



MAX - IMPACT

The Official Newsletter of
AOMSI Delhi- NCR State Chapter

Issue 2, November 2023

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- ▶ **Dr. Pallavi Srivastava**
- ▶ **Dr. Shashank Tayal**
- ▶ **Dr. Zainab Chaudhary**



Message From the PRESIDENT AOMSI Delhi NCR State Chapter



Dear Esteemed Members

It gives me great pleasure to extend my warmest greetings to all of you. It is indeed a matter of honor and pride to be associated with this esteemed organization which has been at the forefront of promoting excellence in the field of Oral and Maxillofacial Surgery.

I take this opportunity to express my sincere appreciation for each and every one of you for your contribution and collaboration which have been the pillars of our success. As we move forward, I am confident that together, we will achieve great success and continue to make a positive impact in our field of oral and maxillofacial surgery. This second issue of our newsletter is the result of our tireless editorial team. I would like to congratulate the editorial team and all members of the state chapter for their dedication and hard work

Our chapter has worked like a ball of fire to uphold the values and vision of the AOMSI and together, we have shown what an exceptional team can achieve. Let us continue to support and inspire one another, fostering a culture of excellence and camaraderie. With your continued efforts, I have no doubt that we will reach even greater heights.

Warm regards,

Dr. Rohit Chandra





Message From the Hon. **SECRETARY** **AOMSI Delhi NCR State Chapter**



Dear Esteemed Members

Season's Greetings!

It gives me great joy to announce the release of the second issue of our newsletter. The vision for this newsletter is to provide a platform for our members to share their experiences, knowledge and insights in the field of oral and maxillofacial surgery. I believe that this collective effort will serve as a valuable resource for all members of our chapter from students and residents to seasoned professionals.

Let us continue to move forward with unwavering determination, knowing that our collective efforts have great potential to bring about positive change and innovation in the field of oral and maxillofacial surgery.

Best Regards,

Dr. Imran Khan





Message From the EDITORIAL TEAM

We extend our heartfelt thanks to all the contributing members who made publication of the second issue of Max impact, the official newsletter of Delhi NCR chapter of AOMSI possible. Your contributions have been instrumental in our journey to success and we truly appreciate your commitment to our common goal.

We would like to extend our sincere gratitude to office bearers of AOMSI Delhi NCR state chapter for their constant support and consistent encouragement towards preparation of this issue.

With an aim to foster collaboration and improved communication within our fraternity, we encourage every member to enthusiastically contribute towards this newsletter. Thank you all once again for being the part of this incredible journey.

