

COMPLEX TREATMENT OF MANDIBULAR LATEROGNATHISM AND TRANSVERSAL DEFICIENCY WITH LOCKED BUCCAL NON-OCCLUSION - CASE REPORT -

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Aim:

A patient with severe laterognathism and buccal non-occlusion, locked by deep bite, requires different tx-modules beyond standard-procedures.



Material & Methods:

Early or intermediate surgical intervention to adjust the mandible position failed due to insufficient transversal alignment of maxillary and mandibular arches. The patient did not accept standard bite opening. (Nola-Biteplate, ...)



Several tx-modules – such as

- ⇒ debonding upper jaw, fixed and transverse extended splint for bite-opening
- ⇒ lingual arch, welded by a phaser to molar bands, for arch-expansion
- ⇒ bilateral corticotomy, autolog-bone application, RAP in the molar region for faster uprighting
- ⇒ additional micro-osteo-perforation MOP
- ⇒ asymmetric surgical mandibular advancement
- ⇒ orthodontic routine procedures



Results

A main problem to solve this case was the patient's limited compliance and the deep buccal non-occlusion by upper molar overlap. Bands or braces could not be bonded in the left mandibular arch. A fixed upper splint, lingual expansion arch in the mandible and a corticotomy boosted the tx and enabled the surgical mandible advancement.

Conclusion

In some cases there is the need of tx-strategies beyond standard procedures. The implementation of contemporary tools offers a wider range of options in complex tx-demands.