

A COMPARATIVE CEPHALOMETRIC ANALYSIS OF THE CRANIOFACIAL MORPHOLOGY BETWEEN UN OPERATED, ONLY LIP OPERATED, TOTALLY OPERATED UNILATERAL CLEFT LIP AND PALATE PATIENTS AND NON- CLEFT INDIVIDUALS – CASE CONTROL

STUDY

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DIBEABY

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ABSTRACT

Purpose: Unilateral cleft lip and palate is the most common cleft in humans. Many investigators have concluded that the dentofacial relationships of individuals with repaired clefts differ from those of persons with out clefts.

It is important clarify whether maxillary deficiencies observed in treated cleft patients result from intrinsic defects or surgical intervention early in life and also to know whether the un-operated cleft individuals have facial growth potential as the non-cleft individuals.

Method: The individuals, age group ranging from 17-35 years are divided into 4 groups

Group I with 10 completely un-operated unilateral cleft lip and palate individuals.

Group II with 10 individuals who received lip repair in infancy, but not palate repair.

Group III with 10 individuals who received both early lip and palate repair.

Group IV with 10 non-cleft controls.

Lateral cephalograms taken in natural head position of both cleft and non cleft individuals are subjected to cephalometric analysis. Relevant reference lines are used for the cephalometric measurements. Comparison was then made between the various groups of the study and the raw data obtained was subjected to statistical analysis.

Interpretation and conclusion: Results suggest that UCLP individuals have intrinsic potential to exhibit normal facial growth. Therefore, the cause of abnormal facial growth is mainly introgenic. Results also suggest that both early lip and early palate surgery results in retardation of mid face growth. Soft tissue growth was also similarly affected as underlying skeletal tissues. But, the growth of nose was unaffected by surgeries.

Therefore, it is suggested to delay the early lip and palate surgery. This must however be decided, based on the esthetics, psychological make up and functional requirements and also must be decided based on correlation with the impairment of speech.