Best wishes



Dr. Alok Bhatnagar



Dr. Lokesh Chandra



Dr. Deborah Sybil

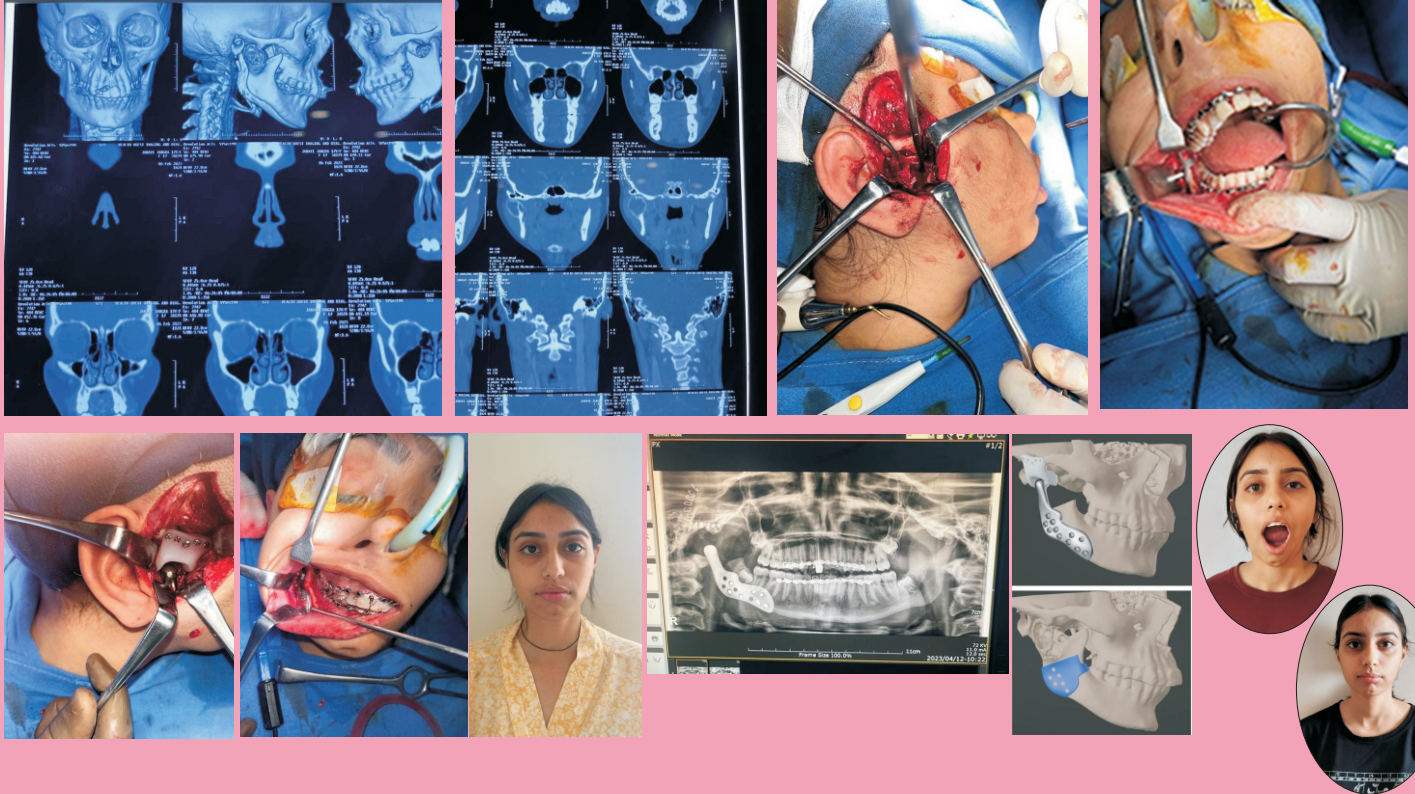


SURGICAL UPDATE



MODIFIED APPROACH TO TOTAL JOINT REPLACEMENT SECONDARY TO PATHOLOGY

Contributed by: DR. ANKUR RUSTAGI, MDS (AIIMS), Consultant Maxillofacial Surgeon, Medanta the Medicity, Gurugram



Pathologies of the TMJ can be discerning for the patients and surgeons alike in respect to complexities involved in approach and surgical management. Restoration of facial form and function is the key while planning and involves robust 3-D planning of the reconstructed joint. Total Joint replacement of the TMJ involves both custom and stock joints. With time, custom 3-D printed Titanium joints have evolved to be the one stop solution for such replacements especially for our populations with smaller jaws (than Caucasians). These ensure precise fit and early functional restoration. The approach traditionally includes extra-oral approach using a pre-auricular approach and a submandibular incision for adequate osteotomy and implant fixation.

A 19 yr old female presented to our unit with history of facial swelling on right side which had increased over past 2 months. There was minimal pain and no facial nerve paresis on presentation. The swelling was firm, non-tender and involved the right pre-auricular area. Radiographic investigations revealed a large, expansile lytic lesion involving the right TMJ with multiple perforations of the cortex. Differential diagnosis of Aneurysmal Bone cyst / Osteochondroma was made and panning was done.

Modified approach: While the pre-auricular incision was made to expose the lesion, an intra oral approach was used to expose the ramus for implant fixation. With help of accurate cutting guides, osteotomy was completed with Piezosurgery unit. The implant was introduced via pre-auricular approach and fixed at pre-assigned position using trans-buccal approach.

