Bölüm
108

VELOFARENGEAL YETMEZLİK

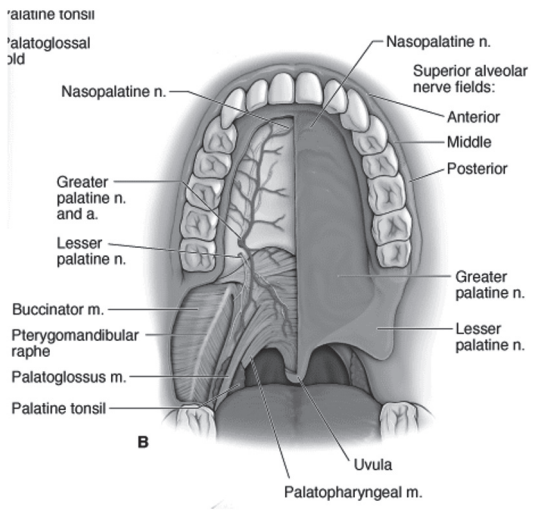
Cem ERDURAK[1]

[1]

DAMAK ANATOMİSİ

Damağın anatomik olarak 2/3 ön kısmı sert damak , 1/3 arka kısmı kas ve mukoza olan yumuşak damak olarak adlandırılır. Sert damak önde maksillanın prosesus palatinusu , arkada palatin kemiğin horizontal laminası tarafından oluşmuştur. (1,2)

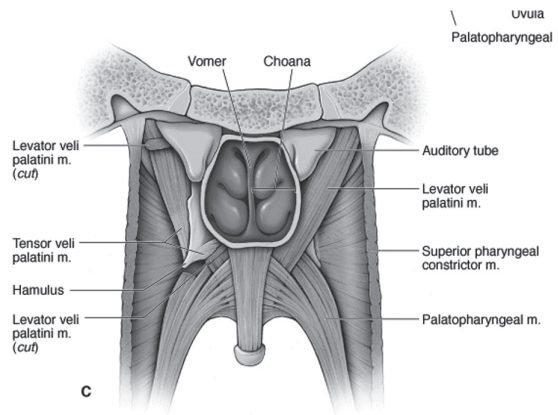
Sert damak mukoza ile örtülüdür ve A.palatina majör tarafından beslenir



Resim 1. damak anatomisi (www.digitalworldmedicalschool.net den alınmıştır)

Yumuşak damak kasları,

- m.levatör veli palatini
- m.tensor veli palatini
- m.uvula, m.palatoglossus
- m.palatofaringeus
- m.konstriktör faringeus süperior



Resim 2: damak kasları (www.digitalworldmedicalschool.net den alınmıştır)

Muskulus levatör veli palatini; Karotid kanalın inferiorunda temporal kemikten başlar, östaki tüpü boyunca ilerleyerek damağa girer. Pleksus faringeustan motor sinirini alır. Kasıldığı zaman yumuşak damağı yukarıya kaldırır ve damağı farenks arka duvarına duvara doğru çeker. Lateral farengeal duvarın hareketlerine de katkı sağlar. (3,4)

[1] Dr. Öğrt görevlisi İstanbul Aydın Üniversitesi Tıp Fakültesi KBB Anabilim Dalı cerdurak@yahoo.com

ortodontist gözetiminde takip önerilir. Gerekli düzeltmeler plastik cerrahi ve ortodonti ile multidispliner olarak planlanır. (29,30)

Dudak damak yarıklarında tanı ve tedavi süreci multidispliner gittiği sürece tedavisi yüz güldürücüdür ve kozmetik olarak çok iyi sonuçlar alınmaktadır.

SONUÇ

Velofaringeal yetmezlik ve yarık damak dudak ile ilgili farkındalık giderek artmakta olup KBB hekimlerinin bu konular ile daha çok ilgilenmesi multi disipliner yaklaşım gerektiren bu hastalıkların tedavisinin yaygınlaşmasını sağlayacaktır.

