



Complete rehabilitations of cleft lip and palate: The Nantes experience

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Abstract :

Complete rehabilitation of the maxilla in patients with cleft sequelae often raises the issue of bone volumes. Defects are often mixed, combining anterior atrophy directly related to the cleft and posterior atrophy related to edentulism or infectious lesions.

The technical complexity of bone reconstruction is an obstacle that is often doubled by the patient's psychological reluctance. This procedure is added to the previous ones and sometimes limits the patient's acceptance.

The advent of "graftless" techniques has made it possible to simplify surgical protocols with immediate loading, which often leads to patient acceptance.

In our practice, we have random situations where we have performed bone grafts followed by implants, implants without bone grafts, or zygomatic implants.

The authors will detail the surgical indications, the implant and prosthetic choices, and the complications encountered.