

Management of Palpebra Rupture Cases in Children: A Case Report**Milenia Syawali¹, Oktarina Nila Juwita², Anissya Rima Oktavia³**Universitas Tarumanagara, Jakarta, Indonesia^{1,2,3}Email: Mileniasyawali2000@gmail.com, oktarinanila17@gmail.com,
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Keywords	Abstract
Eyelid injury, palpebral rupture, laceration, pediatric	Eyelid injuries, particularly palpebral lacerations, are common in pediatric patients and require meticulous management to prevent long-term functional and cosmetic issues. These injuries, often resulting from trauma, pose significant challenges, as they involve both the skin and deeper structures of the eyelid. This case report discusses the management of a 7-year-11-month-old child who sustained a full-thickness eyelid laceration after falling and hitting a stone. The patient presented with sharp pain, difficulty in opening the eyelid, and bleeding. A physical examination revealed a full-thickness laceration on the superior margin of the left eyelid, with accompanying edema and subconjunctival hemorrhage. Imaging tests were not required as no orbital injury was suspected. The patient underwent eyelid reconstruction within 72 hours, and postoperative care included antibiotic treatment and wound management. The surgical outcome was successful, with optimal cosmetic and functional results. This case underscores the importance of timely and precise surgical intervention to minimize complications and achieve satisfactory results in pediatric palpebra injuries. Further research is needed to establish comprehensive guidelines for managing eyelid trauma in children, particularly regarding surgical techniques and postoperative care to ensure the best outcomes for young patients.

**INTRODUCTION**

Eyelid injury is one of the most common medical conditions in the field of ophthalmology, with a variety of causes that include sports injuries, traffic accidents, dog bites, and injuries related to acts of violence (Cade, 2023). The eyelids, or palpebra, are a functional element that protects the eyes from potential harm and significantly contribute to facial aesthetics. Deformities or injuries to the eyelids, especially those derived from trauma, require careful treatment to achieve optimal cosmetic results and to reduce the possibility of postoperative complications (Tomy, 2018).

Repair of traumatic eyelid wounds requires an in-depth understanding of anatomy and the application of a careful treatment approach. This article will discuss a case report regarding the successful management of injuries to the face and eyelids, particularly in a pediatric patient. This case is important because it involves a sensitive and complex handling of children's

eyelids (Amire, 2020). Through this case presentation, we can gain additional insights into the effective management of eyelid injuries, especially in pediatric populations that require a more careful approach to care (Azzahra et al., 2024).

Indonesia faces significant challenges in alleviating poverty, which remains a persistent issue despite the country's rapid economic growth. Over the years, the government has implemented various policies aimed at reducing poverty, including increased government expenditure and tax reforms (Vidriza & Talmera, 2024). The role of government expenditure in sectors like education, health, and infrastructure has been recognized as a key factor in improving the population's welfare, particularly in rural areas where poverty is most prevalent. However, while government spending has increased, the effectiveness of these investments in reducing poverty has been questioned, with disparities still existing between regions (Brempong & Gries, 2020).

The relationship between taxation policies and poverty reduction is also a subject of growing interest. In a country like Indonesia, where inequality is high, the distribution of wealth through progressive taxation could play a crucial role in narrowing the gap between the rich and the poor. However, the regressive nature of certain taxes, such as value-added tax (VAT), has often been criticized for disproportionately affecting low-income households. Understanding the interplay between government expenditure and taxation is essential for creating effective policies that foster economic growth and promote social equity.

Indonesia's government has made significant efforts to address poverty through its fiscal policy, particularly by increasing social spending in health, education, and public infrastructure. However, questions remain about whether the increase in government expenditure is sufficient to address the country's deep-rooted issues of poverty. While some regions have benefited from these policies, others, especially in eastern Indonesia, continue to face challenges in reducing poverty rates. This highlights the importance of increasing expenditure and effectively allocating it to the most needy areas.

In addition, taxation policy reform is often seen as a way to enhance government revenue, enabling further investments in poverty reduction. Progressive taxation, in particular, could be a tool to redistribute wealth and improve income equality. However, the effectiveness of such tax policies in reducing poverty remains underexplored in Indonesia's complex socio-economic environment. Despite various studies on government expenditure and poverty, limited research has focused on how taxation intersects with public spending to reduce poverty in Indonesia.

