Infraorbital nerve palsy: A complication of laser in situ keratomileusis

Timothy J. McCulley, Charles W. G. Eifrig, Norman J. Schatz, Steven I. Rosenfeld, and Byron L. Lam; Miami, FL, USA 33136; fax: (305) 326-6474; Bascom Palmer Eye Institute, University of Miami, Miami, Florida, USA; Inquires to Byron L. Lam, MD, 900 NW 17th St, Manuscript accepted 18 March 2002;

PURPOSE: To report infraorbital nerve dysfunction after laser in situ keratomileusis.

DESIGN: Observational case report.

METHODS: Neuro-ophthalmologic examination with brain and orbital magnetic resonance imaging (MRI) and orbital computed tomography (CT).

RESULTS: During laser in situ keratomileusis, two healthy women, aged 42 and 46 years, experienced acute onset of sharp ipsilateral cheek pain. Both cases occurred during manipulation of the eyelid speculum. Postoperatively, ipsilateral numbness and tingling or pain of the upper cheek was reported, and examination showed decreased sensation in the distribution of the infraorbital nerve. In both cases, brain and orbit MRI and orbit CT were normal. Both patients were managed medically. In one patient, mild symptoms persisted 1 year postoperatively, and in the second patient, moderate discomfort persisted 8 months postoperatively.

CONCLUSION: Infraorbital nerve palsy is a potential complication of laser in situ keratomileusis. Symptoms improve but may persist.