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Correction of post ankylotic facial asymmetry with bimaxillary distraction osteogenesis—Case report

PDF (Size: 694KB) PP. 255-259 DOI: 10.4236/ojst.2012.24045

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ABSTRACT

Facial asymmetry can be acquired or congenital. Patients with facial asymmetry are not always functionally disturbed by the malfunction but are usually very much disturbed by their external appearance. Depending on the degree of asymmetry and deformation, the surgical procedure may vary in complexity and extent. The extent of surgery can range from a genioplasty procedure to bimaxillary osteotomy, concomitant with augmentation surgery, genioplasty and craniofacial implants along with mandibular distraction. In severe cases, the soft tissue structures on the affected side may constitute an incredible resistance to stretching and can make the surgery considerably more difficult and liable to relapse. Here we represent a case of post ankylotic facial asymmetry with occlusal cant which was treated by bimaxillary distraction osteogenesis. Simultaneous mandibular and maxillary distraction corrected the facial asymmetry without disturbing the pre-existing compensated dental occlusion, and so there was no need for prolonged and difficult orthodontic treatment.

KEYWORDS

Facial Asymmetry; Occlusal Cant; Bimaxillary Distraction Osteogenesis

Cite this paper

Pal, U. , Singh, N. , Malkunje, L. , Singh, R. , Gupta, C. and Chand, S. (2012) Correction of post ankylotic facial asymmetry with bimaxillary distraction osteogenesis—Case report. *Open Journal of Stomatology*, 2, 255-259. doi: 10.4236/ojst.2012.24045.

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