

Treatment of oroantral fistula with buccal fat pad; Report of 8 clinic cases

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Background: Because the roots of the maxillary posterior teeth are close to the antral cavity, there may be a relationship between oral and antral cavities during the extraction of maxillary posterior teeth, excision of cyst tumors in the maxillary region, resulting from maxillofacial trauma or implant treatment. If this relationship is not closed, oroantral fistula may occur with symptoms such as pain, bad taste and smell, changes in sound, and food coming out of the nose. Various techniques have been described in the literature for the closure of oroantral relationship. One of these is the "buccal fat pad graft" described by Egyedi in 1977.

In this case series study, we reported our experience with the buccal fat pad graft technique, the advantages and disadvantages of the technique, and the complications encountered after the procedure.


Patients and Methods: 4 patients with root fracture displaced to maxillary sinus during the extraction, 2 patients with residual cyst that close the antral cavity and 2 patients who applied to our clinic after tooth extraction at different centers with advanced oroantral fistula.

Conclusion: Normal healing was observed in all 8 patients and none oroantral fistula occurred recurrence. Buccal fat tissue flap is a simple, fast and effective oroantral fistula closure method that can be preferred instead of buccal flap in which the height of buccal sulcus is reduced or palatal flap made by secondary healing.

Speaker Biography

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