

# JONES' CLINICAL PAEDIATRIC SURGERY

SEVENTH EDITION



Edited by:

John M. Hutson

Michael O'Brien

Spencer W. Beasley

Warwick J. Teague

Sebastian K. King

WILEY Blackwell

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Figure 15.2 Infant feeding bottle for patients with cleft palate (the infant has had cleft lip repair also).

Figure 15.3 A repair of cleft lip.

Figure 15.4 Descriptive names are applied to various head shapes which do not necessarily reflect the aetiology. (a) Scaphocephaly (*boat-shaped*) with fusion of the sagittal suture. (b-d) Plagiocephaly (*crooked head*) may be due to deformation (b), unilateral coronal synostosis (c) or unilateral lambdoid synostosis (d). (e) Brachycephaly (*short head*) is usually due to bicoronal synostosis, and often seen with Crouzon or Apert syndrome. (f) Trigonocephaly (*triangular forehead*) is seen with isolated metopic suture synostosis.

Figure 15.5 Scaphocephaly, shown from the side and above, showing the elongation of the cranium caused by synostosis of the sagittal suture.

Figure 15.6 (a) The Tessier classification of craniofacial clefts. (b) A patient with a severe 0-14

midline Tessier cleft. (c) 3-D CT scan of the patient (with endotracheal tube *in situ*). The bony cleft continues in the 14 position and hypertelorism of the orbits is demonstrated. (d) Postoperative appearance after complete mobilisation of the orbits and maxillae with midline closure.

## Chapter 16

Figure 16.1 Thyroglossal cyst that has become infected.

Figure 16.2 Lymphatic malformation in a baby with Down syndrome.

Figure 16.3 Periorbital cellulitis: sinusitis is a common source of infection.

Figure 16.4 Atypical mycobacterial *cold* abscess.

Figure 16.5 Sialogram showing sialectasis. A contrast x-ray of the parotid duct showing a *snowstorm* of saccular dilatations of the lesser ducts in the enlarged parotid.

Figure 16.6 Sternomastoid *tumour* in an infant.

Figure 16.7 Sternomastoid torticollis. A tight (scarred) right sternomastoid muscle is apparent along with secondary hypoplasia of the right side of the face.

Figure 16.8 External angular dermoids, just above and lateral to the right eyebrow, and the left under the lateral edge of the left eyebrow..

Figure 16.9 Microtia, associated with a maldevelopment of the dorsal ends of the first and second branchial arches. The external auditory canal is a shallow pit.

Figure 16.10 Bat ears.