

MINISTRY OF HEALTH OF UKRAINE  
POLTAVA STATE MEDICAL UNIVERSITY  
CHAIR OF SURGICAL STOMATOLOGY AND MAXILLO-FACIAL  
SURGERY

**Parodontal surgery. Muco-gingival  
plastic surgery. Surgical stages of  
dental implantation. Correctings  
operations.**

Candidate of sciences, reader Ivanytska O.S.

# Lecture plan

1. Parodontal surgery.
2. Muco-gingival plastic surgery.
3. Surgical stages of dental implantation.
4. Correctings operations.
5. Home care after operations.

# The Maxillary Frenum



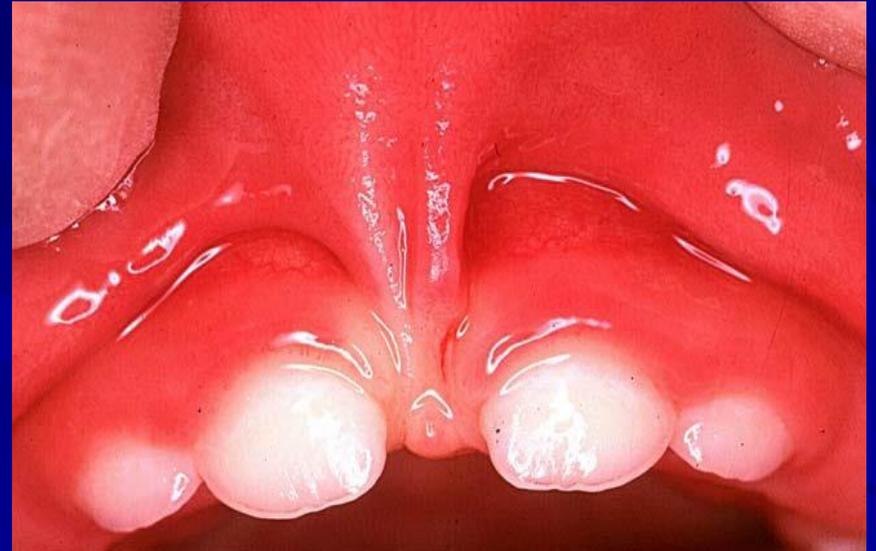
- Primary dentition

## ■ Mixed dentition



■ **When is the best time  
for revising this  
abnormality ?**

**Infant dentition  
age 10-18 months**



## Mixed dentition age 6-8



- When timed correctly, the *frenectomy* may allow the teeth to grow together and close the space naturally.

- Infant frenectomy diagnosis and treatment recommendations  
Infant recommendations



## Evaluating the Infant Maxillary Frenum

- 1. Is the frenum creating a diastema (gap) between the maxillary central Incisors ?



- **2. Will revision of the frenum prevent an orthodontic problem such as a gap or diastema from developing or remaining in when all the permanent teeth erupt into the mouth ?**



## Infant Maxillary Frenectomy

- 3. Does the frenum interfere with normal lip position ?  
Does this effect eating ?  
Does the lip get stuck between the front teeth ?

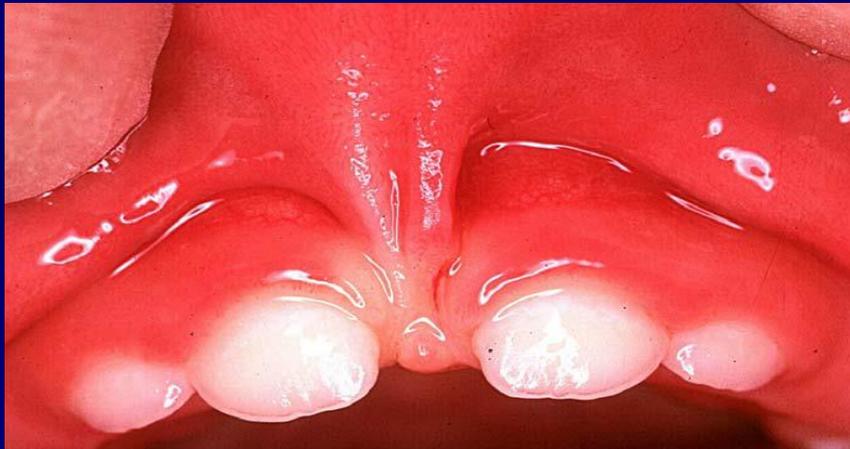


**4. Does the frenum make  
oral hygiene care difficult ?  
Is there bleeding ?**

**Does the frenum contribute to  
caries formation or post  
treatment home care?**



## Infant Maxillary Frenectomy



5. Has the frenum area been subject to repeated trauma ?



## Classifying Infant Maxillary Frenums

Most people do not have any significant frenum attachment





- Frenums that insert into the area of attached gingiva above the teeth ( interproximal area). In most cases, in children, this will not create any significant problems. As adults age and the gingival tissue normally recedes this frenum may need to be revised.
- •Class II: variations

