Surgical Modalities in the Management of Temporomandibular Ioint Ankylosis : A Follow Up

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INTRODUCTION

Ankylosis of the temporomandibular joint is one of the most disabling conditions which can afflict a person. It could be defined as 'fixation or fusion of the articulating surfaces of the T.M.J. leading to restricted mouth opening or no opening at all'.

The joint which is afflicted during childhood will jeopardise proper development of the mandible and will result in considerable deformity (Sugar and Pradhan, 1984). Moreso, if the condition develops in childhood, facial deformity brings psychological stress which adds to the physical handicap, thus disrupting family life and creating emotional disturbances (NL Rowe, 1982).

Therefore to alleviate the misery and to prevent such deformity, early restoration or substitution of growth centre has been advocated.

A number of corrective surgical procedures have been carried out. One of the surgical procedures most commonly used has been Gap Arthroplasty/osteoarthrotomy, probably because of its simplicity. Other methods that have been used from time to time involved removal of various amounts of the condyle, neck and ramus of the mandible depending on the technique. All of these procedures were carried out with the intention of creating sufficient bony gap or use of various interpositional substances to prevent recurrence. Various interpositional substances that have been used include bone,