Anahtar kelime: velofaringeal yetmezlik, yarık damak, yarık dudak

KAYNAKÇA

1. Erk Y, Özgür F. Dudak ve damak yarıkları. Ankara: İşkur Matbaacılık; 1999.
2. Murray JC. Gene/environment causes of cleft lip and/or palate. Clin Genet. 2002;61:248-56.
3. Norgård B, Puho E, Czeizel AE, Skriver MV, Sorensen HT. Aspirin use during early pregnancy and the risk of congenital abnormalities: a population-based case-control study. Am J Obstet Gynecol. 2005;192:922-3.
4. Daly S, Mills JL, Molloy AM, et al. Minimum effective dose of folic acid for food fortification to prevent neural-tube defects. Lancet. 1997;350:1666-9.
5. Cobourne MT. The complex genetics of cleft lip and palate. Eur J Orthod. 2004;26:7-16.
6. 1O'Neill J. Do folic acid supplements reduce facial clefts? Evid Based Dent. 2008;9:82-3.
7. 1Wyszynski DF, Beaty TH, Maestri NE. Genetics of nonsyndromic oral clefts revisited. Cleft Palate Craniofac J. 1996;33:406-17. Review.
8. Johnston, MC, Bronsky, PT, Millicovsky, G. Embryogenesis of Cleft Lip and Palate. In: McCarthy JG, ed. Plastic Surgery. Philadelphia, Saunders Company; 1990:2515-22.
9. Randal P, LaRossa D. Cleft palate.In McCarthy JG. Plastik Surgery. 8th ed, Philadelphia: Saunders Co., 1990; 2723-2752.
10. Kesiktaş E. Velofaringeal yetmezlikte nazal endoskopik ve videoskopik inceleme. Uzmanlık tezi, Çukurova Üniversitesi, Adana, 1998.
11. Johns DF, Rohrich RJ, Awada M. Velopharyngeal incompetence: A guide for clinical evoluation. Plast Reconstr Surg, 2003;112(7): 1890-1897.
12. Armour A, Fischback S, Klaiman P, Fisher DM. Does velopharyngeal closure pattern affect the success of pharyngeal flap pharyngoplasty?. Plast Reconstr Surg, 2005; 115(1): 45-52.
13. Kummer AW. Velopharyngeal dysfunction: current thinking on the cause, effect, assessment and treatment. Curr Opin Otolaryngol Head Neck Surg , 2002; 10: 455-459.
14. Satoh K, Wada T, Tachimura T, Shiba R. The effect of growth nasopharyngeal structures in velopharyngeal closure in patients with repaired cleft palate and controls without clefts: acephalometric study. British Journal of Oral and Maxillofacial Surgery, 2002; 40: 105-109.
15. Yorkston KM, Beukelman DR, HonsingerMJ. Perceived articulatory adeguacy and velopharyngeal function in dysarthric speakers. Arch Phys Med Rehabil, 1989; 70: 313-317.
16. Chen PK, Wu JTH, Chen Y, Noordhoff MS. Correction of secondary velopharyngeal insufficiency in cleft palate patients with the Furlow palatoplasty. Plast Reconstr Surg, 1994; 94 (7): 933-941.
17. Kunkel M, Wahlmann U, Wagner W. Objective, noninvasive evaluation of velopharyngeal function in cleft and noncleft patients. Cleft Palate-Craniofacial Journal, 1997; 35(1): 35-39.
18. Croft CB, Sprintzen RJ, Rakoff SJ, Bronx. Patterns of velopharyngeal valving in normal and cleft palate subjects: a multi-view videofluoroscopic and nasendoscopic study. Laryngoscope, 1981;91: 265-271.
19. Finkelstein Y, Lerner MA, Ophir D, Nachmani A, Hauben DJ , Zohar Y. Nasopharyngeal profile and velopharyngeal valve mechanism. Plast Reconstr Surg, 1993; 92(4): 603-614.
20. Finkelstein Y, Talmi YP, Nachmani A, Hauben DJ, Zohar Y. On the variability of velopharyngeal valve anatomy and function: a combined peroral and nasendoscopic study. PlastReconstr Surg, 1992; 89(4): 631-639.
21. Karnell MP, Linville RN, Edwards BA. Variations in velar position over time : a nasal videoendoscopic study. Journal of Speech and Hearing Research, 1988; 31(3): 417-424.36
22. Siegel-Sadewitz VL, Shprintzen RJ. Changes in velopharyngeal valving with age. International Journal of Pediatric Otorhinolaryngology, 1986; 11: 171-182.
23. David D, Bagnall AD. Velopharyngeal incompetence. In McCarthy. Plastic Surgery. 8th Ed,Philadelphia: Saunders Co, 1990; 2903-2921.
24. Hill JS. Velopharyngeal insufficiency: an update on diagnostic and surgical technigues. CurrOpin Otolaryngol Head Neck Surg, 2001; 9: 365-368.
25. Seagle MB, Mazaheri MK, Dixon-Wood VL, Williams WN. Evaluation and treatment of velopharyngeal insufficiency: The University of Florida experience. Ann Plast Surg, 2002; 48(5):464-470.
26. Witt PD, Antonio LL. Velopharyngeal insufficiency and secondary palatal management. ClinicsPlast Surg, 1993; 20: 707-721.
27. Carls FR, Jackson IT, Topf JS. Distraction osteogenesis for lengthening of the hard palate: partI. A possible new treatment concept for velopharyngeal incompetence. Experimental study in dogs.Plast Reconstr Surg, 1997; 100(7): 1635-1647.
28. Chen PK, Wu J, Hung K, Chen Y, Noordhoff S. Surgical correction of submucous cleft palatewith Furlow palatoplasty. Plast Reconstr Surg, 1996; 97(6): 1136-1146.
29. Gosain AK, Conley SF, Marks S, Larson DL. Submucous cleft palate: Diagnostic methods andoutcomes of surgi-

cal treatment. Plast Reconstr Surg, 1996; 97(7): 1497-1507.
30. Pensler JM, Bauer BS. Levator repositioning and palatal lengthening for submocous clefts.Plast Reconstr Surg, 1988; 82(5): 765-769.
31. Deren O, Ayhan M, Tuncel A, Görgü M, Altuntaş A, Kutlay R, Erdoğan B. The correction of velopharyngeal insufficiency by Furlow palayoplasty in patients older than 3 years undergoing Veau-Wardill-Kilner palatoplasty: A prospective clinical study. Plast Reconstr Surg, 2005; 116(1):