



Figure 18. Restored cranial contours.

neural tissues (Figure 18). More recently, a new digital tomography technique has been used to assess the size and outline of the bony defect accurately.⁹ A die is formed from this computerized outline which gives an accurate base on which to form the titanium plate in the prosthetic laboratory. The cranioplasty service has for decades allowed many patients with both traumatic and pathological defects to assume a normal lifestyle.

Conclusion

Cancer of the orofacial region is relatively common and, if diagnosed early, patients should have a good outcome. For successful rehabilitation of the patient it is necessary to adhere to the following key principles:

- Surgical maxillofacial management requires a skilled and experienced team.
- Intimate understanding and co-operation between the team members.
- Painstaking review and follow-up.

Abstract

IS THE MAXILLARY SINUS REALLY SUCH A PROBLEM IN IMPLANT THERAPY?

Effect of Atraumatic Intrusion of Implant into the Maxillary Sinus. Gadala AS, Hassan K, Ishak M. *Egypt J Oral Maxillofac Surg* 2011; **2**: 8–16.

Although this paper appears at first to be only of interest to practitioners actively involved in the prescription and placement of dental implants, it is important that the procedures and results presented are understood by all clinicians as these may influence the decision as to whether patients could

be referred for specialist treatment.

The placement of implants in the posterior maxillary region, with limited amounts of bone and atrophied ridges, has always been seen as a difficult procedure that may require further surgical procedures, such as sinus elevation and sub-antral augmentation techniques. Clinicians have tended either to avoid these procedures or regard this as a distinct contra-indication to treatment.

This paper presents two groups of seven patients in whom implants of the same size and diameter were placed but which were extended either 2 mm or 4 mm beyond the sinus floor. The authors

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followed an accepted clinical assessment and treatment protocol, which is described in the paper. One-year review with digital orthopantomograms and dental computed tomography showed a satisfactory outcome in all cases with non-significant complications.

The study proved that sinus-protruding implants could be used as a less complicated procedure compared with other surgical options, the procedure being less time-consuming and economically more acceptable with good functional stability and fair loading.

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