

THE TREATMENT OF MANDIBULAR CONDYLE FRACTURES

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Introduction: Mandibular condyle fractures (MCF) in specialists' opinion are some of the most difficult, given the anatomical complexity and complications that may arise. Currently neither the conduct in the election of the optimal conservative or surgical treatment nor many other questions in this section are determined.

The aim of this work is to improve the rehabilitation of patients with mandibular fracture in the region of the articular process by establishing treatment indications and tactics depending on the severity of fracture, terms of patient's presentation and motivation. Research objectives were used to determine the treatment conduct and results of conservative-orthopedic (CO) and surgical treatment in patients subjected to the study.

Material and methods: The study material consisted of a group of 472 patients, 78(16.5%) females and 394(83.4%) males, examined, operated and treated in the Department of Oro-maxillo-facial Surgery of the National Scientific and Practical Center of Emergency Medicine in Chisinau, within years 2001-2010. Patients' age ranged between 16-67 years (34.33 ± 0.576). Of the total number of hospitalized patients, 302 patients (64.0%) underwent CO treatment, 170 patients (36.01%) were subjected to operation for osteosynthesis. For this purpose medical records data were analyzed and synthesized.

Results: The highest incidence of MCF was revealed at the age of 22-27 years (25.8%). Depending on the etiological factor we obtained: aggression-in 123 patients (26.05%), patients who fell at home-73(15.46%), road accidents-27(5.7%). Of the 472 examined patients, 242 had bilateral fractures (51.2%), 192 unilateral fracture (40.6%), 28 triple fractures (5.93%), 3 double fractures (0.63%) and one case of multiple fracture (0.2%). The number of MCF with dislocation was estimated in 232 patients (49.1%), with condylar luxation-12(2.5%), without dislocation-22(48.3%). 396 patients (83.9%) presented in the first three days, within 3-7 days-46 patients (9.74%) and in more than 7 days-30(6.35%) patients.

Motivation of 27 patients to an early rehabilitation in case of insignificant dislocation was considered for the indication to osteosynthesis fixation, as well as refuse of 52 patients to undergo surgical treatment in case of absolute indications for it.

Conclusions: 1. CO treatment provides reposition of the fragments and their maintenance in the right position, only in cases of MCF without dislocation or with an insignificant displacement. 2. Patients rehabilitation and restoration of occlusion relationship in case of MCF with marked dislocation, multi-splinters, old forms, with dislocation, are possible only by surgical treatment. 3. Surgical treatment requires a sufficiently stable fragments' fixation, which allows postoperative immediate removal of the immobilization with early restoration of the mandible function.

Keywords: fracture, mandibular condyle, complications, osteosynthesis.

THIRD MOLAR: ATTITUDE AND CONDUCT

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