

ORAL AND MAXILLOFACIAL SURGERY II.
ANAESTHESIA
SUTURE

PAIN CONTROL - INDICATIONS OF ANAESTHESIA

- Surgical treatment
 - Preparation of cavities
 - Preparation for crowns
 - Endodontic treatment
-

CLASSIFICATION

- General anaesthesia
- Analgesia (inhalation, sedation)
- Hypnosis
- Local anaesthesia

DRUGS

- Articain 4% with epinephrine 1: 200 000
- Articain 4% with epinephrin 1:100 000
- Mepivacain 3%plain
- Prilocaine 4% with epinephrine 1:200 000
- Prilocaine plain
- Lidocain spray 10%
- Xylocain spray 10%

BENEFITS OF LOCAL ANAESTHESIA

- Comfort for the patient
 - Haemostasis (addtion of epinephrin – hormone of suprarenal gland – arteficial)
 - Operator efficiency
-

LOCAL ANAESTHESIA

- Topical (spray,liquid) applied on mucosa
- By injection
 - Infiltration
 - Nerve block
 - PDL –periodontal ligament anaesthesia
 - Intrapulpal anaesthesia

LOCAL ANAESTHESIA CONTRAINDICATIONS

- Allergy
- Serious systemic diseases (blood circulation)
- Antithrombotic therapy , coagulopathy – nerve blocked anaesthesia

TOPICAL ANAESTHESIA (ON MUCOSA OR SKIN)

- Liquid
- Spray
- Creme, paste

Only nerve endings are affected

For extraction of primary teth (when roots are completely resorbed)

Anesthesia of the puncture will be

INFILTRATION

- The drug is delivered by infiltration of soft tissues using syringe and needle.

INFILTRATION ANAESTHESIA

- Suitable for - indications
 - simple extractions in maxilla,
 - extractions of mandibular incisors, canines
 - soft tissue surgery

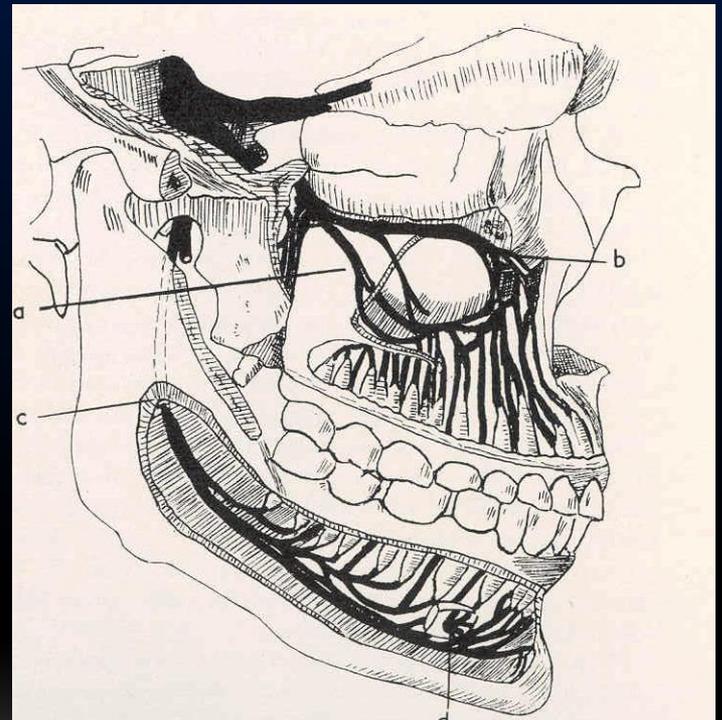
INFILTRATION

- Syringe with short needle
- Raise lip or cheek The puncture is situated into mucosa appr. 1cm from fornix vestibuli. Do not touch periosteum.

NERVE BLOCK ANAESTHESIA

Syringe with long needle

- Foramen mandibulare
- Foramen mentale
- Foramen palatinum majus
- Foramen incisivum
- Foramen infraorbitale



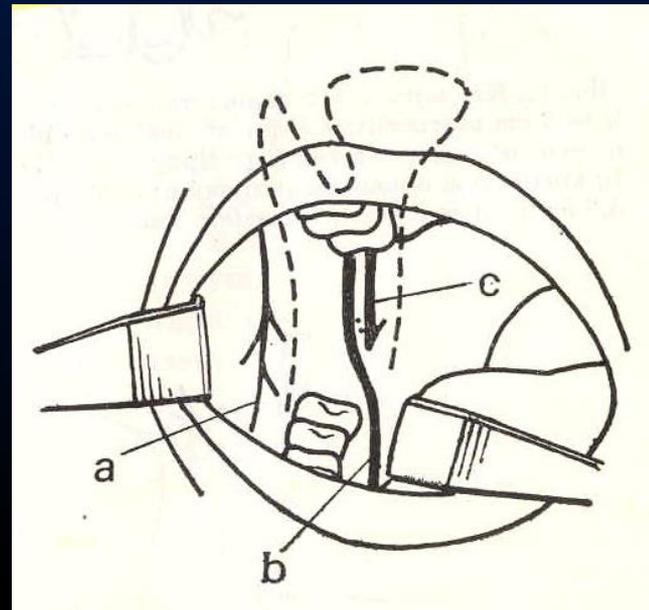
NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Foramen mandibulare



