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Discussion

Reconstruction of the Severely Atrophic Edentulous Maxilla Using Le Fort I Osteotomy With Simultaneous Bone Graft and Implant Placement

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It is a pleasure for me to see my method of reconstruction[1] used in the proper way, and I would like to congratulate the authors on their excellent results. From my point of view, it is very important to use bicortical blocks and insert the implants through both cortical plates. The most difficult part of the operation is the firm stabilization of the bone blocks during placement of the implants. It is much easier to do this if the bone graft has the form of a horseshoe, but it is very difficult to adapt this horseshoe to the different shapes of the nasal and sinus floor. The latter is very time consuming, but it gives excellent stability. If individual blocks are used one needs less bone and can use the thickest pieces for placement of the longest possible implants.

The residual alveolar bone height also plays an important part in the anchorage of the implants, but not the only one. In many of my cases there was practically no alveolar bone, and what was present was so thin that it broke during placement of the implants. In spite of this, the implants became osseointegrated. When I look at my series of reconstructions of the maxilla after hemimaxillectomy or total maxillectomy, it is surprising that those implants placed directly into the iliac bone grafts were usually integrated even though there was no residual maxillary bone existing! There also must be other reasons (for instance smoking) when there is implant loss in some patients; this is addressed in the series presented by Li et al, who had three patients in whom practically all of the implants were lost.

This operation is difficult to perform, and only those experienced in the field of orthognathic surgery and conventional reconstructive preprosthetic surgery should perform it.

Reference

1. Sailer HF: A new method of inserting endosseous implants in totally atrophic maxillae. J Craniomaxillo Fac Surg 17:229, 1989