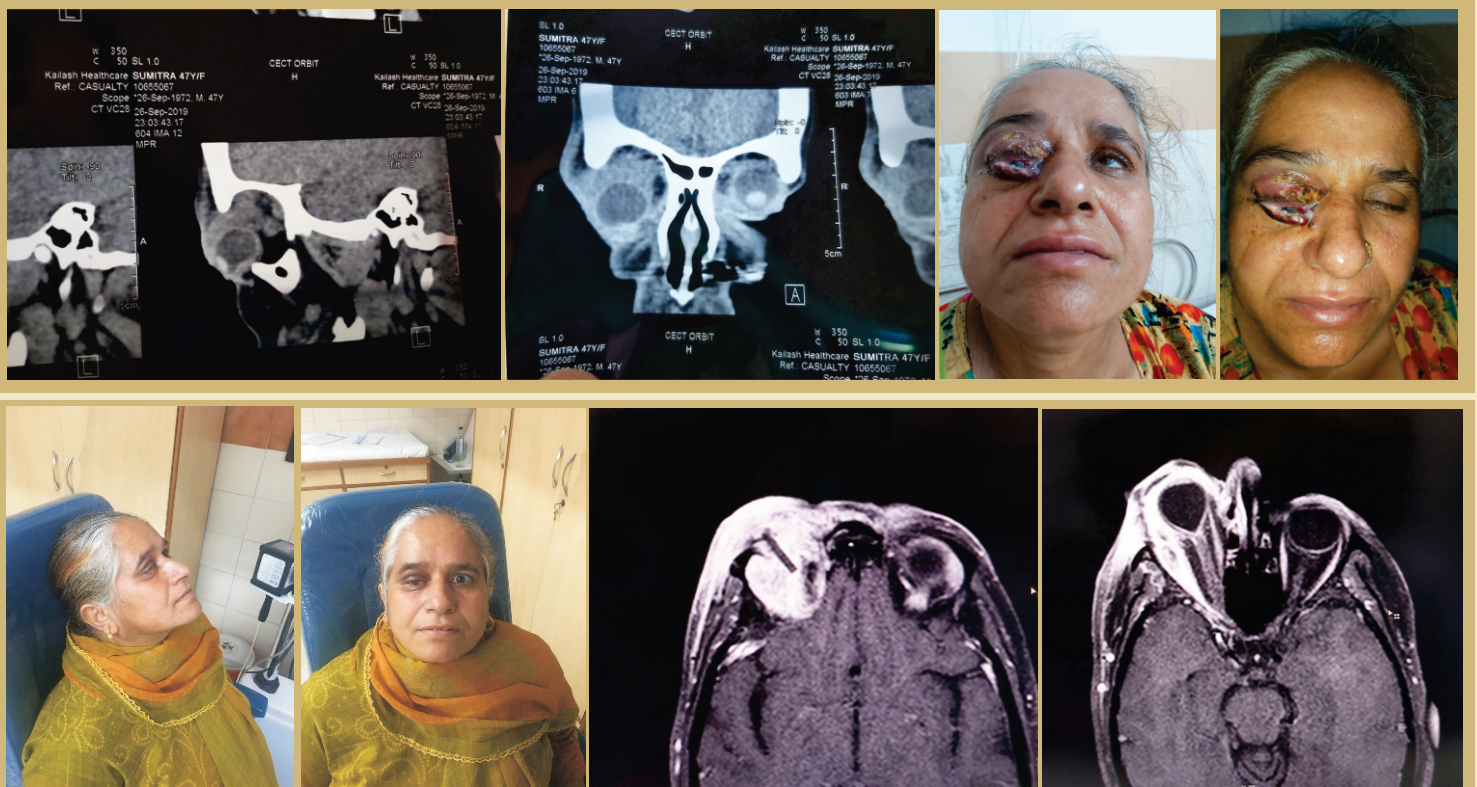
Post op xrays confirmed excellent implant position and recovery was satisfactory with no facial paresis. The Histopathology confirmed the diagnosis as Osteochondroma

6 months follow up shows good function and esthetics. The modified approach allowed for faster recovery, avoidance of extra-oral neck scar and no risk to marginal mandible nerve.

The precautions include verifying the fit of cutting guide and implant position due to limited access and copious irrigation with Betadine/ Gentamycin to avoid possible TJI Implant infection.

ORBITAL CELLULITIS

Contributed by : DR. ANSHUL SINGHAL, Consultant Maxillofacial Surgeon,
Kailash Hospital, Noida



Orbital Cellulitis with Extraconal Space Infection in a Patient with Diabetes Mellitus

This case report presents a 47-year-old female patient who presented with swelling in the right eye associated with diminished vision for four days. The patient reported with a history of a foreign object entering her right eye during train travel 4 days back, leading to subsequent itching, redness, and swelling. Notably, the patient had a medical history of Diabetes Mellitus for the past 4-5 years. Initial examinations revealed marked inflammation, periorbital edema, ulceration and purulent discharge in the affected eye. Limited eye movement, reduced perception to light and severe pain were observed. Laboratory investigations indicated significantly elevated random blood sugar of 347mg/dl, increased white blood cell count (WBC) and elevated C-reactive protein (CRP) levels. An MRI confirmed oedematous extraconal space with proptosis of the eyeball, leading to a diagnosis of orbital cellulitis with extraconal space infection.