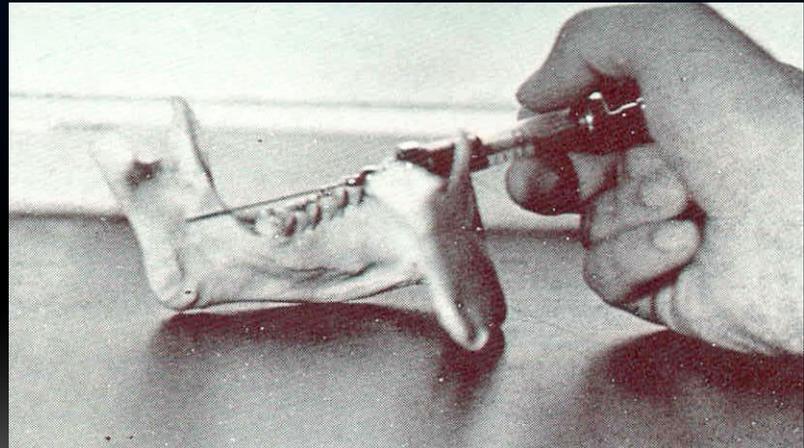
N. Alveolaris inferior
N. lingualis



NERVE BLOCK ANAESTHESIA

Nervus alveolaris inferior

In sulcus colli mandibulae

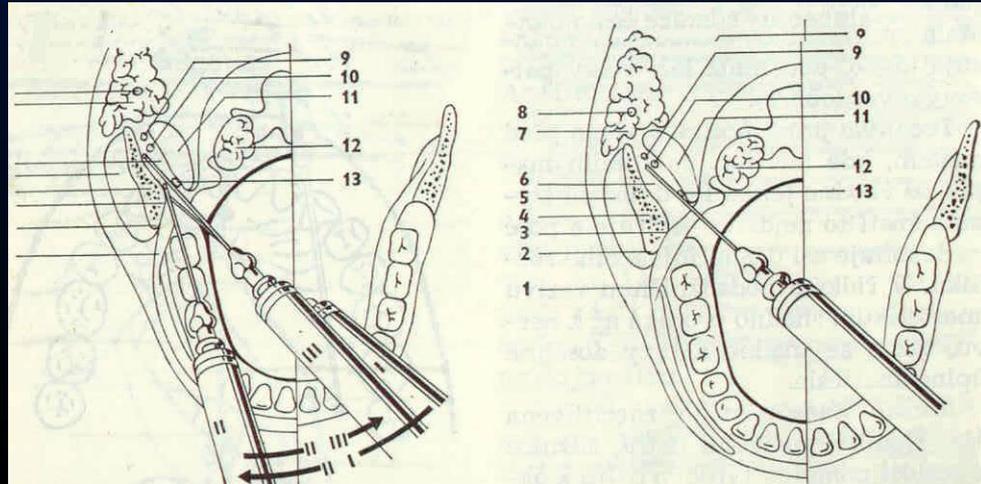


NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Indirect

Direct

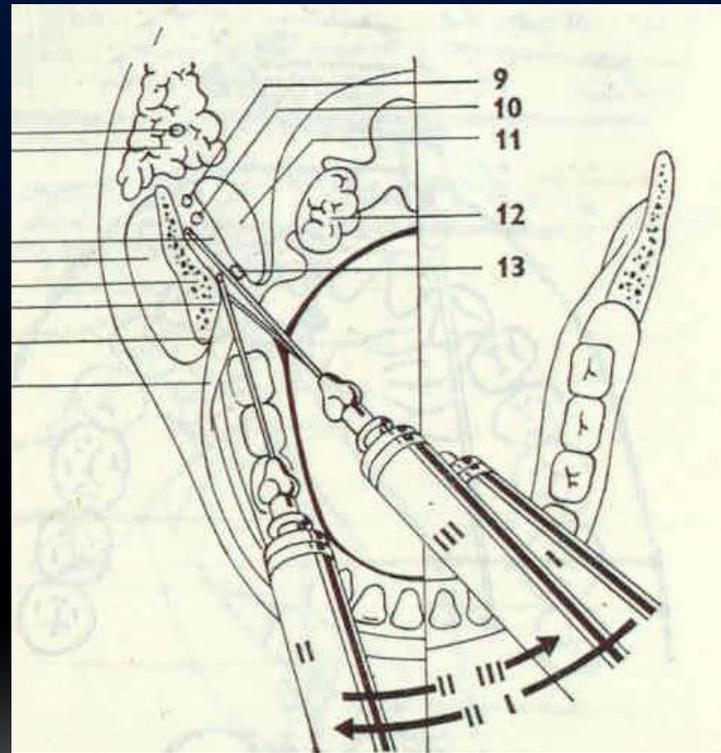


NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Indirect

Put the forefinger
on the occlusal surface
Rotate inside (nail inside)
1 cm up occlusal surface
the puncture is situated



