

Temporomandibular Joint Ankylosis: Algorithm of Treatment

Por: [Farina, R](#) (Farina, Rodrigo)^[1,2]; [Canto, L](#) (Canto, Loreto)^[3]; [Gunckel, R](#) (Gunckel, Renato)^[3]; [Alister, JP](#) (Alister, Juan Pablo)^[4,5]; [Uribe, F](#) (Uribe, Francisca)^[4,5]

JOURNAL OF CRANIOFACIAL SURGERY

Volumen: 29

Número: 2

Páginas: 427-431

DOI: 10.1097/SCS.0000000000004134

Fecha de publicación: MAR 2018

Tipo de documento: Article

[Ver impacto de la revista](#)

Resumen

Temporomandibular joint ankylosis, according to age of onset, causes severe functional and morphological disorders, as well as stunted craniofacial growth and development. The primary goal of treatment is to resolve the functional and morphological disorders. Method: Pre- and posttreatment clinical and cephalometric registries were conducted in 15 patients with temporomandibular joint ankylosis over a 10-year period (2002-2012). All the patients underwent complete removal of the ankylotic block, gap arthroplasty, and ipsilateral coronoidectomy. Distraction osteogenesis was performed on 12 patients. Results: Fifteen patients, 8 female and 7 male, ranging from 3 to 30 years of age, were included in this study. The posttreatment follow-up period ranged from 3 to 13 years. The mean preoperative maximum mouth opening was 31.7mm, and the mean postoperative maximum mouth opening was 36.5mm. The labial inclination with respect to the true horizontal decreased considerably (6.2 degrees +/- 2.3 degrees preoperative to 1 degrees +/- 1.6 degrees postoperative). A correction of the mandibular deviation was measured at the symphysis with respect to the facial midline (8 degrees +/- 2 degrees preoperative to 2 degrees postoperative). Finally, the height ratio of both mandibular rami (the healthy side and the affected side) decreased considerably (1.27 +/- 0.05 preoperative to 1.07 +/- 0.06 postoperative). Reankylosis only occurred in 2 patients, who were then successfully treated by means of gap arthroplasty. Conclusions: The therapeutic algorithm proposed in the present work provides favorable functional and morphological results. Early and aggressive functional physiotherapy is essential to minimize the risk of reankylosis.

Palabras clave

Palabras clave de autor: [Ankylosis](#); [distraction osteogenesis](#); [gap arthroplasty](#); [mandibular distraction](#); [temporomandibular joint](#); [temporomandibular joint ankylosis](#); [TMJ](#)

KeyWords Plus:[COSTOCHONDRAL GRAFT](#); [STERNOCLAVICULAR GRAFTS](#); [MANAGEMENT](#); [RECONSTRUCTION](#); [DISTRACTION](#); [PROTOCOL](#); [CHILDREN](#); [GROWTH](#)

Información del autor

Dirección para petición de copias: Farina, R (autor para petición de copias)

+ Hosp Salvador, Providencia 2330, Appt 23, Santiago, Chile.

Direcciones:

+ [1] Hosp Salvador, Serv Oral & Maxillofacial Surg, Santiago, Chile

+ [2] Univ Chile, Santiago, Chile

+ [3] Univ Chile, Dept Oral & Maxillofacial Surg, Santiago, Chile

+ [4] Univ La Frontera, Dept Oral & Maxillofacial Surg, Temuco, Chile

+ [5] Univ La Frontera, Med Sci, Fac Med, Temuco, Chile

Direcciones de correo electrónico:rofari@gmail.com

Editorial

LIPPINCOTT WILLIAMS & WILKINS, TWO COMMERCE SQ, 2001 MARKET ST,
PHILADELPHIA, PA 19103 USA

Información de la revista

- **Impact Factor:** [Journal Citation Reports](#)

Categorías / Clasificación

Áreas de investigación:Surgery

Categorías de Web of Science:Surgery

Información del documento

Idioma:English

Número de acceso: **WOS:000427989400074**

ID de PubMed: 29509170

ISSN: 1049-2275

eISSN: 1536-3732