

Bölüm 4

ORTOGNATİK CERRAHİDE ORTODONTİK PRENSİPLER

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GİRİŞ

Ortognatik cerrahinin sonuçları açısından ortodontik hazırlık kritik öneme sahiptir. Ortodontik diş hareketlerinin bir bölümü cerrahi sonrası yapılarak tamamlanacak olsa bile bütün ortodontik diş hareketleri cerrahi tedavi öncesi planlanmalıdır. Buradaki en önemli husus dişlerin iskeletsel kaide içerisinde göreceli olarak uygun yerlerde bulunmasını sağlamaktır (1). Normal fizyolojik süreçler iskeletsel sorunu dişsel olarak kompanse etme eğilimi göstermektedir. Cerrahi öncesi aşamada ortodontik tedaviyle birlikte çeneler arası yeni bir dişsel uyumsuzluk ve oklüzyon düzlemi oluşmaktadır. Oklüzyon düzlemi, ortognatik cerrahi sırasında iskeletsel segmentlerin optimal pozisyonunun oluşmasında cerrah için iyi bir rehber rolü oynamaktadır. Ortodontik hazırlıkla ortognatik tedavi gören hastalar, ortodontik tedavi aşamaları, hastaların beklentileri ve tedavinin retansiyonu hakkında mutlaka iyi bir şekilde bilgilendirilmelidir (2).

ORTOGNATİK CERRAHİYE HAZIRLIK HEDEFLERİ

Cerrahi öncesi ortodontik tedavi hükümleri hakkında ortodontist ile cerrah arasında küresel anlamda bir fikir birliği bulunmamaktadır. Bazı ortognatik cerrahi takımları cerrahi öncesi alçı modellerde dişlerin ideale yakın dijitalasyonu tercih ederken bazıları ise detaylı ortodontik tedavi bitirme işlemlerini ise cerrahi sonrasına bırakmayı tercih etmektedirler. Genel olarak rehber prensip maksillanın ve mandibulanın iskeletsel olarak pozisyonlandırılmasında dişlerin olması gereken kadar hareket ettirilmesidir. Eğer bu genel prensip bir rehber olarak kullanılacak olursa, cerrahi öncesi hedeflerin parametreleri kesin olarak tanımlanabilir (3).

DİŞLERİN DEKOMPANZASYONU

Normal fizyolojik süreçler, çeneler arası iskeletsel uyumsuzlukların varlığı dişsel uyumsuzluğu azaltacak şekilde dişleri bir pozisyonda konumlandırır. Bu adap-

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