NERVE BLOCK ANAESTHESIA

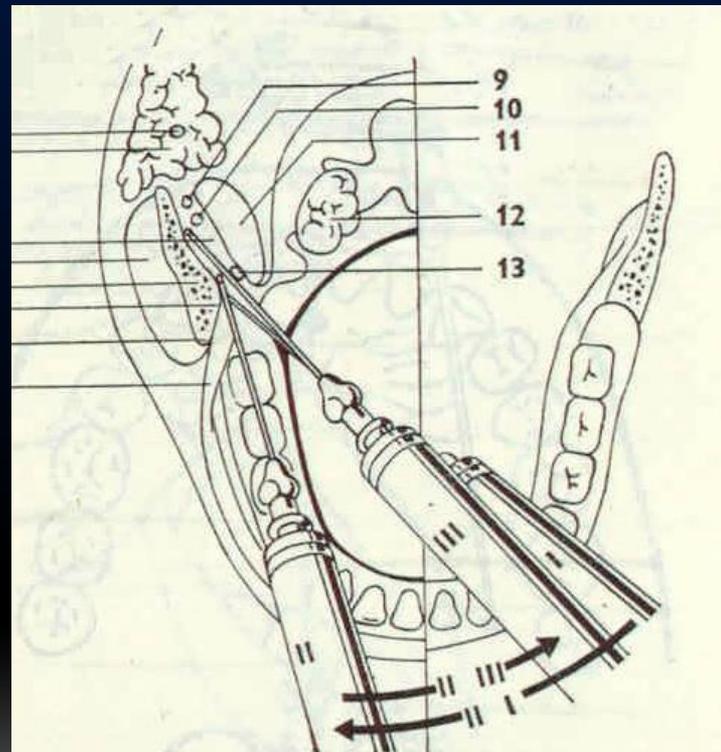
N. alveolaris inferior

Indirect

The syringe

on the opposite canine

The needle goes behind
the crista temporalis,



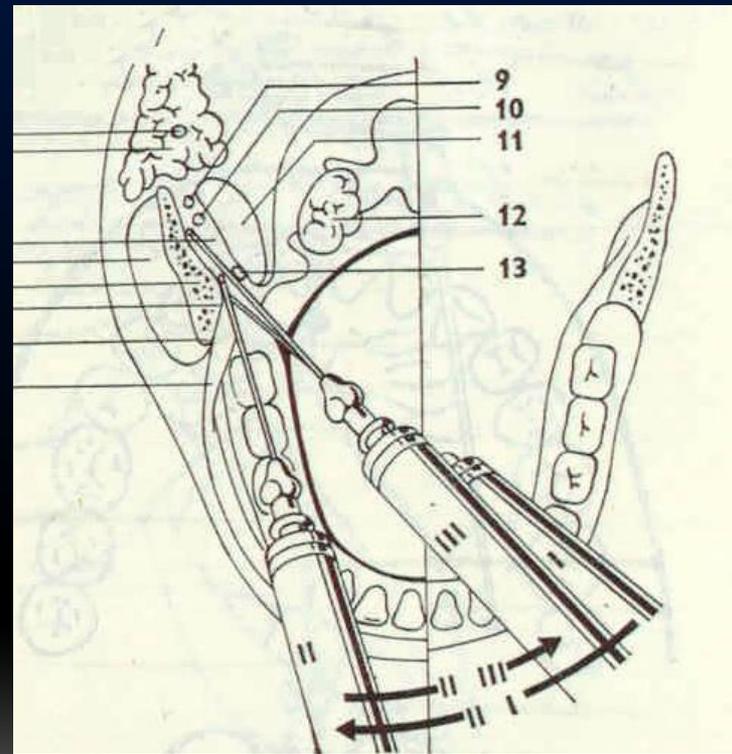
NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Indirect

