

Mandible: Not a Royal Feast Nor A Dog's Bone

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Oral cavity is the surgical home of oral & maxillofacial surgeon. Mandible is the most prominent and integral bone in the facial skeleton and contributes to the esthetics of lower half of the face. Any deformity of the mandible or the dentition it holds, causes a significant change in its facial harmony. Ablative surgeries of mandible secondary to neoplasms and infections and post-traumatic defects needs a proper planning to maintain/bring back the facial macro and micro architecture. It's a great surgical challenge for maxillofacial reconstructive surgeon to bring the normal anatomical contour of the maxillofacial skeleton and improve the psychosocial wellbeing of the patient in the society. The current scenario has been changed. Mandible is being shared by other specialist surgeons like otolaryngologists, plastic and general surgeons. It has become like a dog's bone or rather a royal feast which other specialists want to share it and are indeed fighting for it. The basic principles to establish a functional occlusion by rehabilitation of a mandible is most important and often overlooked by other specialists because of less knowledge about it and an urge to earn more cash. Having a medical degree just doesn't mean they are eligible to encroach the area of maxillofacial skeleton.

Oral & maxillofacial surgeons are the legal authorized surgeons to keep hands on mandible because of their expertise in dealing with basic principles of reconstruction of facial skeleton. Little the other medical specialists know about the occlusion which is the basic criteria to be satisfied

while reconstructing middle and lower third of facial skeleton. There are a few medical specialists who treat mandibular fractures without establishing a proper occlusion which causes other acquired deformities like temporomandibular joint problems. I have seen most of the cases which they treat either go for malunion or the fixation plates get infected, they even fail to restore the anatomical bony contour of the mandible and the cost of the surgical procedure is also high for the quality of the treatment they offer to the patient. By this article I want to request the other respected medical fellow specialists to stop playing with the mandible as it is the key structure in performing the most important functions of the facial skeleton, no more a dog's bone nor a royal feast and any compromise in its management will eventually reflect the personality of the patient both physically and psychologically.

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