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Simultaneous maxillo-mandibular distraction as a single treatment modality for correction of facial deformities presenting with maxillary cant

The aim of this study was to evaluate the outcome of simultaneous maxillomandibular distraction osteogenesis for correction of dentofacial deformities presenting with maxillary cant. This prospective study included 17 patients with facial deformity along with maxillary cant of which 10 had post ankylotic deformities and seven hemifacial microsomia. Informed patient consent was obtained for participation. Simultaneous maxillomandibular distraction was planned based on clinical and radiographic examinations. This involved a horizontal mandibular osteotomy in the ramus and fixation of distractor device, bilateral LeFort I osteotomy and its fixation at the contralateral zygomatic buttress. Distractor was activated after temporary intermaxillary fixation with elastics at a rate of 0.5 mm, twice daily, until the required vertical lengthening was achieved, and was removed after a consolidation period of 8–12 weeks. Additional surgeries were performed later as a second surgery included interposition arthroplasty, genioplasty, augmentation of angle of mandible or contralateral lower border shave, as needed. All patients were followed up for a period of 12–24 months. A marked improvement in the facial asymmetry was noted in all cases. The occlusal cant and facial aesthetics improved satisfactorily. Simultaneous maxillomandibular distraction as a single treatment modality for durable correction of facial deformities presenting with maxillary cant offers good treatment outcome, as it improves facial aesthetics along with correction of the maxillary cant.

Speaker Biography

Dr. Divya Mehrotra has completed her Master of Dental Surgery and she is an AO Fellow, UICC Fellow. Moreover she is an Oral & Maxillofacial Surgeon. She is the Vice Dean of Faculty of Dental Sciences and Additional Controller of examinations at King George's Medical University, India.

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