The needle goes deeper
in the contact with the bone

The syringe goes mesial

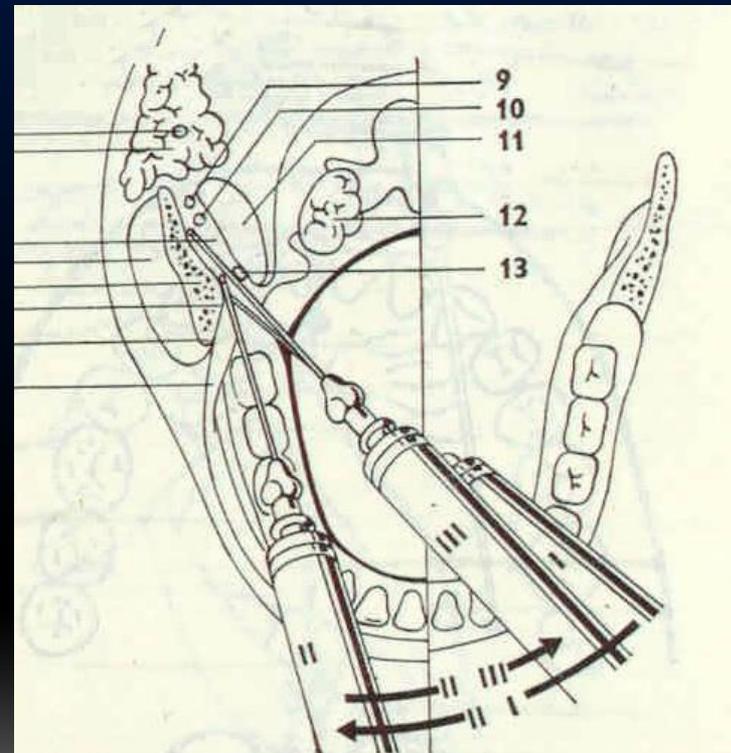


NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Indirect

3. The contact with bone is lost, the syringe goes back
Aspiration and a injection of the drug.

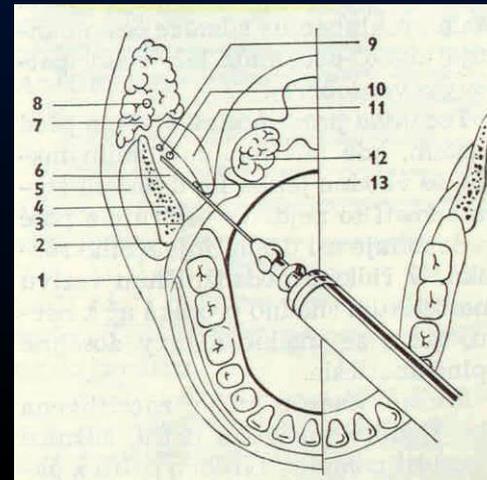


NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Direct

Put the forefinger
on the occlusal surface
Rotate inside (nail inside)
1,5 cm deep



NERVE BLOCK ANAESTHESIA

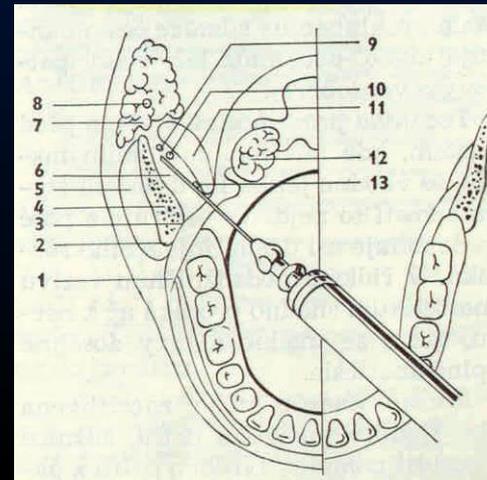
N. alveolaris inferior

Direct

The syringe on opposite
Premolars

(laterally of plica ptérygomandibularis, medially of
crista temporalis)

1,5 cm deep

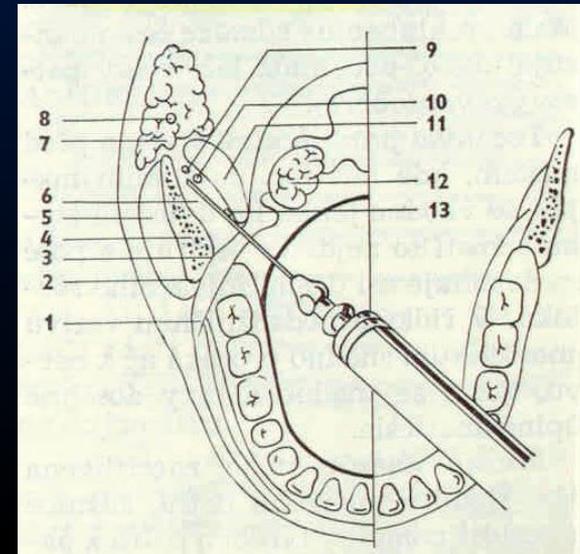


NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Direct

- The puncture at the same place
 - The syringe on opposite premolars
 - The puncture goes into the small pink depression medial from crista temporalis and lateral from plica prerygomandibularis
- 1,5 cm deep