The need for a more nuanced approach to understanding the effects of government spending and taxation on poverty reduction is evident. This research aims to explore how these two factors, individually and together, influence poverty levels in Indonesia, with particular attention paid to regional disparities (Ahonkhai et al., 2023). By examining the effects of different forms of government expenditure and taxation, this study seeks to provide a comprehensive analysis of fiscal policy's role in poverty alleviation (Edeh et al., 2023).

This study will also examine how taxation policies impact different income groups. The reliance on indirect taxes, which are often regressive, raises concerns about the fairness of the current system. While tax revenues are essential for funding government programs, their impact on poverty reduction can vary depending on how these revenues are spent and how

equitably the tax burden is distributed across different population groups (Razzaque et al., 2024).

Lastly, the study will analyze the intersection of government expenditure and taxation through an empirical analysis, utilizing statistical methods to assess the correlation between these factors and poverty levels in Indonesia (Simeon, 2024). This approach will provide insights into whether government expenditure, particularly in social services, effectively reduces poverty, or whether tax policies exacerbate inequality and hinder progress in poverty alleviation (Ramnath & Tong, 2017).

Poverty remains a persistent issue in Indonesia despite the country's growing economy. The government has implemented various policies aimed at poverty alleviation, including increasing government expenditure on key sectors such as education, health, and infrastructure. While these efforts have improved access to essential services, the effectiveness of government expenditure in reducing poverty, particularly in rural and underdeveloped regions, has been questioned. Regional disparities persist, and the impact of increased spending on poverty reduction has been uneven across Indonesia, with certain areas still facing significant poverty challenges despite increased government investments (Qori'ah et al., 2023).

In addition to government expenditures, taxation policies are critical in wealth redistribution and poverty reduction. However, Indonesia's tax system is often criticized for being regressive, with indirect taxes like VAT disproportionately affecting low-income households. Although the government has attempted to reform tax policies to better address income inequality, the role of taxation in poverty alleviation remains underexplored. Therefore, it is crucial to investigate how government spending and taxation policies interact to influence poverty levels in Indonesia, focusing on how different income groups are affected by these policies.

This research is urgent due to the ongoing and widening gap between the rich and the poor in Indonesia, despite government efforts to address poverty. While significant resources have been allocated for poverty reduction, the current fiscal policies and their implementation have yet to demonstrate consistent results across regions. Understanding the relationship between government expenditure, taxation, and poverty reduction is vital for developing more effective fiscal policies that can more equitably address the needs of all citizens, particularly those in underserved areas. This study will provide insights into how fiscal policies can be improved to better address Indonesia's poverty challenge (Moneme et al., 2024).

Several studies have explored the role of government expenditure in poverty alleviation. A study by Komarudin and Oak (2020) found that public spending in health and education contributed to poverty reduction in Indonesia, particularly in urban areas. However, the impact was less pronounced in rural regions, where poverty rates remained high despite increases in government spending. Similarly, Ayuningtyas & Hermawan (2017) highlighted the importance of infrastructure development in reducing poverty, but noted that regional disparities in access to infrastructure led to uneven outcomes. These findings suggest that simply increasing government expenditure is not sufficient; the allocation of resources must be targeted and efficient.

In contrast, research by Hossain (2014) emphasized the role of taxation in poverty reduction, focusing on the impact of progressive taxes. Hossain argued that a well-designed tax

system could reduce income inequality and provide more resources for poverty alleviation programs. However, the study pointed out that indirect taxes in Indonesia, such as VAT, disproportionately affect lower-income households, thus exacerbating inequality. These findings suggest that tax reform is needed to create a more equitable system for poverty reduction.

Further research by Diba et al. (2022) explored the relationship between government spending and poverty in Indonesia's regions, noting that while central government expenditure has increased, poverty reduction has not been uniform. The study concluded that local governments need more autonomy in targeting resources to the area's most in need. However, the study did not explore how taxation policies could complement government expenditure to address poverty at both the local and national levels (Dung & Le, 2023).

While previous studies have examined the role of government expenditure and taxation in poverty reduction, a lack of research directly investigates the intersection of these two factors and their combined impact on poverty levels in Indonesia. Additionally, much of the research focuses on either government expenditure or taxation in isolation, without considering how both policies interact to reduce poverty (Marinho et al., 2011). This study aims to fill this gap by analyzing the effects of government spending and taxation policies on poverty reduction, with a particular focus on regional disparities and the impact on different income groups (Dykas et al., 2022).

