

Surgical–orthodontic rehabilitation: Changing policy of treatment?

Ahmed M Medra
Alexandria University, Egypt

Dentofacial deformities are common maxillo-facial problems. Treatment of these deformities usually needs the cooperation of an orthodontist and a maxillo-facial surgeon. Proper pre-operative orthodontic preparation, good planning, proper surgical techniques and post-operative follow up are mandatory to obtain as well as to maintain perfect and long lasting results. Improvement of surgical techniques, instrumentations, rigid internal fixations and modification of osteotomies minimized the operative time, morbidity, mortality, hospital stay as well as the costs. Skeletal dentofacial deformities may be idiopathic, developmental or secondary to congenital conditions like cleft lip & palate. Skeletal dentofacial deformities may be symmetric or asymmetric deformities. Also, they may be associated with open bite deformities. Long face syndromes also, are included in the deformities.

The use of distraction osteogenesis allowed us to manage these deformities at an earlier age, with less surgical procedures, and accepted results. However, some of these patients may need secondary orthognathic procedure after full development of the patients. The advantages and drawbacks of the technique will be mentioned and discussed. Sixty patients with different dento-facial deformities, were operated upon from 2005 to 2010, at the Cranio-Maxillofacial & Plastic Surgery Department, Faculty of Dentistry, Alexandria University, were subjected to different types of distraction, after proper pre-operative planning and orthodontic preparation, examples from different categories, the techniques, difficulties, complications and outcome of the procedures will be presented.

ahmed_medra16@yahoo.com