

SUMY STATE UNIVERSITY  
MEDICAL INSTITUTE



«**BIOMEDICAL  
PERSPECTIVES**»

**ABSTRACT BOOK**

International Scientific and Practical Conference  
of Students, Postgraduates and Young Scientists

(Sumy, October 16-18, 2019)

Sumy  
Sumy State University  
2019

MINISTRY OF EDUCATION AND SCIENCE OF UKRAINE  
SUMY STATE UNIVERSITY  
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## THE FEATURES TREATMENT OF PERMANENT TEETH ERUPTION DUE TO POLIDENTIA IN A CHILD WITH INCOMPLETE ORAL AND MAXILLOFACIAL DISOSTOSIS SYNDROM

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**Introduction.** The developmental disorders of the maxillofacial area are one of the difficult problems of dentistry. Maxillofacial dysostosis belongs to this group of diseases. The patient's appearance is characterized by abnormalities of the head and craniofacial area. Often patients have a complaint of a delay in the eruption of permanent teeth because of hyperdontia and retention. The type of inheritance of this pathology is autosomal dominant trait.

**Aim.** The study of the features of treatment for delayed permanent teeth in children with incomplete maxillofacial dysostosis syndrome.

**Materials and methods.** Child K., 11 y.o. had a complaint of absence of permanent teeth in upper and lower jaws. Physical examination showed a 131 cm height where as an average height of 11-years-old girls is 138-148 cm (centile table of girls under 17 years' height according to WHO). Disproportion of face due to upper third enlargement (broad forehead with distinct protuberances) and slight shortness of middle third (up to 1,5 cm). Palpebral fissures are big with widely-spaced eyes, antimongoloid type is presented. Micrognathia of maxilla. Mandible growth is normal. Girl complains on absence of permanent teeth on upper and lower jaws with presence of deciduous 53,54,63,64,73,74,75,83,84,85. Child is sent to further orthodontic treatment.

**Results.** The height of patient is 131 cm was revealed at examination. The disproportion of a face due to increasing its upper third (wide forehead with pronounced frontal tubercles) and reducing middle one. The father has a similar external sign. The girl's lower jaw has a normal size on an orthopantomogram. The size of maxillary sinuses, orbits and upper jaws are reduced. The patient was diagnosed with congenital maxillofacial dysostosis incomplete type hyperodontia of the both jaws, delayed eruption of permanent teeth. The supernumerary teeth were revealed during the estimation of orthopantomogram. But this method of examination didn't provide information about relationship between mentioned teeth in the jaws relatively to the location of the mandibular canal and maxillary sinus. The 11 supernumerary teeth were revealed on magnified segments of cone-beam tomogram. The phased surgical and orthodontic treatment helped to make a right positioning of teeth in the dental arch.

**Conclusion.** Our clinical case of multiple hyperidentia and delayed eruption of permanent teeth with an incomplete type of maxillofacial dysostosis. The features of diagnosis, surgical and orthodontic treatment are described to reduce psychological and operative trauma of the child. This made it possible to correct of positioning of permanent teeth in the dental arch during the eruption stages.