

Quality of life in treatment of mandibular fractures using closed reduction and maxillomandibular fixation in comparison with open reduction and internal fixation: A randomized prospective study

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Treatment of mandibular fractures by open reduction and internal fixation (ORIF) is often assumed to be superior to treatment by closed reduction and maxillomandibular fixation (MMF) even in a simple fracture that can be indicated for either modality. Patients managed by ORIF seem to be rehabilitated earlier according to functional and social aspects. This assumption of superiority of ORIF to MMF is however often from surgeon's perspective, not taking into account the patients viewpoint, which is equally a critical element in determining success of surgical treatment. This study will help to fill this gap and also serve to identify patients' expectations and ultimately, enhance evidence-based practice in management of mandibular fractures.

Fifty six patients with mandibular fractures within the tooth bearing areas of the mandible were prospectively studied in a randomized controlled pattern for post-operative Quality of Life (QoL) after ORIF versus MMF. Both groups were analyzed pre-operatively and postoperatively at 1 day, 6 weeks and 8 weeks regarding their QoL using the General Oral Health Assessment Index questionnaire (GOHAI). No significant statistical difference was found between the groups regarding the QoL. The MMF patients were more affected relating to the psychosocial and physical domains whereas the patients managed by ORIF were more affected by the pain domain.

The results demonstrate that while the treatment has no effect on the QoL, it does affect the psychosocial and physical domain. In a case in which both treatments are possible the patients should be enlightened on the advantages and disadvantages of both treatment modalities to guide his choice of treatment.

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