Abstract

Background: Dental-related anxiety and fear have long been an issue, and it keep millions of people away from the dental office every year. Despite the advances in pain control that has expanded our abilities to perform a wide range of dental treatment in a pain-free environment, many adult dental patients still have a great deal of fear about treatment evoked pain. For them, local anesthesia is not enough because while it numbs the pain, it does nothing to minimize the fear and other psychological factors. For this group of individuals, discussions concerning conscious sedation and perhaps general anesthesia appear reasonable when making treatment plans. The provision of adequate anxiety control is an integral part of the practice of dentistry. All patients deserve appropriate anxiety control for any dental procedure. As patient awareness of the risk of anaesthesia and the availability of sedation have increased, so the popularity of conscious sedation for dentistry has increased. It is important to recognize that there is no "one size fits all" sedation technique and no single technique will be successful for all patients. Intravenous sedation is more potent and quicker-acting than inhalation or oral sedation and is particularly effective for very anxious or phobic dental patients and for difficult surgical procedures.

This presentation is about the conscious sedation techniques that we have been following in our department. The presentation will also share our experiences with management of anxious dental patients under conscious sedation.

Keywords: Anaesthesia, Anxiety, Conscious Sedation.

Local flaps for functional and esthetic reconstruction of Oro-facial defects - A case series

Regmi P[1], Upadhyaya C[2], Chaurasia N[3], Dulal S[4], Shakya M[5], Rauniyar D[6]

Oral and Maxillofacial surgery, Kathmandu University School Of Medical Sciences.

Corresponding Address:

Dr. Pratibha Regmi
Designation: First year Post Graduate Resident, Department of Oral and Maxillofacial Surgery (KUSMS)
pratibharegmi8@gmail.com

9847702098/9818314522
Affiliated hospital: Dhulikhel Hospital (Kathmandu University School of Medical Sciences)

Abstract

Background: Management of varied pathologic, traumatic and congenital lesions of oral and maxillofacial region demands resection in partial or total along with surrounding structures producing defects of varying sizes. Arguably, the greatest challenge within oral and maxillofacial surgery is reconstruction following major trauma or oncologic ablative surgery that restores pre- morbid quality of life. Even small facial defects can lead to cosmetic deformity and impacts significantly on patient's psychological well-being if not reconstructed properly. Owing to the aesthetics and functional concern, oral and maxillofacial soft tissue reconstruction requires meticulous planning with team approach. And is a technically demanding and time-consuming process because of the specialized functions of the tissues involved.

Among various reconstructive options, local flaps being located within the vicinity of the defect carry advantage of close resemblance to the missing skin in color and texture and the thickness can often be tailored to the needs of the defect. These local flaps can be advanced, transposed or rotated into position to reconstruct the defect. As these flaps heal, regaining of blood flow and cutaneous sensibility increases.

Aim of this paper is to share an institutional based case series in using various local flaps for the reconstruction of oral and maxillofacial defects.

Key Words: Local flaps, Maxillofacial, Reconstruction

Incidence and pattern of multiple mandibular fracture: How uncommon are they?- A retrospective study.

Dr Niroj Khanal, Dr Mehul Rajesh Jaisani, Dr Ashok Dongol, Dr Pradeep Acharya, Dr Anjani Kumar Yadav

Department of Oral and Maxillofacial Surgery, B.P. Koirala Institute of Health Sciences, Dharan, Nepal

Corresponding Address:

Dr Niroj Khanal, Junior Resident
9822980152
nkkhanal 99@gmail.com

Abstract

Objective: The objective of the study was to find out the incidence and pattern of multiple mandibular fractures among patients reporting to B.P. Koirala Institute of Health Sciences (BPKIHS), Dharan, Nepal.

Material and Methods: Data of patients who reported with mandibular fracture at BPKIHS from January 2021 to December 2022 were retrieved from the medical records. Incompletely filled and missing records were excluded. Pathological fractures were also excluded. Demographic variables, etiology for injury, and site of mandibular fractures were tabulated into Microsoft Excel sheet (2018) and analyzed.

Results: The age of the patients ranged from 14 to 41 years with mean age of 25±5.5 years. Majority of patients were male (78%). Most of the injuries resulted from road traffic accident (64%). Other causes of injuries were physical assault (20%), and fall injuries (14%). Out of all reported cases 68% had multiple mandibular fracture. The injuries reported were fractures of parasymphysis together with fracture of angle (24%), among which 84% had from contralateral fractures whereas 16 % had ipsilateral fractures. Bilateral parasymphysis fracture was 12%, symphysis fracture together with bilateral condylar fracture was 14.7%. In patients with multiple fractures, 53 %