The novelty of this research lies in its comprehensive analysis of government expenditure and taxation policies, examining how they jointly influence poverty reduction in Indonesia. By analyzing these two factors together, this study offers a more holistic view of fiscal policy's role in addressing poverty, particularly in a country with significant regional and income disparities (Masiya, 2018). Additionally, this research will provide insights into how tax policies, including progressive taxation and VAT, can be reformed to complement government expenditure and ensure more equitable poverty alleviation (Markina, 2022).

This research aims to investigate the impact of government expenditure and taxation policies on poverty reduction in Indonesia. Specifically, the study aims to analyze how these two factors, individually and in combination, influence poverty levels across different regions and income groups, and to evaluate the effectiveness of current fiscal policies in addressing poverty in Indonesia (Mellyndawati & Yuhertiana, 2023).

This research will provide valuable insights for policymakers, economists, and public officials by highlighting the strengths and weaknesses of current fiscal policies in reducing poverty. The findings will offer recommendations for improving government expenditure targeting and tax reforms to create a more equitable system for poverty alleviation. By examining the intersection of government expenditure and taxation, this study will contribute to more effective poverty reduction strategies that address both regional disparities and income inequality in Indonesia.

RESEARCH METHODS

The research employs a quantitative approach using statistical analysis to evaluate the impact of government expenditure and taxation policies on poverty reduction in Indonesia. This method was chosen to examine the relationships between fiscal variables (expenditure and taxation) and poverty levels systematically and empirically. The quantitative approach allows for the testing of hypotheses and the establishment of measurable relationships using numerical data. By utilizing various statistical models, this method aims to clearly understand how different fiscal policies affect poverty across different regions in Indonesia.

The data collection process involved obtaining secondary data from government reports, national statistics, and public records concerning government expenditure on social services such as education, health, and infrastructure, alongside tax revenue data. These data sets were analyzed using econometric methods to assess the effectiveness of public spending and taxation policies in reducing poverty. The analysis also considered regional variations in poverty levels to explore the spatial distribution of the effects of fiscal policies. This approach enables the research to assess the overall impact of fiscal policies and how these impacts differ across various geographical regions in Indonesia, with a specific focus on rural and underdeveloped areas.

The multiple regression model was employed to analyze the relationship between independent variables (government expenditure and taxation policies) and the dependent variable (poverty levels). The regression analysis controlled for other relevant factors, such as economic growth, inflation, and demographic variables, to ensure that the results accurately reflect the impact of fiscal policies on poverty. This statistical approach provides a robust framework for evaluating the direct and indirect effects of government expenditure and taxation policies on poverty alleviation efforts in Indonesia, thereby offering valuable insights into how fiscal policies can be optimized to reduce poverty.

RESULTS AND DISCUSSION

Case Report

A 7-year-old 11-month-old patient was taken by his parents to the RAA Soewondo Pati Regional General Hospital with complaints of pain and injuries to his left eye after being hit by a stone when the patient fell and tripped over. Pain complaints are felt as stinging and sharp and persist. The pain felt based on the *visual assessment scale* (VAS) is included in the scale of six. The patient's complaints are aggravated when the barer's ability uses his eyes, while the complaints improve with rest. After being hit, the patient was immediately taken to the hospital's emergency department and had not been given any medicine. Complaints of pain and wounds cause patients difficulty in opening the left eyelid. Other complaints in the form of double vision, blurred vision, the appearance of flying objects, and limited eyesight are denied.

On physical examination, the patient appeared moderately ill, with compositional awareness, *Glasgow Coma Scale* (GCS) E4V5M6. Good vital indicators are blood pressure 100/70, pulse 80x/minute, respiratory rate 20x/minute, and axillary temperature 36.7 °C. On *the head-to-toe* examination, no abnormalities were found. On examination of the ophthalmological status of *oculi dextra* (OD), vision was obtained: 6/6; normal field of vision; normal eyeball movement; normal superior and inferior palpebra; normal palpebra conjunctiva and fornix; normal bulbi conjunctiva; no injection; clear cornea; deep anterior oculi (COA)

camera; normal iris; round, regular pupil, direct and positive indirect reflex; clear lens; positive reflex fundus. On examination of *the oculi sinistra* (OS), vision was 6/6; the field of view and movement of the eyeball were difficult to assess because the patient experienced pain when opening the eyes; the palpebra experienced lacerations with a thickness of 2/3 lateral thickness of +3 cm vertically regarding the superior margo accompanied by hyperemic edema in the area around the laceration; the bulbi conjunctiva experienced subconjunctival hemorrhage; the cornea was clear; COA in; iris normal; pupils are round, regular, rectangular and indirect reflexes; clear lenses; Fundus positive reflex.



