery. However, the right eye had lost its function completely. Patient was discharged after seventh day of treatment. Gun bullet was limited just around eye globe and orbital bone. Although bullet was located back wall of orbital, it did not damage brain tissue (Figures 1 and 2).

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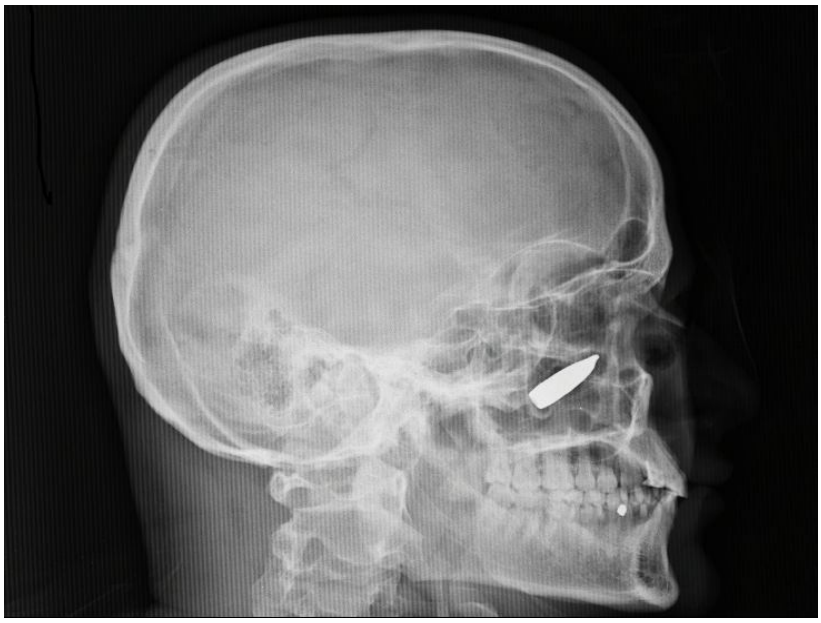

Figure 1: Lateral skull radiography. Note the bullet in the inferior side of the globe.

Figure 2: Anteroposterior skull radiography. Note the bullet in the inferonasal side of the orbit.

Discussion

Eye injuries which occurred during war are mostly firearms-related injuries. 4.5 percent of American soldiers were injured from eye region in Iraq war (5). A study in East Jerusalem has reported that 567 civilians had eye injury between 1987and 1993 (6). 523 eyes of 387 soldiers were treated due to ocular trauma during the second Gulf war. 198 of them had open globe eye injury. 86 of them had been injured by foreign bodies. 61 of them had been injured by perforation. 32 of them had been injured by penetration and 19 soldiers were injured by rupture. There were other injuries except eye injury in 85 percent of the soldiers. Among those poor visual prognosis was recorded in soldiers who have oculoplastic or neuroophthalmologic injuries in addition to eye injuries (4).

In a study which was conducted in Croatia between 1991 and 1995, 13 of 14 cases were soldiers, and 8 of them injured with shrapnel. Six of them injured with bullet. Enucleation and evisceration were performed in 42.8 percent of them. Blindness developed in 9 eyes (7). 285 open eye injuries were recorded in a study including in a 10 year study about terrorist attacks in Turkey (8).

In our case, there was a large perforation. Because tissues of the anterior segment and posterior segment are seen at the edges of the wound, worse prognosis was exhibited. Primary repair was performed to the patient although he refused evisceration. After consultation with neurosurgery, bullet wasn't removed, because of the risks of removal due to its location adjacent to brain. Even if there was no sense of sight, post-operative glob integrity of patient

was partially protected. Hence, elective requirements were satisfied to undergo a potential prosthetic surgery in the future.

Gun bullet was limited to the eye globe and orbital bone only. Although bullet stuck at the back wall of orbit in patients who were injured by high-velocity gunshot, it was interesting not to damage brain tissue. As a result, mercilessly firing to the unarmed innocent citizens who fled from violence has showed how difficult situation there were for anti-regime supporters in Syria.

References

1. McGwin G, Jr., Owsley C. Incidence of emergency department-treated eye injury in the United States. Arch Ophthalmol. 2005;123(5):662-6.

2. McGwin G, Jr., Xie A, Owsley C. Rate of eye injury in the United States. Arch Ophthalmol. 2005;123(7):970-6.

3. McGwin G, Jr., Hall TA, Xie A, Owsley C. Gun-related eye injury in the United States, 1993-2002. Ophthalmic Epidemiol. 2006;13(1):15-21.

4. Weichel ED, Colyer MH, Ludlow SE, Bower KS, Eiseman AS. Combat ocular trauma visual outcomes during operations Iraqi and enduring freedom. Ophthalmology. 2008;115(12):2235-45.

5. Zouris JM, Walker GJ, Dye J, Galarneau M. Wounding patterns for U.S. Marines and sailors during Operation Iraqi Freedom, major combat phase.Mil Med.2006;171(3):246-52.

6. Jaouni ZM, O'Shea JG. Civilian eye casualties in east Jerusalem and the occupied territories. Med Confl Surviv. 1996;12(2):138-48.

7. Jankovic S, Buca A, Busic Z, Zuljan I, Primorac D. Orbitocranial war injuries: report of 14 cases. Mil Med. 1998;163(7):490-3.

8. Sobaci G, Akin T, Mutlu FM, Karagul S, Bayraktar MZ. Terror-related open-globe injuries: a 10-year review. Am J Ophthalmol. 2005;139(5):937-9.