NERVE BLOCK ANAESTHESIA

N. alveolaris inferior

Anaesthetic zone

Molars, premolars, mucosa, skin, bone, tongue

NERVE BLOCK ANAESTHESIA

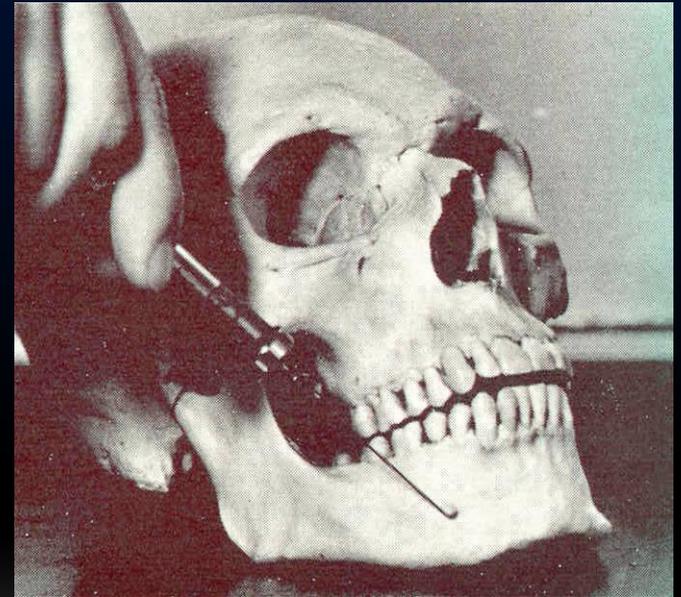
N. mentalis

F. mentale

The puncture is situated behind
the distal surface of 2nd premolar

The needle goes between
roots of premolars from up to down,
Forward and mesially

Anaesthetic zone: Premolars and canine,
mucosa, skin.



NERVE BLOCK ANAESTHESIA

Foramen palatinum majus – nervus palatinum majus

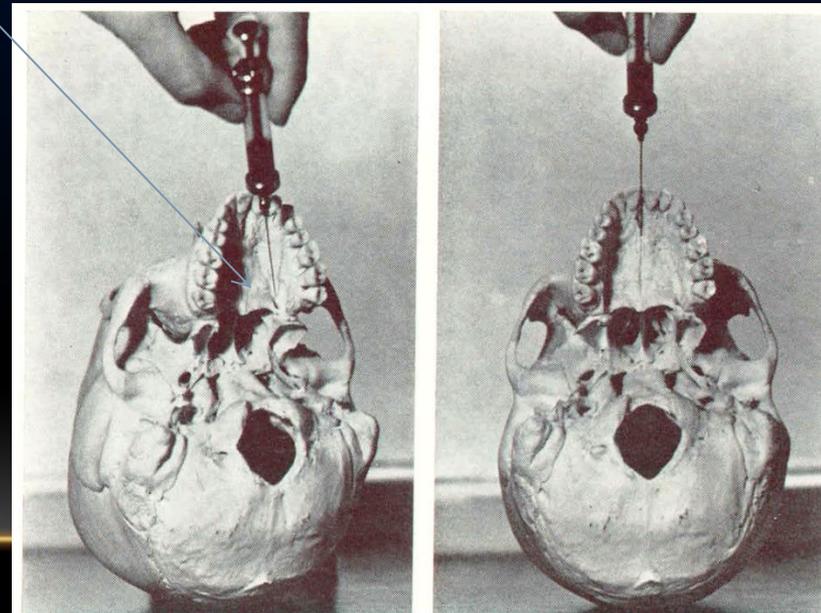
Distal surface of second molar

The puncture is

0,5 – 1 cm before

from behind forward

Anaesthetic zone: Half of palate



NERVE BLOCK ANAESTHESIA

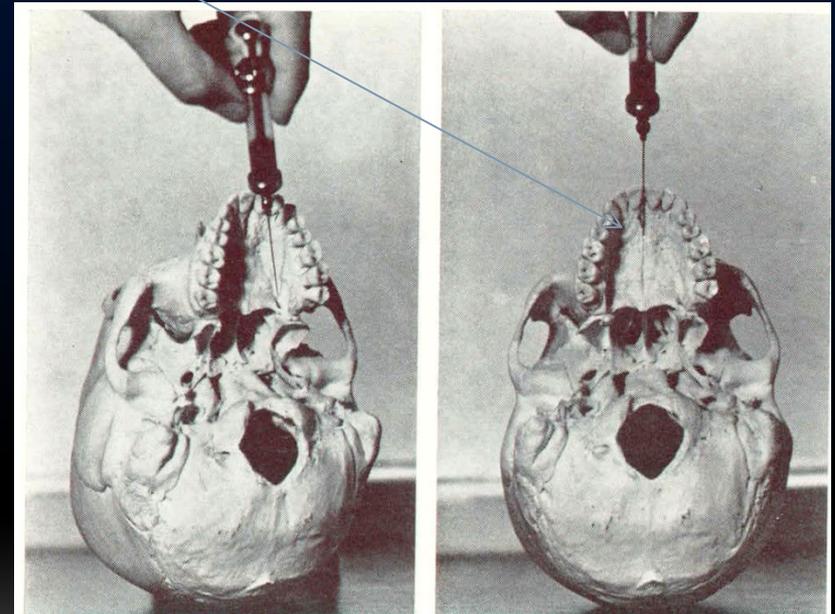
Foramen incisivum – n. nasopalatinus

Nervus incisivus

Papilla incisiva

Next to papilla,
mesial direction

*Triangular area
behind incisors*



ANAESTHESIA ON F. INFRAORBITALE

- Find the margo infraorbitalis
- Raise the lip
- The puncture is situated between canine and 1st premolar
- The needle goes to the region (appr 1 cm below margo infraorbitalis)

Anaesthetic zone: Canine and premolars

ANAESTHESIA ON TUBER MAXILLAE

- The drug is delivered on tuber maxillae
- The puncture is situated behind 2nd molar (distal surface), goes behind and upper around tuber maxillae.