- **Class III: variations**



**Frenum attachments that insert into the area between the teeth**



•**Class IV: variations**

**Frenums that insert into the anterior papilla or palate behind the teeth**



**Pre-op**



**24 hours after**



hours48 hrs



6 month evaluation

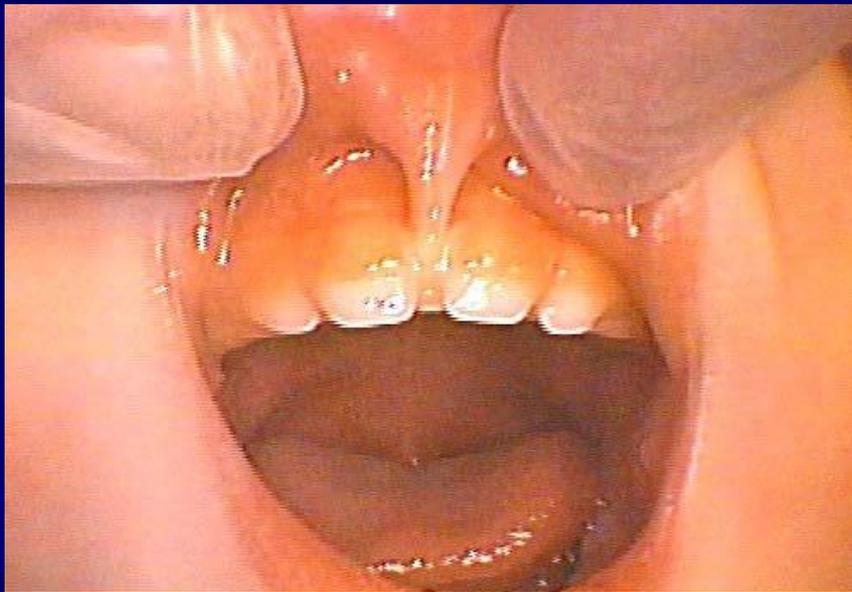




■ age 5 years

## Infant Maxillary Treatment

BEFORE TREATMENT



RESULTS AFTER TREATMENT



Which photo do you like ?



2 years after frenectomy





- **Maxillary Frenectomy in older children**

*In older children, where the maxillary frenum attachment is abnormal, I will usually recommend it be revised when the permanent central incisors just begin to erupt into the oral cavity*

*This allows the normal eruption pressures of the permanent lateral incisors to assist in pushing the front teeth together.*



- **Revising the maxillary frenum when the permanent front teeth are erupting**





- Excellent healing after six days



- **Maxillary Frenectomy**
- **The soft tissue attached between the teeth is removed and when indicated small piece of bone can also be removed when using the Erbium Laser.**

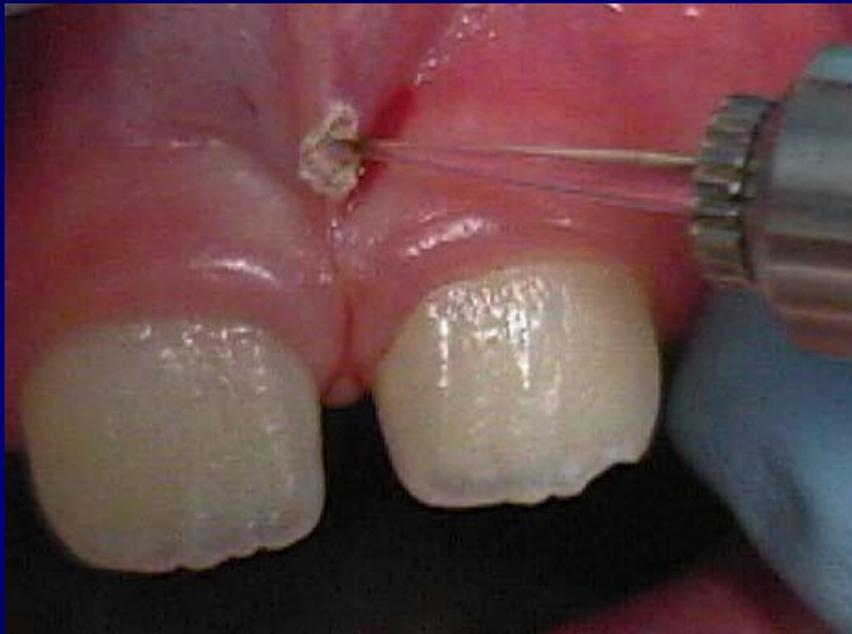


## ■ Maxillary Frenectomy

The revision is completed with little discomfort or bleeding.

*The surgical site does not require stitches*

## Maxillary Frenectomy



## ■ Home care after laser revision of maxillary frenectomy?

- 1. Brush the front teeth gently to remove all the plaque that accumulates daily to allow proper healing of surgical area.
- 2. Two times a day, morning and evening, for the upper frenum area, pull the lip upward or for the lower frenum area, downward to prevent the area from healing together.
- 3. After you pull the area apart place a small amount of Vitamin E or Vaseline in surgical site with your finger.

- **4. Rinsing with warm salt water after eating will help the area to heal.**
- **5. A small white patch in the surgical site is normal and is not any type of oral infection.**
- **6. If your child seems to be uncomfortable after the numbing wears away, you may give the child Tylenol or similar pain medications.**

## Contents

- Introduction
- Surgical goals, objectives, indications, contraindications
- General surgical principles- Medical history and physical status-  
Diagnosis and treatment plan
- Aseptic surgical technique
- Anesthesia and pain control

- Tissue management (Flap management)
- -Incisions
- -Flap preparation
- -Flap design
- -Flap retraction
- -Open flap debridement
- -Flap position
- Hemostasis
- Suturing
- Wound management
- periodontal dressings- postoperative instructions
- Conclusion
- References

# Questions for discussion of the lecture

1. What issues does periodontal surgery deal with?
2. Micro - gingival surgery as a section of oral surgery?
3. The history of dental implantation.
4. What surgical stages of dental implantation do you know?
5. What do you mean by corrective operations?

**Thank you for attention!**