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Scientific papers ERCEDDAR part 2

Trabajos científicos ERCEDDAR parte 2

- 9. Intraoral lipoma exeresis under moderate intravenous sedation in the dental office: a case report**
Exerese de lipoma intraoral sob sedação endovenosa moderada em consultório odontológico: relato de caso
Exéresis de lipoma intraoral bajo sedación intravenosa moderada en el consultorio dental: reporte de caso

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The lipoma is a pathological phenomenon presented as a benign tumor mass, of rare occurrence in the oral cavity. Its growth is essentially slow and asymptomatic, but as it gets bigger, problems arise, such as difficulty on chewing, speech, swallowing, dentures stability gets compromised, facial swelling and aesthetic concerns. Depending on its location, patient may also inadvertently bite the tumor causing pain and bleeding. This case is reported as a lipoma in the lower right lip region of considerable size in a patient that avoided the treatment for about ten years because of fear. In a way to make him comfortable with the surgical treatment, midazolam procedural sedation was proposed and employed. It was aimed to report the surgical treatment of a large intraoral lipoma in a phobic patient supported by intravenous sedation in the dental office. With vital signs monitored, venoclysis was kept with glucose 5% infusion, and 7.5 mg of midazolam was titrated, plus 10 mg of dexamethasone for pain and edema control. The right mental nerve was blocked with 1.8 mL of lidocaine 2% with 1:100,000 epinephrine and the lesion was dissected with a monopolar cautery and iris scissor, preserving the ramus of the mental nerve branch. Wound was closed with 3-0 910 polyglatin suture. Vital signs were under acceptable standard

during the whole procedure and the patient was discharged conscious and capable of walking 40 minutes after intravenous sedation induction. Sedation and analgesia through intravenous infusions in the dental office allows safer and more comfortable procedures to be performed even on phobic patients.

Keywords: lipoma, deep sedation, dental anxiety.

- 10. Prevalence of dentigerous cysts: a cross-cutting study**

Prevalência de cistos dentígeros: um estudo de corte transversal

Prevalencia de los quistes dentígeros: un estudio transversal

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The prevalence of odontogenic cysts is of concern, as they grow slowly and asymptotically, and despite their benign biological behavior, if not diagnosed in time and treated properly, they can reach a considerable size. This study aims to carry out an observational, epidemiological and retrospective assessment, characterized by the analysis of histopathological reports, with laboratory diagnosis of dentigerous cyst, issued by the Pathology Laboratory of the São Leopoldo Mandic Faculty of Medicine and Dentistry, Campinas, São Paulo, BRA, from January 2010 to March 2021. The target population of this study consisted of patients who had a diagnosis of dentigerous cyst in the histopathological report. For each report, demographic data such as gender and age, affected area and radiographic aspect were evaluated. To collect these data, the histopathological reports issued by the Pathology Laboratory of the São Leopoldo Mandic School of Medicine and Dentistry,

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Campinas, São Paulo, BRA, from January 2010 to March 2021 were used. A total of 2,202 medical records with diagnosis of cysts in the maxillomandibular region were evaluated, and 1985 (90.1%) were classified as odontogenic cysts. The dentigerous cysts, 320 in total, corresponded to 16.1% of the odontogenic cysts. The peak of prevalence of dentigerous cysts occurred in the first and second decade of life. The frequency of gender in the total number of cases of dentigerous cysts was relatively higher for males (61.3%). The mandible was the most affected site (67.2%). Radiographically, we can observe, in this study, that the proportion of radiolucent lesions (83.8%) was much higher than those classified as radiopaque or mixed. A dentigerous cyst is a lesion commonly found in dental practice. The results reinforce the previous findings that it is a very common mandibular cyst with a male predilection, preference for the second decade of life.

Keywords: dentigerous cysts, mandibular disease, odontogenic cysts.

11. Surgical treatment of multicystic ameloblastoma – case report

Tratamento cirúrgico do ameloblastoma multicístico - relato de caso

Tratamiento quirúrgico del ameloblastoma multiquistico - reporte de caso

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The multicystic ameloblastoma is characterized by an odontogenic tumor, with the highest frequency in melanodermas, males who are between the fourth and fifth decade of life and with mandibular predilection. Characterized by having a localized growth, symptomless and detected by imaging studies. **Case report:** patient L.G.V.S, 49 years old, male, melanoderma, attended at a private dental practice complaining about darkened lower tooth after sporting accident, upon oroscopy presence of consistent edema stiffened in the region of teeth 32 to 43, following imaginologic study verified radiotransparent multiocular image involving region of teeth 33 to 45, was performed incisional biopsy and the result of the histopathological analysis were multicystic ameloblastoma. Opted as treatment the surgical resection along with bone reconstruction and subsequent rehabilitation with osseointegrated implants, procedures performed in three surgical acts, the first of excision of injury and xenogenous graft reconstruction, the second for placement of implants and the third with reopening surgery. Monitoring of the case for three years after the first surgery and with complete rehabilitation. **Discussion:** the multicystic ameloblastomas have high levels of recurrence, more aggressive when measured to the solid ameloblastomas, the preconized is the complete removal with free bony margins, even with possible mutilation; which provide a great rehabilitator challenge, which in turn are made facilitated by the modern devices for bone reconstruction and rehabilitation with dental implantation. **Conclusion:** the accurate diagnosis is the way for a correct treatment, guiding the therapeutic and rehabilitating behavior.

Keywords: multicystic ameloblastomas, surgical procedures, mouth neoplasms.