Figure 1. Description of full-thickness palpebra OS laceration in patients

A complete blood test showed low leukocytosis (17.7 10³/ul (4.5-14.5 10³/ul)), thrombocytosis (402 10³/ul (150-400 10³/ul)), mean corpuscular volume (MCV), and mean corpuscular hemoglobin (MCH) (73.9 pg and 26.5 pg). Other additional examinations, including kidney function, blood clotting profile, blood gas analysis, and electrolytes, were performed for anesthesia purposes, and the results were normal.

Based on previous findings, it was established that the main diagnosis was a palpebra rupture involving the margo palpebra OS. Perioperative management was in the form of ceftriaxone injection 2x250 mg, cendol eye ointment, Pamol injection 3x500 mg, Kalnex injection 250 mg IM, RL infusion 20 tpm. Furthermore, operative management of margo palpebra reconstruction was carried out with the identification of tarsal, intermarginalis sulcus, and mucocutaneous sulcus. The tarsus palpebra is aligned according to its vertical axis, and sutures through the intermarginalis sulcus are performed on both sides of the wound using a 6-0 silk thread. Next, vertical stitching of the mat is carried out with a 5-0 Vicryl to link the tarsus according to its vertical axis (Arsani et al., 2020). Sutures are also performed on the anterior ciliary line and the mucocutaneous sulcus. The palpebra skin is sewn using a disconnected sewing method using a 6-0 plain-gut thread. Antibiotics and wound dressings are used for postoperative management.

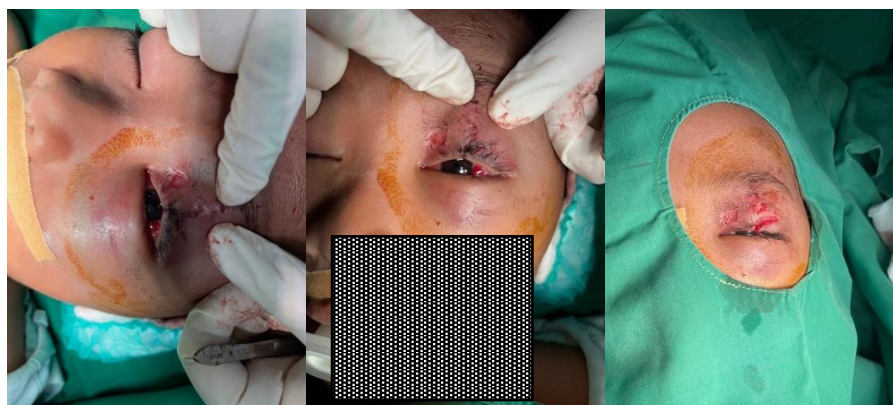


Figure 2. Appearance of palpebral lacerations after operative action

Eyelid laceration refers to damage to part or all of the thickness of the eyelids, which is often accompanied by other eye injuries, including corneal scratches, disorders of the lacrimal drainage system, foreign bodies, open wounds to the eyeball, or cracks in the orbital bones (Walker, 2019). Laceration of the eyelids occurs due to two common mechanisms, namely (1) contact with sharp objects moving at high speeds that can penetrate surface structures (skin, subcutaneous tissues) and cause damage to part of the thickness or penetrate deeper structures (posterior layer, tarsus, conjunctiva) resulting in damage to the entire thickness of the palpebra, and (2) avulsion injuries from blunt trauma. Most cases of palpebra injuries occur in children (LaDou, 2013). In this case, the laceration occurred in a child due to a blunt traumatic avulsion injury.

