


**Oral Presentation
Abstracts**



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Assessment of Quality of Life (QoL) in Patients After Head and Neck Tumor Surgery

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Background: The management of post-surgical patients caused head neck tumors may cause changes in the function of speech, swallowing, chewing, airway and appearance to psychological which can cause a decrease in Quality of Life (QoL).

Objectives: to report QoL assessment on post-surgical patients caused head neck tumor.

Methods: 23 adult patients after resection of mandible with an indication of ameloblastoma in 22 patients, and mandibular cyst in one person, 20 patients using reconstruction with plates, one patient use Free Fibular Flap, one patient with no post-surgical repair. QoL assessment questionnaire using the Modified University of Washington Questionnaire (UWQoL) that has been the cross-cultural adaptation.

Results: Almost all patients categorized as having a high QoL assessment. Based on the 7-day post-surgical problems: Chewing is a top issue. Based on QoL assessment before and after surgery: mostly patients feel the Health-Related Quality of Life (HRQoL) is better when compared with the situation before the operation.

Conclusions: QoL assessment can be performed in post-surgical patients, because surgical procedure caused changes in the dimensions of appearance, functional and psychological.

Keywords: QoL, UWQoL, HRQoL, Cross Cultural Adaptation

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Management of Calcifying Epithelial Odontogenic Tumor of the Maxilla with Segmental Resection method: A Case Report

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Introduction: Calcifying epithelial odontogenic tumor (CEOT) also known as Pindborg tumor is very rare benign odontogenic tumor, slow-progress, locally aggressive, destructive and characterized by amyloid-like material that may become calcified. It accounts for less than 1% of all odontogenic tumors¹.

Case report: 27-year old female patient came to the Oral and Maxillofacial Surgery Clinic of Hasan Sadikin Hospital with a lump sized about a chicken eggs in the palate area arising since 11 months ago, was not accompanied by pain and not bleed easily. On clinical examination found a mass + 5.0x4.0x4.0 cm in size, hard consistency, fixated to its base on the hard palate region from right second incisor to the first left molar. A panoramic X-ray showed a mixture of radiolucient-radiopaque lesion with unclear boundaries that destruct bones and resorbs roots of the teeth around. The lump had undergone biopsy with histopathological results is Calcifying Epithelial Odontogenic Tumor. Definitive surgical therapy is segmental resection of the maxilla

Discussion: Calcifying Epithelial odontogenic tumors have a recurrence rate of 15-20%. This tumor is aggressive and destructive, so that a segmental resection of the maxilla through extra-oral approach with a combination of lateral rhinotomy and midline split lip was performed.

Conclusion: Calcifying Epithelial Odontogenic Tumors is a destructive benign odontogenic tumor. The primary therapy of this tumor is surgical resection to prevent recurrences

Keywords: Calcifying Epithelial Odontogenic Tumor, destructive, Segmental Resection

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BSSO: Pre operative evaluation

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A variety of orthognathic procedures are used, not only to correct mandibular and maxillary irregularities, but also to achieve good esthetic outcomes. A BSSO is performed to correct a wide array of minor and major skeletal and dental deformities and irregularities, including the mal alignment of jaws and teeth. Correcting these deviations, can greatly enhance the functionality of the bite, speaking, breathing, reducing wear on the teeth, and can improve facial aesthetics. The aim of this paper is to discuss the evaluation should be done before BSSO. There are some important stages in surgical planning orthognathic are the examination of clinical examination, cephalometry analysis, model analysis, mock surgery and fabrication of splints, profile prediction, and 3D-Virtual planning. This paper suggests that the key to proper planning is a precise diagnosis. The expectations of the patients and the potential risks of the surgical procedures must be seen as well.

keyword: orthognathic surgery, BSSO, pre operative evaluation