Anaesthetic zone: Upper molars

PDL ANAESTHESIA

- Intraligamentary
- Special syringe (pen or gun) The needle is introduced into periodontal space – few drops on anaesthetic
- Indication: single extraction, preparation, pulp extirpation





Special gun



Anaesthetic

Needle



The puncture is between gingiva and tooth and goes into gingival sulcus

ANAESTHESIA - COMPLICATIONS

- Bleeding
- Breakage of needle
- Haematoma
- Allergy (swelling, collapse)
- *Patient's history is necessary!!!!*

INTRAPULPAL ANAESTHESIA

- Exstirpation of the pulp – additional step.

Directly into the pulp chamber

SUTURE

Suture material

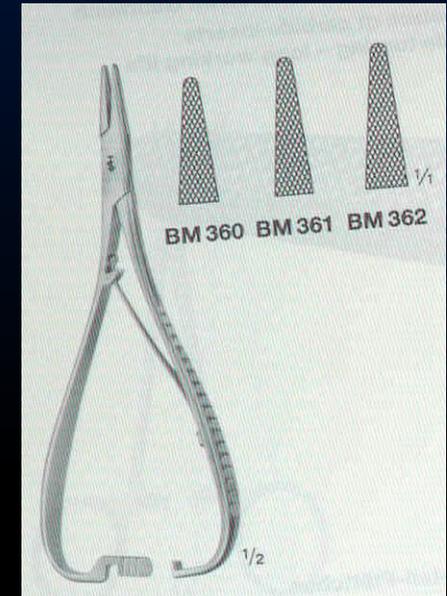
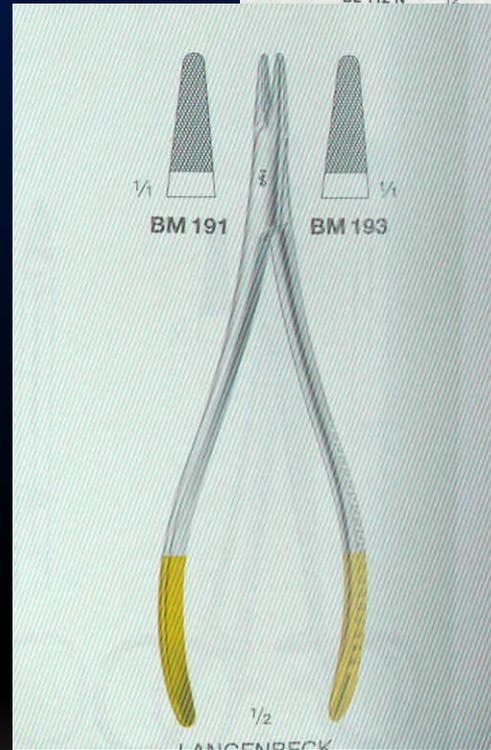
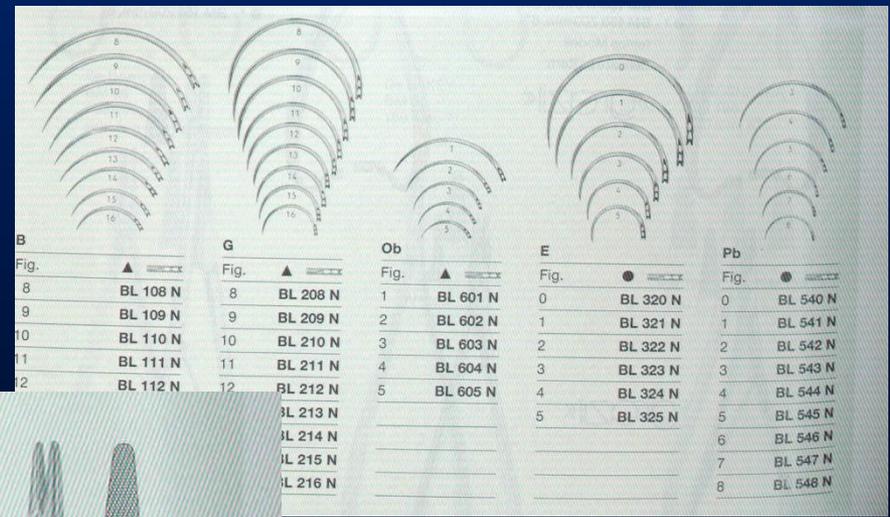
Silk, nylon

