

# بسم الله الرحمن الرحيم



**HOSSAM MAGHRABY**



# شبكة المعلومات الجامعية التوثيق الالكتروني والميكرو فيلم



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# جامعة عين شمس

## التوثيق الإلكتروني والميكروفيلم

### قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها  
على هذه الأقراص المدمجة قد أعدت دون أية تغيرات



## يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار

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# بعض الوثائق الأصلية تالفة



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بالرسالة صفحات

لم ترد بالأصل



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B1K445

**The role of Post-operative Maxillo-Mandibular  
Fixation in Reducing Relapses in Rigidly fixed  
Mandibular Angle Fractures  
(A Clinical Study)**

**Thesis**

**Submitted to the Faculty of Oral and Dental Medicine  
Cairo University. For partial fulfillment of the requirements of  
the Master's Degree in Oral Surgery**

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2004**

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# ***Dedication***

***To all mothers.***

***To the soul of my father.***

***To the soul of Shiekh Shaarawy.***

***To the soul of Dr. Gasser El Kasaby.***

***To Mohamed El Dorrah, Ayat Alakhras, and all Shahid.***

***To the mother of all shahid Omm Nedal.***

***To them all I dedicate this work and effort.***

***To them all I am very greatful that they teach me a lot.***

***To my son Alfarouk & my beloved wife Fatemah.***



# **Acknowledgement**

I am grateful to **Dr. Ahmed Roshdy Ragab**, Professor of Oral Surgery, Faculty of Oral and Dental Medicine, Cairo University for his scientific supervision that enabled me to accomplish this study.

I will always be grateful to **Dr. Ahmed Barakat**, Associate Professor of Oral Surgery, Faculty of Oral and Dental Medicine, Cairo University, for his greet help, valuable advises, continuous encouragement and scientific suggestions.

I am also grateful to all the staff members of the oral surgery department, especially **Dr. Hussien Al-Haj** for making all the facilities to accomplish my disposal.

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# Introduction & Review of literature



# **Introduction and Review of literature**

Mandibular fractures are among the most common injuries in facial trauma, the therapeutic outcome is evaluated on basis of re-establishment of premorbid anatomy, providing fracture stabilization and restoration of proper function.<sup>(11)</sup>

Fractures of the mandibular angle represent an important clinical challenge because their treatment is plagued with the highest post-surgical complication rate of all mandibular fractures.<sup>(37, 79)</sup>

Mandibular fractures can be classified according to the anatomical location and characteristics of the fracture, they can occur as unilateral or bilateral and involve the symphyseal, body, ramus, angle, condyle, coronoid and alveolar processes, either singly or combined.<sup>(12, 37)</sup>

Another important factor that may alter the treatment options is the favorability of the fracture, which might be in horizontal or vertical plane. Favorability of the fracture line plus the magnitude and the direction of the original trauma together with the muscle pull greatly control the displacement of the fractured bone ends.<sup>(34, 69)</sup>

The fracture is judged favorable or not, based on the direction of the fracture line as viewed in radiographs, a horizontally favorable fracture resist upward displacement such as the pull of masseter and