The treatment plan involved urgent decompression of the extraconal space to prevent further cranial spread of the infection and potential necrosis of vital intraorbital tissues. Insulin therapy was initiated to manage the hyperglycemic state. Broad-spectrum systemic antibiotics were administered, along with incision and drainage (I&D) procedures, creating an upper blepharotomy incision to access the extraconal space, leaving a corrugated drain in place. Post-operative care included regular irrigation, dressing changes and control of blood glucose levels. Steroids were introduced to manage post-operative edema. After a month-long recovery period, the patient exhibited restored orbital volume, improved perception to light and partial restoration of vision.

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Sudha Rustagi College of Dental Sciences and Research,
Faridabad



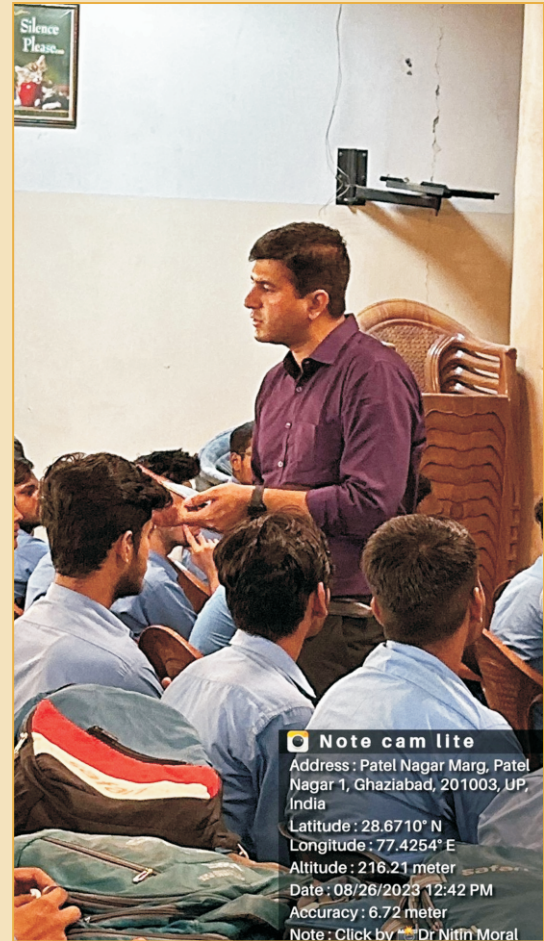
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Faculty of Dentistry,
Jamia Millia Islamia, New Delhi



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Inderprastha Dental College,
Ghaziabad



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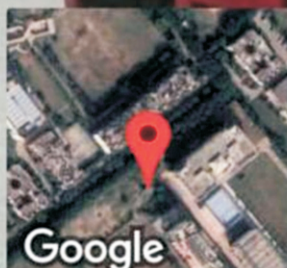


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ITS Dental College,
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GPS Map Camera



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Ghaziabad





Academic events held in Delhi-NCR Region

Traumathon- Current concepts in Maxillofacial Trauma

Department of Oral & Maxillofacial Surgery, ITS Dental College, Hospital & Research Centre, Greater Noida in association with AOMSI Delhi NCR State Chapter organized a workshop on Maxillofacial Trauma on 6th May 2023. A total of 113 students and 38 faculty from 27 institutes participated in the workshop. It consisted of assorted lectures by distinguished faculty from all around the state. These were followed by panel discussions by eminent maxillofacial surgeons. There were poster presentations by students, alongwith quiz and slogan writing competition.



Maximpact Musings



RESPONSE TO CLINICAL SCENARIO OF PREVIOUS ISSUE

26 y/M patient with bruxism, deep bite, severe pain on mouth opening beyond 12 mm and deviation to right on opening. MRI reveals anterior displacement of right TMJ disc. What would be the recommended management sequence?



Dr. Shashank Tayal

Consultant-Oral and Maxillo facial surgery

Management sequence will involve supplemental medication treatment to relieve pain and inflammation...

Patient education regarding reduced mouth opening and soft diet ...

Occlusal splints for habit cessation and occlusion stabilization

In the next step TMJ lavage can be done with disc plication....

Last resort will be new disc with autogenous or alloplastic (TJR)



Dr. Vidhi Chhabra Rathi

Reader- Kalka Dental College and Hospital

Immediate management to alleviate pain

1. Arthrocentesis
2. Steroid injection in joint

Comprehensive management for long term correction and relief

1. Management of deep bite
2. Habit breaking appliance for bruxism
3. LLLT for the affected joint over 6 sittings



Dr. Ifra Iftikhar

Research Associate -Jamia Millia Islamia

Patient is diagnosed with anterior disc displacement , Deep bite associated with Bruxism. The line of treatment is categorized as Medical management which includes analgesics for immediate pain relief. Conservative management starts with tmj arthrocentesis, Arthroscopy with administration of Steroids, hyaluronidase injection into joints. Patient is advised soft splint and soft diet with physical exercises that is movement of jaws against resistance. Surgical management include disc repair and total joint replacement. Also orthodontic treatment is recommended for occlusal discrepancy.



