



Background

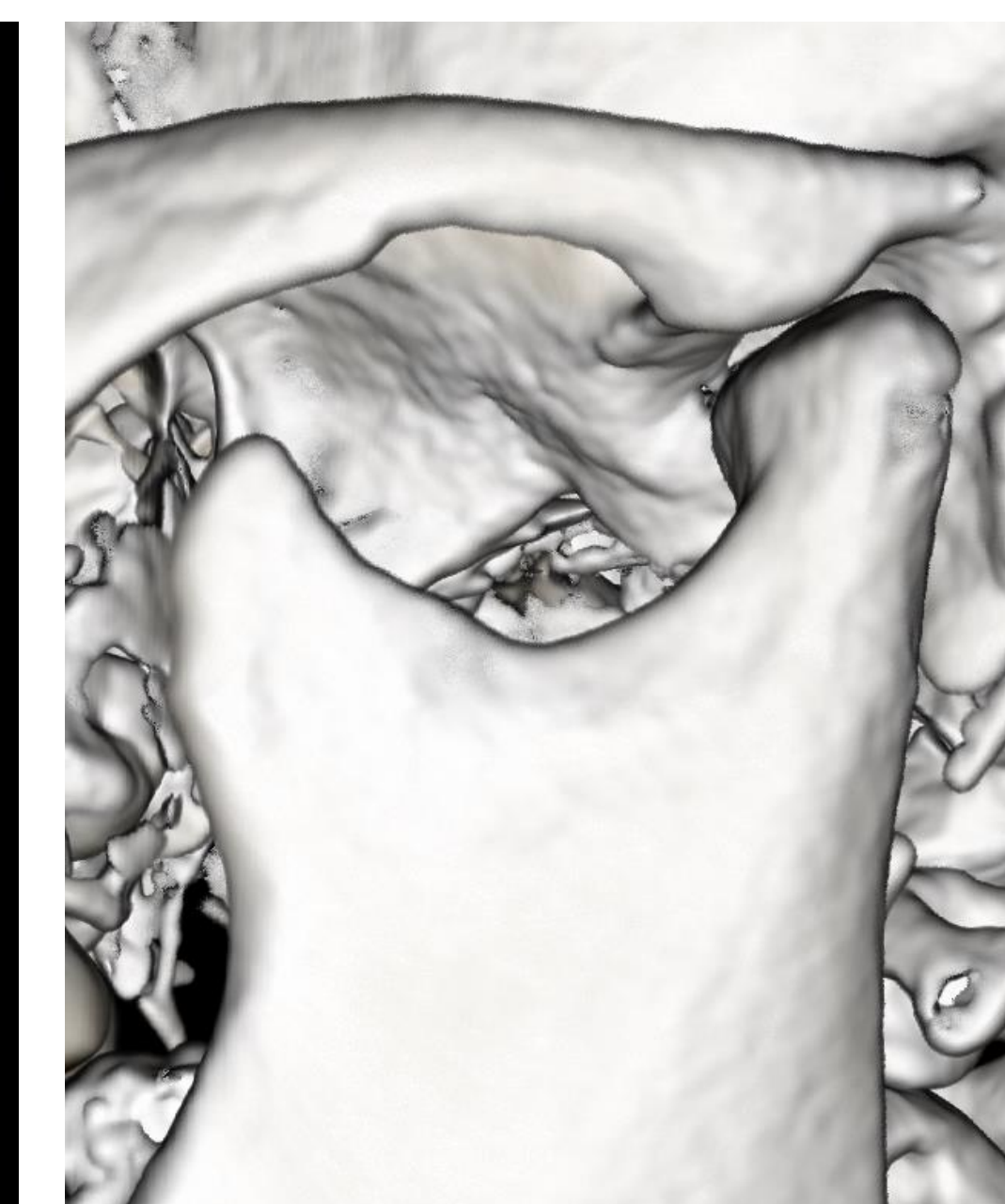
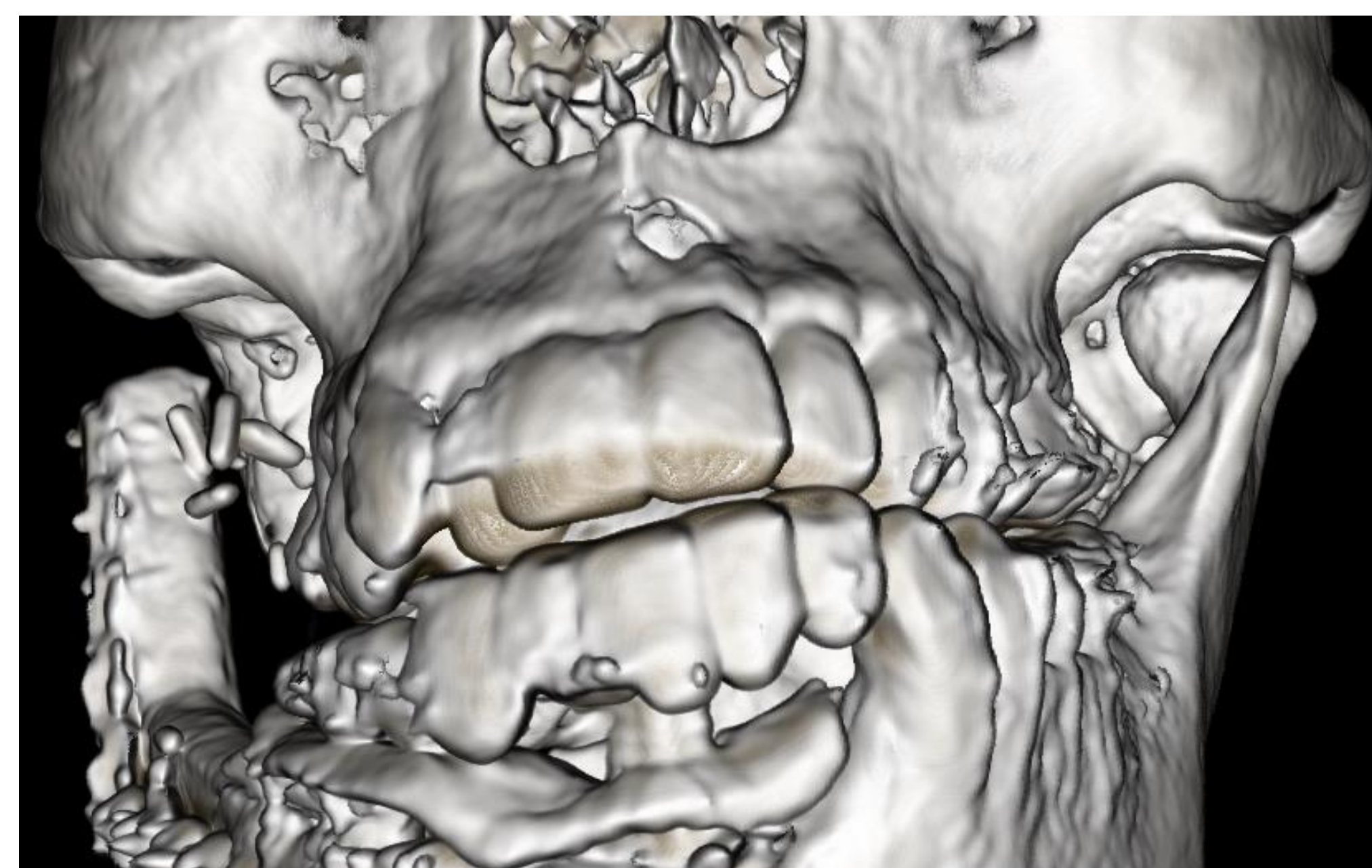
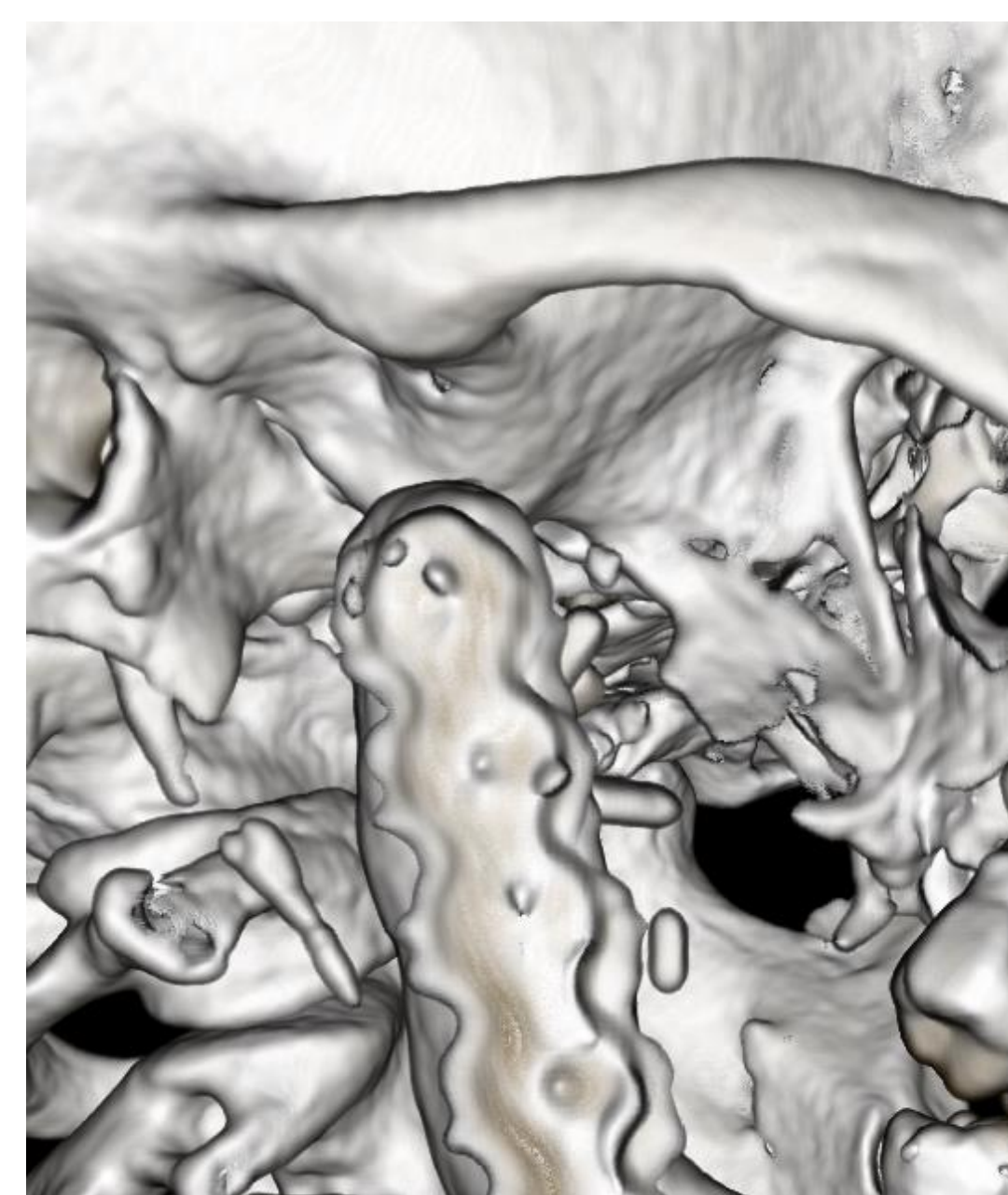
Condylar dislocation can lead to multiple complications in cases in need of mandibular and/or condylar reconstruction with free fibula flap. This case report highlights the importance of pre-surgical planning and early intervention in case of condylar dislocation to prevent further complications.

Clinical Case

A 24 year old Hispanic female presented to prosthodontics post graduate clinic with chief complaint of “my bite is wrong on my left side, my lower teeth cross over my top teeth and it was not like this before my surgery”

Patient was diagnosed with ameloblastoma and underwent hemimandibulectomy of the right side of her mandible, followed by a fibula free flap for immediate reconstruction.

Upon clinical examination, patient had 5mm deviation to the contralateral side, causing left side cross bite. Based on panoramic radiograph, right side reconstructed condyle was dislocated out of condylar fossa. Patient had received four dental implants at the time of the mandibular reconstruction



Based on records, it was found that maxillo-mandibular fixation was performed in cross bite as ideal jaw relationship could not be achieved. In addition, implants were placed without considering final tooth position and the quality of peri-implant tissue was neglected.

CONCLUSIONS

The present case highlights the importance of comprehensive planning prior to surgical intervention. Having a prosthetic plan prior to mandibular resection can improve the mandibulo-maxillary fixation which may reduce the risk of TMJ complications following reconstructions and enhance the outcome of the surgery by placing the implants on a prosthetically driven location. In addition, the quality of soft tissue need to be considered when planning for implant placement in these cases.