Effective management of palpebral laceration requires a good understanding of the anatomical and physiological structure of the palpebra and the surrounding facial structure. The most surface layer of both the upper and lower eyelids is the skin. On the lower part of the skin, there is the orbicular oculi muscle, which functions as the main driver of both the upper and lower eyelids (Vander, 2007). In the posterior part of the skin and muscles of the orbicularis oculi lies the orbital septum, a thin layer of fibrous tissue that separates the preaponeurotic fat and other tissues from the postseptal orbital structure by connecting the periosteum of the arcus marginalis to the levator aponeurosis above the superior tarsal boundary (Goodman, 2004). At this same level, the eyelids contain nasal and central alloy fats, with the central alloy fat acting as an important marker for eyelid laceration repair due to its position between the orbital septum and the levator aponeurosis. In the lower part of the preaponeurotic fat is an anterior levator aponeurosis and a posterior Muller muscle, both of which originate from the orbital apex and function as an upper eyelid retractor (Cochran, 2023). Both the upper and lower eyelids also contain tarsal and conjunctival plates. The tarsal plate helps maintain the structural integrity of the eyelid, serves as an attachment point for the eyelid retractor, and houses the Meibom gland and eyelash follicles. The conjunctiva, the layer of non-keratinized squamous epithelium, is the deepest part of the eyelid structure and has several important functions, including protecting the posterior structure of the eye, secreting mucus into the tear film, and providing additional tears to maintain adequate lubrication (Cochran, 2023). In this case, findings were obtained as a full-thickness palpebra rupture. This will cause impaired palpebra

function due to anatomical and physiological damage to the skin structure, protractor muscles, orbital septum, retractor muscles, tarsals, and conjunctiva.

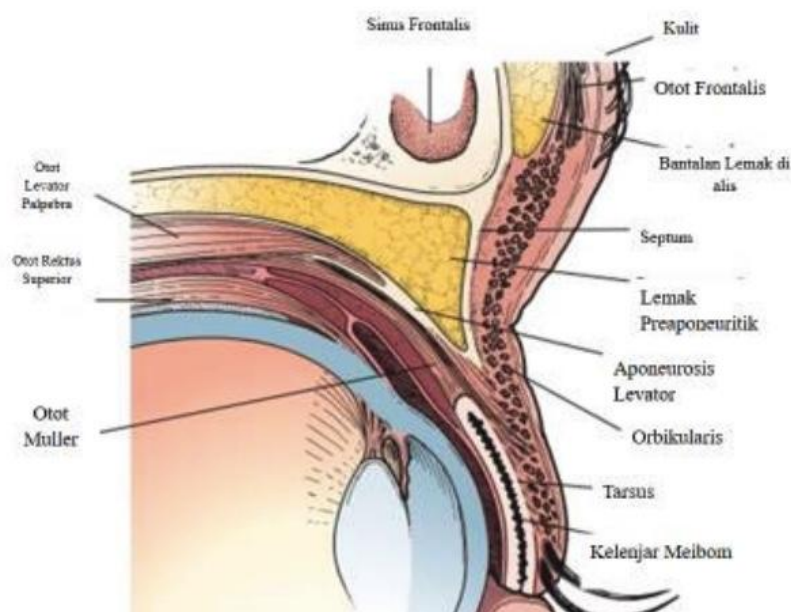


Figure 3. Anatomy of the appearance of the palpebra (source: nerad, ja) cicendo
Source:

Several important things need to be considered in the enforcement of the diagnosis of palpebral laceration. In the anamnesis, the mechanism of trauma and the time of occurrence are important things that need to be asked to determine the possibility of injury. The possibility of injury by chemicals or foreign objects (including contact lenses) and whether glasses were used at the time of injury needs to be asked. In this case, the child does not use glasses or contact lenses, so additional injury from foreign objects is impossible. Evaluate the patient's eye and eyelid condition before injury based on the contralateral uninjured eye, and note the presence of allergies, last oral intake, and tetanus status. There was no history of allergies in this patient, the patient's tetanus immunization status was complete, and the last oral intake was about 6 hours before the incident.

Physical examination in the case of palpebral laceration needs to be performed thoroughly, including visual acuity, pupil size and reactivity, intraocular pressure, extraocular motility and alignment, confrontational field of view, external examination, slit-lamp examination, and bilateral dilation funduscope examination. Several important conditions need to be confirmed on a physical exam, including trauma to the eyeball, orbital soft tissue (including the medial tendon of the ciliary muscle, lateral tendon of the ciliary muscle, levator, canaliculi, and optic nerve), and intracranial space before trying to repair the eyelid (Wajda, 2017). These abnormalities have been excluded from the physical examination of this pediatric patient. In addition, sensory and motor functions around the trauma area should be evaluated. Injuries to the facial motor nerves, especially cranial nerve VII, can seriously impact overall eye health. A neurological examination was also conducted on the patient, especially cranial nerve VII, and results were obtained within normal limits (Black, 2018).

