

Simple and Atraumatic Technique for Lingual Tissue Retraction and Preventing Thermal Injury to Lips

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Damage to the lingual nerve is a common complication of removal of mandibular third molar teeth and the reported incidence of permanent sensory loss ranges from 0.5-2%. [1-3]. That of transient sensory loss is higher (up to 11.5%). Any technique that will appreciably minimize the risk of lingual sensory loss after mandibular third molar surgery should therefore be welcomed. Traditionally the lingual nerve is protected during third molar surgery by the use of various retractors. Howarth's (Nasal) Rasperatory has been the instrument of choice for retraction of the

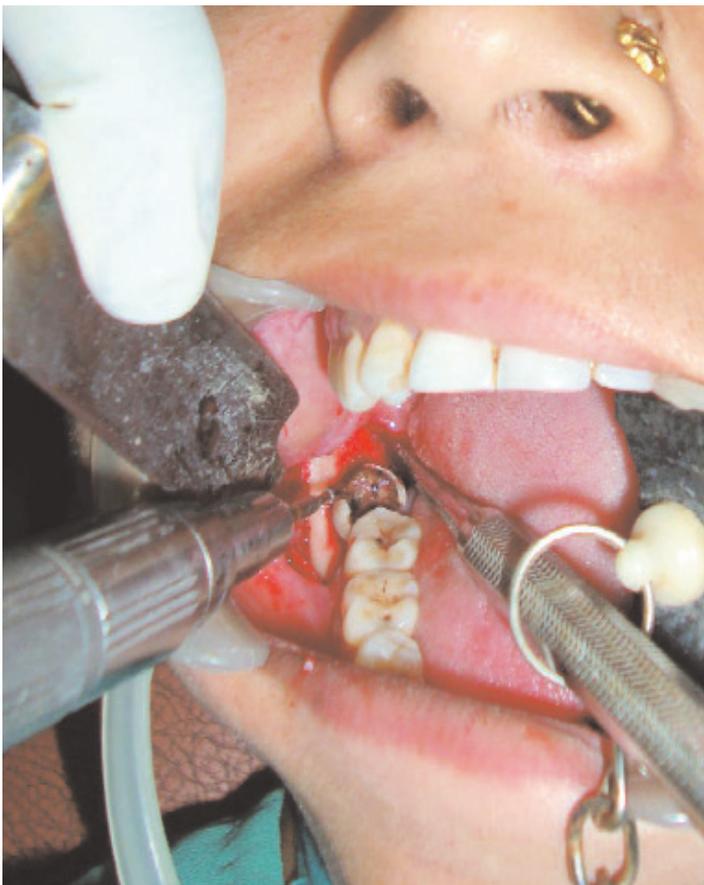


Fig.1 Cheek retractor preventing direct contact of hand piece to lips and periosteal retractor being inserted into the ring of mouth prop for self retraction of lingual tissue.



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lingual mucoperiosteal flap, but Rood' concluded that it is not a satisfactory instrument for protecting the lingual nerve during removal of mandibular third molars.

In this paper, a simple method is being devised for self retraction of lingual tissue and to prevent thermal injury to the lips when performing surgical removal of 3rd molar. When removing the 3rd molar, the periosteal elevator can be inserted into the ring of the mouth prop and placed between the lingual mucosa and the reflected bone. This technique provides self retraction of lingual flap and prevents inadvertent injury to lingual nerve. (Fig. 1)

It is possible that soft tissue can be damaged and lead to lacerations, abrasions, and contusions by the improper use of dental instruments by the person performing the surgery. An abrasion of the lips can be due to contact with a rotating shank of a surgical drill (bur) Soft tissue burns can be caused when a surgical drill starts to run hot due to the result of improper maintenance of the drill such as a dull bur or clogged or worn bearings or gears.

A worn or clogged surgical drill will run hot due to an increase in power to the hand piece head or attachment in order to maintain hand piece performance. An ointment or cream such as Vaseline should be applied to the lips if an abrasion occurs [4-5]. This paper highlights that use of cheek retractor can prevent thermal injury to the lips. The cheek retractor prevents direct contact of the hand piece and the oral tissue and thus prevents thermal injury. (Fig .1) This approach makes the procedure easier and atraumatic.

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