

REPLACEMENT OF A LOWER JAW DEFECT USING AN AUTOTRANSPLANT BASED ON THE PARIETAL BONE

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Introduction: For a long time and to this day, the issue of eliminating a mandible defect with a violation of its continuity has long ceased to be relevant, but the question of which of the methods available in the arsenal of a maxillofacial surgeon to solve this problem is discussed with interest.

Nowadays, surgical intervention techniques have been developed in detail, indications for the use of transplants have been studied, but the problem of restoring the mandible, especially in cases where large defects are combined with a deficit of soft tissues, has not been solved to this day.

Of the known bone vascularized autotransplants, the most commonly used are - rib, iliac crest or fibula fragment, lateral edge of the scapula, thoracodorsal flap with a rib. However, there are both positive and negative properties to using these methods.

Objective. Implementation of a method for improving the functional and aesthetic result of replacing an extended mandible defect by transplanting a free bone autograft based on the parietal bone.

Materials and methods. This study presents a clinical case from 2024 practice. A patient diagnosed with "chronic osteomyelitis of the mandible with a pathological fracture" underwent surgical treatment at the city regional hospital. A team of neurosurgeons and maxillofacial surgeons mastered a method for eliminating mandible defects with a violation of its continuity using a free bone autograft based on the parietal bone. The essence of the operation was that the parietal bone is exposed from a bilateral approach, from which a full-layer transplant of a given shape and size is cut out using a "straeker" power unit equipped with a TMO protection attachment. The donor area is closed with a mesh miniplate, the wound on the scalp is sutured without any peculiarities. Then the sawn-out fragment of the required size and shape is easily fixed to the edges of the defect in an "edge to edge" manner with bone miniplates.

Results. According to the results of surgical treatment, after 4 months (according to CT data), it was revealed that the integrity of the practically restored lower jaw was preserved. In the area of contact of autotransplants with native fragments of the jaw, active processes of bone tissue remodeling and consolidation of fragments were determined. Also, after 3 months, the patient underwent orthopedic treatment using dental implants.

Conclusion. Thus, to achieve the best aesthetic and functional results of compensation for extended defects of the lower jaw, it is necessary to implement a free bone autograft transplant. Another distinctive feature of this method is that after a couple of months, dental implants can be installed,

thereby completely closing the cycle of patient treatment from eliminating the jaw defect to orthodontic rehabilitation and final restoration of the function of the dental system.