

Pre-surgical management of infants with unilateral and bilateral cleft lip and palate

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Background & Aim: In the 19th century McNeil (prosthodontist) used an oral prosthesis to compare the split alveolar parts and therefore initiating the conception of ultramodern presurgical child orthopedics. More lately (1994) Barry Grayson developed a new fashion that not only it approximates the alveolar parts but it also reshapes the nose in order to perform primary nose surgery, this fashion is called Nasoalveolar molding (NAM). The end of presenting this is to demonstrate the sequence of alveolar and nasal changes following the use of nasoalveolar molding.

Accoutrements and Styles: Cases with nonsyndromic complete unilateral split lip and palate. Nasoalveolar molding was performed for each case and treatment time took 8- 12 weeks. A diurnal of standard basilar view 11 photos were taken for each case. Each case was mugged at the original visit and after the nasoalveolar molding. Digital caliper was used to measure the split size on the study

model at the original visit and after nasoalveolar molding.

Results: Cases expressed good enhancement. The split size was reduced significantly. bettered both the columella divagation and length as well as the nostril range and height in the cleft side.

Conclusion: NAM is an effective procedure in reducing the alveolar split size and it also improves the nasal armature. This will grease the work of the plastic surgeon during the lip adhesion and primary nose surgery and accordingly with better aesthetic out growth.

Biography

Mosleh S Alharbi was graduate in 1994 at King Saud University – Riyadh, 2003 graduate from St. Louis University, USA. Master degree in Orthodontics and fellowship in craniofacial anomalies, Gave lectures in more than 30 international conferences as speaker. Winner of 7 international awards for clinical excellence.

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