

Place of the chondro-costal graft in the management of asymmetries of the lower third of the face

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Abstract:

The posterior vertical dimension of the face, corresponding to the heights of the mandibular condyle and ramus added together, contributes to the symmetry of the lower third of the face. It may be impaired in two major pathological settings: temporomandibular ankylosis in its infantile form, and congenital hypocondyly or brachyramia.

Chondro-costal grafting is a recognized surgical technique, used on the one hand to restore the function of the temporomandibular joint by recreating a neo-condyle and, on the other hand, to restore the mandibular height depending on the size of the graft chosen. The main advantage of this technique is that it provides a growth potential for a hypotrophic or damaged joint, thus giving exceptional results in children.

This technique presents few intra- and post-operative complications. It allows a stable correction of the symmetry of the lower third of the face on the architectural and aesthetic

levels, by correcting the deviation of the chin and the inclination of the labial bi-commissural line. The functional results are satisfactory with an increase in mouth opening to more than 25 mm in the long term in cases of temporomandibular ankylosis. The main disadvantage of the chondro-costal graft is the unpredictable growth of the graft in children.