Needles

- bent, rounded
- straight

Needle holders

- autofix
- without fixation



SUTURE

Suture material

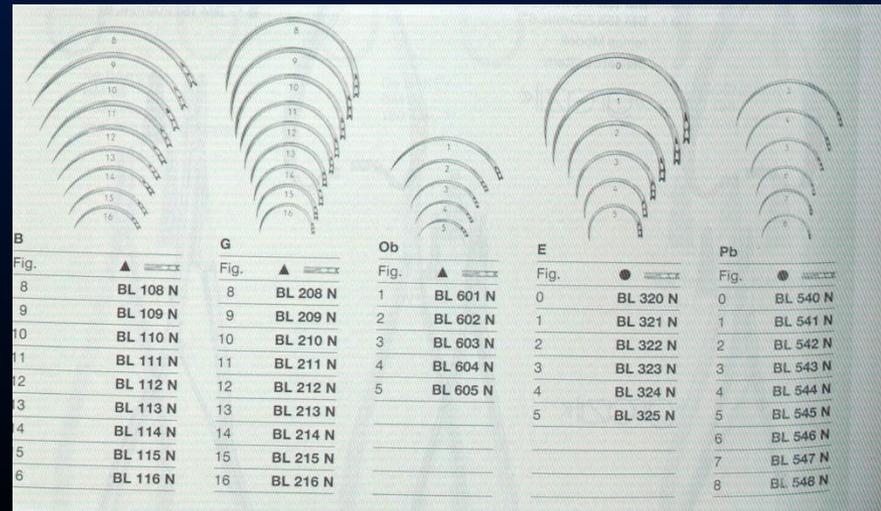
Silk, nylon

Needles

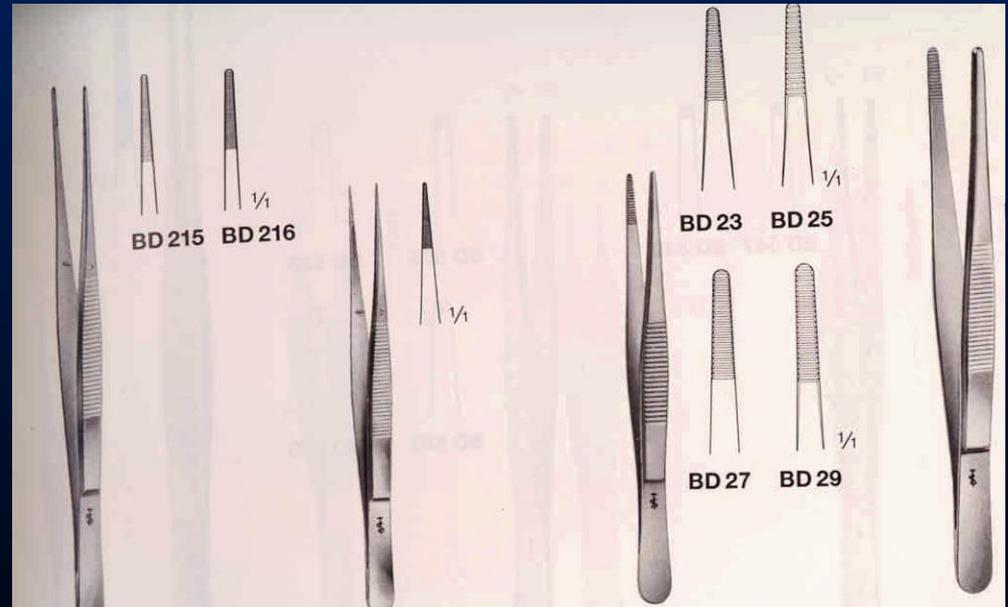
- bent, rounded
- straight

Needle holders

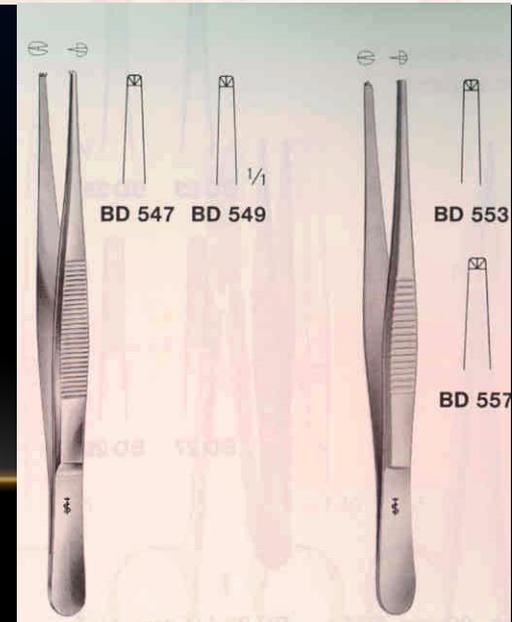
- autofix
- without fixation

