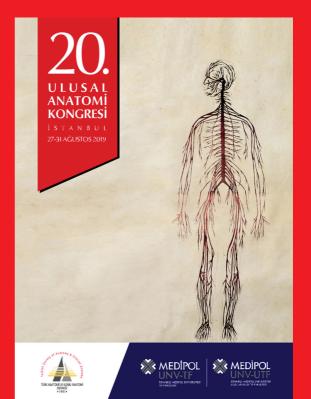
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**Methods:** In our study, patients who had undergone head computed tomography (CT) in Zonguldak Bülent Ecevit University Medical Faculty Hospital for any reason were retrospectively analyzed. CT images of 72 patients (33 female–39 male) aged 18–80 years were transferred to the Osirix MD soft ware and three-dimensional reconstruction was performed. CT images were adjusted so that the frontal sinus and soft tissue could be be stobserved. The vertical and horizontal distances of the both end sandtop of the frontal sinus to the medial and lateral angle of the eye were measured.

**Results:** Frontal sinus was found to be 2.42 mm above and 1.24 mm medial to lateral angle of the right eye and 2.26 mm above and 1.14 mm medial to lateral angle of the left eye.Vertical lengths drawn from the medial angle of the eye and lateral angle of the eye to the apex of the frontal sinus of both eyes showed a statistically significant difference between right and left.

**Conclusion:** In this study, it is aimed to contribute to anatomical knowledge by defining the location of frontal sinus on soft tissue in a sample of Turkish society. It is important to know the location of frontal sinus in terms of guiding the surgical interventions to be performed in this region.

Keywords: frontal sinus, three-dimensional reconstruction, anthropometry, Osirix

### 0-192

# Optic neuritis and thyroiditis thought to be triggered by human herpes virus type 6

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**Objective:** Optic neuritis is an acute, usually monocular, inflammatory, demyelinating disease that causes vision loss. The term "optic neuritis" may also be used in other inflammatory and infectious conditions affecting the optic nerve. Numerous causes of optic neuritis have been reported. Some of these are optic neuritis caused by infectious agents such as Lyme, HIV, hepatitis-B and herpes viruses. Human herpes virus type 6 (HHV-6) is a herpes family virus. It has been reported to be associated with diseases such as cranial neuropathy, focal encephalopathy and autoimmune thyroiditis.

**Methods:** A 31-year-old female patient who had been followed up with Graves' disease for 5 months was evaluated for painful loss of vision in her left eye. It was learned that the patient who worked as a cabin crew frequently traveled abroad and was subjected to a regular vaccination program. Her neurological examination revealed pathological left afferent pupil defect. Fundoscopic examination revealed papillary edema on the left.

**Results:** Visual field examination revealed a sub-lateral visual field defect on the right and diffuse depression on the left. Cranial MRI was unremarkable. Cerebrospinal fluid (CSF) showed no cell, CSF biochemistry was found to be normal, oligoclonal band was negative, IgG index was normal. The

patient was started on 1g pulse steroid daily for 5 days. From the third day of treatment, the patient's vision began to improve. HHV-6 PCR positivity was detected in the patient's CSF. Visual acuity and marked improvement in visual acuity were normal, thyroid function tests were within normal limits and anti-thyroid treatment was discontinued. HHV-6 is a virus that has been reported in autoimmune thyroiditis with various neurological function disorders such as cranial nerve deficits and focal neurological symptoms, especially in immunocompromised patients.

**Conclusion:** Our case was found to be worthy of presentation due to lack of immunodeficiency, HHV-6 positivity in CSF, thyroiditis and optic neuritis.

Keywords: optic neuritis, Human herpes virus Type 6, MRI

### 0-193

### Occupational diseases of anatomy department employees

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**Objective:** The aim of this study is to investigate occupational diseases that may occur due to the risks of the employees exposed in anatomy department and to put forward the precautions to be taken.

**Methods:** Literature review has been done in doctoral, medical specialty and master's thesis in the field of anatomy. In addition, some review has been conducted about occupational health and safety in the field of physical, biological, chemical, ergonomic and psychosocial risks.

Results: Occupational diseases of the anatomy department employees were examined according to the risk factors they were exposed to. 1-Biological risk factors; Working with cadavers for a long time in educational processes and dealing with experimental animals in scientific researches can cause many occupational infectious diseases that are transmitted from person to person and from animals to humans. 2- Chemical risk factors; One of the most important chemical risks for anatomy workers is exposure to "formaldehyde" and the most affected organs are the skin, eyes and lungs. 3- Ergonomic risk factors; Low back pain, varicose veins in the legs and pes planus on the feet can be seen in Anatomy academicians 4- Physical risk factors; In occupants working indoors where thermal comfort conditions are not suitable, both oxygen deficiency and dust in the environment can cause occupational diseases, especially in respiratory system.

**Conclusion:** It has been determined that different occupational diseases can be seen in anatomy workers. Hazards and risks arising from working conditions, substances used, job requirements and employee behavior are indicated in groups.

Keywords: anatomy, occupational health, occupational disease, risk factors