12. Discopexy: an alternative in the treatment of internal TMJ disorders

Discopexia: uma alternativa no tratamento das disfunções da ATM

Discopexia: una alternativa en el tratamiento de los trastornos internos de la ATM

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Pain related to the temporomandibular joint (TMJ) has been increasingly reported in the population. Displacement of the articular disc is a common internal derangement, which although successfully treated through conservative methods, there are cases in which non-surgical therapy fails, and repositioning of the articular disc (discopexy) is indicated. **Objectives:** to present a literature review on the use of discopexy as a surgical alternative in the treatment of internal TMJ disorders. **Material and methods:** a bibliographic survey was carried out in the SciELO, LILACS and PubMed databases of articles published between 2001 and 2021, using the descriptors: TMJ, maxillofacial surgery, discopexy and their correspondents in Portuguese. **Results:** internal TMJ disorders have been reported in 10% to 47% of the population, with anterior disc displacement without reduction being the most common entity. Trauma was the most reported etiological factor, associated with chronic muscle hyperactivity and orthopedic instability. Discopexy with the use of mini anchors has shown long-term stability and good results for the repositioning of the temporomandibular disc, resulting in an increase in mouth movement amplitude, a significant reduction in joint pain and an improvement in quality of life. **Conclusions:** pain relief, long-term stability, and maintenance of disc position were the main reported objectives of discopexy. The success of the technique is closely related to correct patient selection, intraoperative evaluation, and appropriate post-surgical management. Discopexy is an effective treatment, however long-term follow-up is necessary.

Keywords: TMJ, maxillofacial surgery, discopexy.

13. Lower alveolar nerve lateralization - conservative technique with the aid of piezo electric

Lateralização de nervo alveolar inferior - técnica conservadora com auxílio do piezo elétrico

Lateralización del nervio alveolar inferior - técnica conservadora con ayuda piezoeléctrica

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The main goal of this relatory was to demonstrate a conservative surgery of implants on the mandible and simultaneous repositioning of the inferior alveolar nerve (IAN) with aid of

a piezoelectric. **Case report:** patient D.C.D.S, 41 years old, female, leucoderma, attended at a HMAB clinic with a history of numerous losses of implantation in mandibular area, upon oroscopy presence of bilateral bone mandibular resorption, upon tomography was observed superficialization of mandibular canal and big cortical area on alveolar ridge. Suggested treatment was lateralization of the inferior alveolar nerve conservative technique with simultaneous implantation and bone grafting. **Discussion:** the rehabilitation of implants is used in a growing number of partially edentulous. In most of those patients, the standard method can be used for placement of implants with satisfying results. Nevertheless, with the rise of alveolar resorption, the modifications of the default method shall be applied. Bone grafting, osteogenesis distraction, the use of shorter implants and lateralization of the inferior alveolar nerve (IAN) are some of the techniques used to attend to the lack of bone height. The clinical report portrayed offers certain alternative suggestions to overcome the difficulties and limitations related to the prosthetic rehabilitation of critically reabsorbed patients in posterior mandibles. The osteotomy was conducted using piezoelectric surgery. The last studies feature the piezoelectric as workable on corticotomies, since it promotes minor osteotomies and preservation of the neurovascular system. There were no neurosensorial complaints in the immediate postoperative period. **Conclusion:** the IAN lateralization is a viable technique for the functional rehabilitations of the posterior region of the mandible, however the surgical procedures demand delicacy in order to decrease the risks of neurosensorial changes.

Keywords: nerve lateralization, piezosurgery, mandibular nerve.

14. Fractures NOE: a review of the literature

Fraturas NOE: uma revisão da literatura

Fracturas NOE: una revisión de la literatura

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The naso-orbito-ethmoidal complex has an intricate and complex anatomy, which makes fractures in this region a great challenge for every surgeon, as they involve delicate anatomical structures, such as the upper and middle centers of the face. This type of fracture is usually the result of auto and motorcycle collisions (44 to 85%), with the majority of patients affected being young men (66 to 91%), they can occur alone or in association with other fractures of the middle third of the face (60%). The diagnosis and

classification of these type of fracture must be based on clinical examination and imaging evaluation; due to its proximity to structures of the cranial cavity, the approach of choice should be used only after the patient is stabilized. The main objective of this review is to demonstrate the advantages and disadvantages, as well as the indications of the available techniques of access, fixation, stabilization and/or reconstruction of the trauma region, since effective and early intervention reduces postoperative sequelae. Currently, there are different approaches available for accessing and treating these fractures, according to their extent and location; concluding that the choice of technique is up to each surgeon, which makes the study and evaluation of each one essential for the daily life of the oral and maxillofacial surgeon.

Keywords: fractures, naso-orbito-ethmoidal, surgery.

15. Oral and maxillofacial infections: literature review and case report

Infecções bucais e maxilofaciais: revisão da literatura e relato de caso

Infecciones orales y maxilofaciales: revisión de la literatura y reporte de caso

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Maxillofacial infections are common incidents that can range from localized and low-intensity to severe clinical conditions, characterized by the rapid evolution of the infectious process to adjacent tissues and fascial spaces of the head and neck, which can result in different complications, even death. Cause is usually odontogenic. The objective of this work is to review literature, anatomy, microbiology, causes, clinical characteristics, diagnosis and treatment efficacy, using PubMed as a research basis. Also to report of a clinical case admitted with maxillofacial infection in the Oral Maxillofacial Surgery and Traumatology Service of Ceddar, at the Hospital da Santa Casa de Valinhos, after third molar extraction, with involvement of buccal space and masticator, drainage procedure in the center surgical under general anesthesia with cervical access, the patient JSQD, 27 years old, female. The correct diagnosis is essential for the establishment of therapy as soon as possible, therefore, initial empirical antibiotic therapy should be established until the culture and antibiogram get ready.

Keywords: infections, microbial sensitivity tests, antibiotic therapy.