

## **COMPARISON BETWEEN PERCUTANEOUS REDUCTION AND CLOSED REDUCTION FOR TREATMENT OF NON-COMMINUTED ISOLATED ZYGOMATIC ARCH FRACTURES**

Zygomatic arch fractures are common injuries, occurring in isolation in 5% of all patients with facial fractures and in 10% of patients with any fracture to the zygomaticomaxillary complex. Isolated non-comminuted zygomatic arch fractures are easily treated with the minimally invasive approaches, which most often provide long-term stability. This study used an objective analysis for evaluation of various minimally invasive options available for reduction of non-comminuted isolated fracture of zygomatic arch namely percutaneous, transcutaneous, Gillies, and Keen approaches. The study included 100 patients randomly divided into 2 groups, group A treated by percutaneous and transcutaneous methods and group B treated by closed reduction. Objective analysis was performed using malar height and vertical dystopia measurements; subjective analysis was done based on clinical analysis and a questionnaire answered by the patients. It was concluded that there is no statistically significant difference in regards the outcome among both groups and both methods can be done safely to reach an anatomic successful reduction