Wound exploration and determination of the depth of penetration of the palpebra lesion are carried out by carefully reversing the eyelid using a cotton-tipped applicator or brace. The fornix section can be irrigated if necessary. If the palpebra is very edematous, then an examination can be carried out using a Desmarres retractor. Palpebra elevation can still be done in patients with this case using a cotton-tipped applicator (Ing, 2002). On examination, no dislocated punctum or lesion in the medial punctum was found, so canalicular injury in this patient can be ruled out.

Further imaging examination should be performed if findings are found that lead to penetration injury or severe blunt trauma. Imaging that needs to be done is *Computerized Tomography-Scan* (CT Scan) of the brain, orbit, and face (axial, coronal, and parasagittal views, with 1- to 2-mm pieces) to rule out possible orbital rupture, retained foreign bodies, fractures, or intracranial injuries (Green, 1990). If a deeper injury is suspected, a follow-up imaging examination before eyelid laceration repair should be performed (Ko, 2017). In this patient, no additional supporting examination in the form of a CT Scan was carried out because no findings were obtained that led to penetration injury or severe blunt trauma. The patient in this case still had good vision, which was 6/6, no fracture imaging, and no intracranial injury.

Operative action can be carried out after ensuring no findings such as orbital injury, periorbital edema, contusion, or foreign objects in the orbit (Alghoul, 2019). Once other injuries have been excluded, the wound can be classified as simple or complicated lacerations. Eyelid laceration is considered complicated if it is a *full-thickness wound*, or involves an orbital rupture, intraorbital foreign body, lacrimal drainage system, damaged levator aponeurosis or superior rectus muscle, damage to the edge of the eyelid, visible orbital fat prolapse, tearing of the medial tendon of the canthus, or extensive tissue loss. An ophthalmologist must treat complicated palpebral lacerations in the operating room (Suryadevara, 2009). In this case, the patient's palpebral laceration is complicated because it involves the entire thickness of the palpebra until it reaches the superior margo palpebra, so the palpebral repair procedure in this patient is carried out in the operating room by an ophthalmologist.

In the operative action of palpebra laceration that hits the palpebra margo, it is necessary to do it carefully because it is very important to maintain the aesthetic function and integrity of the eyelids. The first step involves the identification of the tarsus, intermarginal sulcus, anterior ciliary linea, and mucocutaneous sulcus. Once *such important landmarks* have been determined, the edges of the wound can be linked using appropriate instruments, and the wound tension is evaluated (if the tension is too high when the wound is approached with an instrument, a lateral cantotomy with cantolysis may be required) (Brown, 2007). Link the tarsus along the vertical axis and sew using 6-0 silk through the intermarginal sulcus on either side of the wound 2 millimeters from the edge. In pediatric patients, the use of absorbable threads may be considered. Furthermore, stitching can be done with the vertical mattress method using a 5-0 or 6-0 Vicryl to bring the tarsus closer along its vertical axis, with three stitches for the upper eyelid laceration. Tye, cut, and implant the tarsus seam along the vertical tarsal border. Sewing using 6-0 silk can be done along the anterior ciliary linea and mucocutaneous sulcus. In the last step, intermittent stitches can be performed with a *plain gut* 6-0 to cover the skin along the wound. The remaining stitches can be implanted in the skin sutures furthest from the corneal

surface. In this patient, operative actions have been carried out per the recommendations of *the American Academy of Ophthalmology* (Carol, 1988).

CONCLUSION

In the case of palpebra laceration, a thorough evaluation is required, including physical examination, anamnesis, and imaging examination (if needed) to establish the diagnosis and plan the operative procedure. This case highlights the importance of ruling out other injuries, such as eyeball or orbital soft tissue injuries, before repairing the eyelids. The management of eyelid injuries in children requires a careful approach, good coordination among the medical team, and the application of appropriate operative techniques. Success in treating these injuries not only ensures optimal cosmetic results but also minimizes the chances of postoperative complications. The authors hope that this case report will encourage further research into the management of eyelid injuries in children, which could lead to the development of more specific guidelines and protocols tailored to this population, including optimal surgical techniques. Future research should focus on refining and standardizing these guidelines, evaluating long-term outcomes of various operative approaches, and investigating the use of advanced technologies in improving diagnosis and treatment outcomes for pediatric eyelid injuries.

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