

Use of Virtual Surgical Planning for the Treatment of Bilateral Mandibular Fractures: A Clinical Report

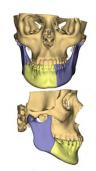
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BACKGROUND

In recent years, virtual surgical planning (VSP) has been employed by craniomaxillofacial surgeons to assist with planning and executing a multitude of surgical procedures. Custom 3D-printed cutting guides and plates designed using VSP reduce operative length and produce predictable aesthetic outcomes. Despite this, the use of VSP for facial trauma is poorly represented in the literature. Herein, we detail the use of VSP to assist with surgical correction of bilateral mandibular fractures.



Surgical Plan: Preoperative Position

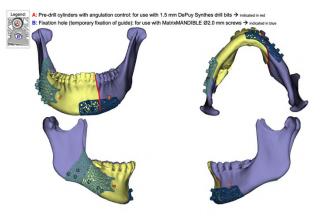




Surgical Plan: Mandible Reconstruction

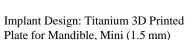
METHODS

Upon literature review, only 3 articles were identified detailing the use of VSP for treatment of mandibular fractures. All articles detailed management of parasymphyseal fractures in elderly, edentulous patients. NSQIP data was collected to compare the operative length of the surgical procedure using VSP to the operative length of conventional surgery.



Guide Design: Titanium 3D Printed Guide for Mandible







Pre-operative radiographs







Implant Design: Titanium 3D Printed Plate for Mandible (screw angulation)

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RESULTS

Our patient presented to our team with bilateral facial pain and fractured teeth after falling from her bike two days prior to presentation. A decision was made to perform open repair of the mandibular fractures and to place osseointegrated dental implants following extraction of the fractured dentition in a single surgery. VSP was performed using images generated by cone-beam computed tomography to create custom orthognathic splints, cutting guides, and titanium plates for the procedure. The patient's procedure was completed in under two hours without immediate complications. Postoperatively, the patient demonstrated normal occlusion along with aesthetic outcomes. Treatment of bilateral mandibular fractures along with placement of osseointegrated dental implants was performed quicker than the median operative length of patients undergoing conventional surgical repair of bilateral mandibular fractures (137 minutes).

CONCLUSION

The use of VSP for treatment of mandibular fractures exhibits significant potential; however, cost analysis studies are needed to determine whether the cost reduction resulting from decreased operative length is greater than the costs associated with using VSP.