

## Congenital postural deformity of the nose: a case report

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Figure 1a (above)

Figure 1c (below)



Figures 1a, 1b and 1c

Baby H showing congenital postural  
deformity of the nose at birth  
(with parental permission).



Figure 1b (above)



Fig 2  
Lateral X-ray of Baby H's skull at birth showing  
flattening of the occiput.



Fig 3  
Baby H aged 7 weeks.  
There is no sign of nasal deformity.

### CASE HISTORY

Mrs. H was a primigravida, aged 29. She suffered from severe pre-eclampsia in late pregnancy. The baby presented by the vertex, the head having been deeply engaged within his mother's pelvis for several weeks before delivery. Labour and delivery were spontaneous and uncomplicated.

The baby boy weighed 3075g with a head circumference of 35cm and a length of 52cm. Examination revealed no abnormality apart from a deformity of the nose which was acutely bent laterally onto the right cheek (Fig 1a, b and c). There was also a significant flattening of the occiput (Fig 2). Nasal respiration was severely obstructed but could be readily relieved by manual correction of the deformity. Treatment was by internal splinting of the right nostril using a nasal airway. All trace of the nasal deformity had disappeared within a few weeks (Fig 3). Follow-up at 8 years revealed a fine normal lad, including a normally shaped occiput. There was no history of subsequent nasal problems.

### COMMENT

Congenital postural deformity due to moulding pressure in-utero may

affect any part of the body (Figs 1 – 3). Deformity of the nose of a severity to require treatment for respiratory obstruction as well as for cosmetic reasons is rare. Typically, as in the present case, such infants are usually firstborn with a history of the fetal head having been deeply engaged within the mother's pelvis for some weeks before birth.

### REFERENCES

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