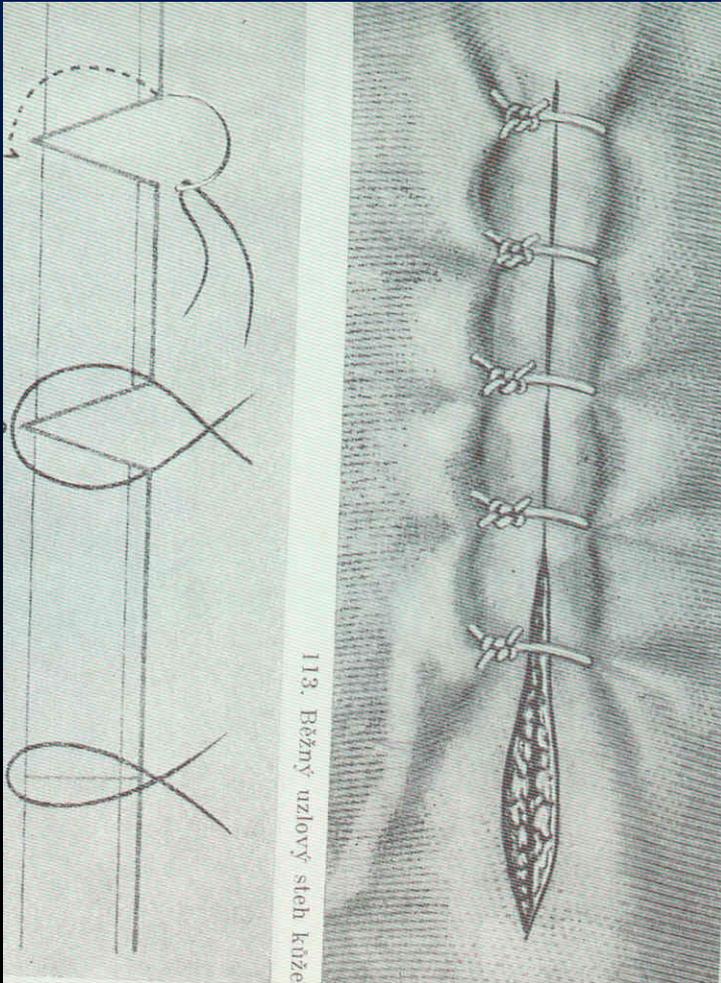


SUTURE

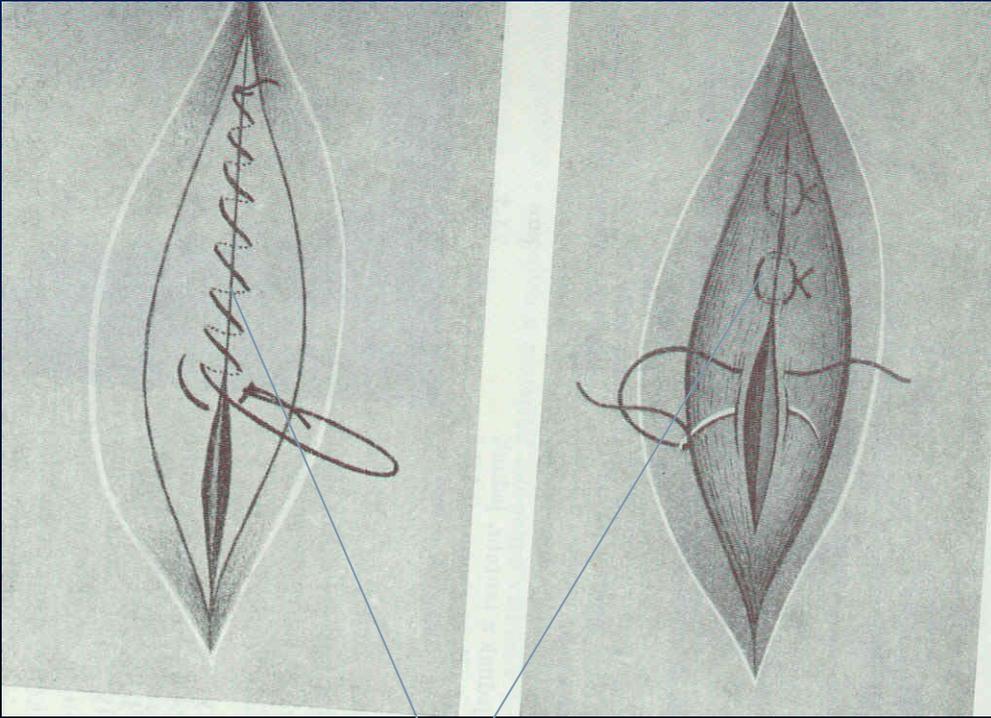


Tweezers – tissue forceps

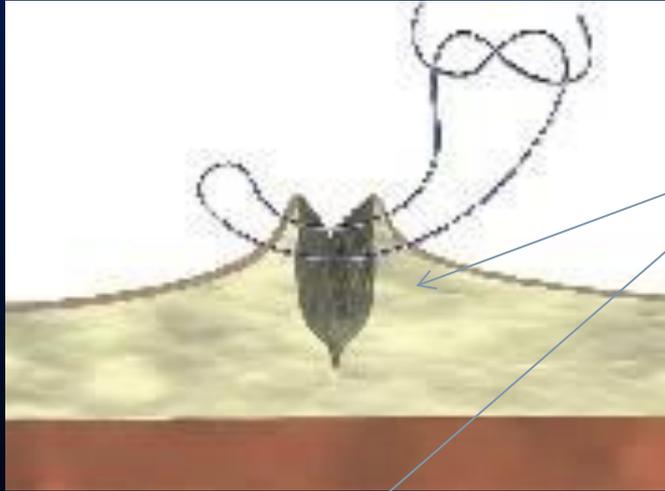




The puncture is situated appr. 2 mm from the border of the wound
In the same depth - opposite
The knot is out of the wound



Single suture
Coninuing suture



Mattress suture

Cross mattress suture