Dr. Harshdeep Singh

Senior Resident, Bhagwan Mahaveer Jain Hospital (Govt. of NCTD)

The recommended approach for the case of Wilkes class IV involves a stepwise process. It begins with a psychological evaluation and conservative treatment, including pain management through pharmacological methods and intra oral appliance therapy. Additional therapies like TENS and low-level laser therapy may also be used. If surgery is required, it should start with arthrocentesis and intra-articular injections. Arthroscopy can help with both diagnosis and surgical management. Open surgical management is considered a last resort.



Dr. Muskan Grover

PG Resident, ITS Dental College, Muradnagar

Patient coming with anterior disc displacement - correction of disc displacement followed by orthodontic treatment of bruxism and deep bite

1. An early intervention involves 'unlocking' by mandibular manipulation (MM)
This has been modified and supplemented with additional therapies including pre-treatment intracapsular anaesthetic injection/ arthrocentesis and/or post-treatment stabilization splint/anterior repositioning splint (ARS) wear - surgical therapy in chronic stages
2. Correction of bruxism using night-guards
3. Fixed orthodontic treatment of upper anteriors/TADs can be used as well for upper anterior intrusion
4. Also prior to deep bite correction, TMJ trainers can be used
5. Pt being a Bruxer - patient might be having attrition needing an endodontic- conservative treatment

WORD SEARCH

Oral and Maxillofacial Surgery



F	H	B	S	H	K	G	C	U	B	E	R	O	Y	R
Q	O	E	N	V	I	R	R	E	L	R	Y	C	S	U
L	T	T	E	B	C	K	R	M	V	A	C	H	R	L
D	P	P	H	W	I	C	D	S	P	D	N	P	O	E
X	O	E	X	E	P	K	E	W	R	I	A	H	L	V
P	T	B	H	O	R	O	P	A	D	O	B	F	J	O
E	A	J	X	T	J	G	B	A	G	T	H	T	C	N
N	T	O	R	E	A	K	I	C	O	H	V	G	X	O
C	O	F	K	B	Q	S	J	L	E	E	F	W	Y	R
I	S	R	M	O	I	X	U	P	L	R	Y	I	J	D
L	I	N	C	O	L	N	Q	V	E	A	K	H	B	E
C	J	L	M	K	L	W	X	G	S	P	Z	S	X	F
A	N	T	E	R	I	O	R	N	K	Y	K	G	F	R
S	Y	R	S	P	P	U	F	J	O	R	Y	P	Q	I
E	G	I	B	N	A	B	U	L	L	E	Y	E	Q	N

HINTS

1. Neuralgia involving the 5th cranial nerve
2. Most common dislocation of TMJ
3. Danger space of neck
4. Appearance of lingually placed mandibular 3rd molar
5. Characteristic feature of lateral pharyngeal space infection
6. Abbey-Estlander flap is used in the reconstruction of
7. Vasoconstrictor alternative to adrenaline in LA
8. IV diazepam in dental chair causes (sign)
9. Teeth in line of fire
10. A type of suspension wiring



47th annual conference of AOMSI 2023

Date : 23rd to 25th November 2023.

Venue : The Leela Ambience Convention Hotel, Delhi

Theme : Teaming Experience with Evidence

IN CONFERENCE HANDS-ON WORKSHOPS

1



CURRENT TRENDS IN MAXILLARY SINUS AUGMENTATION.

2



MAGNETIC DYNAMIC TECHNOLOGY IN MODERN IMPLANTOLOGY

3



3A - DECODING ZYGOMATIC & PTERYGOID IMPLANTOLOGY

4



4A - CUSTOMIZATION VS. STANDARDIZATION: DIGITAL APPROACHES TO IMPLANT SUCCESS

5



5A - INTRODUCTION TO ENDOSCOPY FOR MAXILLOFACIAL SURGEON

6

ATLS INTRODUCTION

7



PEIZOSURGERY IN MAXILLOFACIAL SURGERY HANDS ON

8



DIODE LASERS IN ORAL AND MAXILLOFACIAL SURGERY

9



VIRTUAL PLANNING IN CRANIO-MAXILLOFACIAL SURGERY

10



3D DESIGNING IN ORAL AND MAXILLOFACIAL SURGERY

Complimentary Registration

First come First serve

Scan to Register for Workshop

