

Oral Surgery Club of Great Britain
Meeting at the University of Ferrara, Italy – May 9th and 10th 2013

The Oral Surgery Club was welcomed to the University Hospital by Professor Luigi Clauser. He is the Chair of the Unit of Cranio Maxillofacial Surgery at the University Hospital of Ferrara. This is a modern facility approximately 5km outside the walled city of Ferrara.

The Club was accommodated in hotels essentially around the main square of Ferrara where the old castle is situated, in this world heritage city.

The introduction from Professor Clauser welcomed the Oral Surgery Club of Great Britain and explained that the concept of his unit was anyhow, anytime, any language. In addition to Professor Clauser's welcome we all had welcome speeches from Gabriele Rinaldi who is a General Manager of the Hospital. Antonio Pastore the head of the Unit of ENT Head and Neck Surgery, also welcomed the club to Ferrara.

The first lecture was delivered by Professor Luigi Clauser and entitled 'An Introduction to Craniofacial Surgery'. Professor Clauser had worked with Paul Tessier and he described his career as either BT (before Tessier) or AT (after Tessier). He introduced the scope of his practice, which included craniofacial surgery and tumour surgery and also gave some demonstration of the use of fat grafting to enhance the effects of surgery around the face. He also had introduced Pizeosurgery into his practice which he considered was important in the control of intraoperative bleeding.

The live surgery on the first day was a case of severe craniofacial trauma. The patient had a Le fort III fracture on the right and a Le fort II fracture on the left. There was involvement of the frontal bone and frontal sinus, both the anterior and posterior walls with a fracture of the right temporal bone. The right orbital floor and roof were both fractured as was the left orbital floor. There was air within the brain and a subdural haematoma. In addition the patient had fractured distal radii.

We were able to watch the repair of the facial fractures including canalisation of frontal sinus throughout the morning via video link from the operating theatre to the lecture theatre.

In addition to the presentations from the University Ferrara members of the Oral Surgery Club of Great Britain were invited to give short presentations to educate both our hosts and our members.

Austen Smith from Sheffield gave a presentation called 'Importing blood to the brain'. He discussed his involvement in Sheffield of more than twenty cases of vascular bypass of the external carotid to the circle of Willis. He was able with CT navigation to provide a limited occlusion time of about 40 minutes to enable the management of tumours and aneurysms in this area. This is certainly an area of clinical practice which most Maxillofacial surgeons had no previous experience.

Doctor Manlio Galie presented a paper on 'Saethre-Chatzen syndrome', which is an autosomal dominant inherited craniosynostosis. We were due to see a case of this syndrome during the meeting but unfortunately the patient had to be cancelled due to a coexisting respiratory tract infection. Dr Galie showed the scope of the surgery for this craniosynostosis with a previously treated case.

Professor Luigi Clauser then gave a presentation on genioplasty. He prefers bony genioplasty rather than using implants but often used fat grafting around the genioplasty to enhance the results. He used two plates to replace the osteostomised chin but did discuss the augmentation of the

mandibular angle with implants. He introduced a concept of a profile plasty which was a more comprehensive procedure than just a genioplasty.

Following this Tim Mellor from Portsmouth gave a paper entitled 'Defining the jaw line in aesthetic surgery'. He discussed the concept of facial aging along and around the jaw line and correction by use of neck surgery and submental platysma plication along with facelift and or neck lift. He presented some of his results in this group of patients.

Following this Professor Luigi Clauser gave a presentation on 'The making of facial harmony: more than a bite'. He discussed the golden triangles of the face. The chin was a keystone of the facial structure. He emphasised it was important to have good mandibular angles particularly in men.

The final presentation was from Chris Penfold who gave a presentation on aspects of cleft surgery. He discussed lip repair and in particular some aspects of the Millard technique. He outlined the concept of nasoalveolar moulding which was common in the USA and required good parent cooperation because it was labour intensive but it has not caught on within the United Kingdom.

That evening we attended a function within the Medieval Castle in the Centre of Ferrara with pre dinner drinks and a typical Italian supper.

On the 10th May 2013 the members of the club reconvened at the St Anna Hospital Educational Centre whilst our partners were taken to a pasta making day outside of the town.

The first presentation was by Professor Luigi Clauser who presented an introduction to endocrine orbitomy. He discussed the different schools of opinion about how this should be accomplished. He believed that there should be both bony decompression and fat decompression in this group of patients. This was a synergy concept of orbital decompression and this surgery.

A small osteotomy is performed above the infra-orbital nerve in the orbital rim and then through a trans nasal approach the medial orbital wall is removed under direct vision with the help of ENT surgery. We were able to watch a case from the operating theatre transmitted into the lecture hall.

Following the surgical case and lunch the afternoon consisted of further presentations. Barrie Evans kicked off with his description of exploring the deep orbit and the ability to undertake safe orbital surgery. He emphasised that the so called safe distances have no relevance to the disrupted orbit and that the sub-periosteal plane only remained in low impact trauma. He emphasised the reliable land marks in the inferior orbit.

The next presentation was delivered by Riccardo Tieghi who discussed complex orbital zygomatic injuries. He explained that at the University they used Colman fat transfer to smooth some of the irregularities which remained. He went on to discuss piezoelectric bone surgery which is a very precise method of cutting bone using ultrasonics. They believe that healing was better because of the precise nature of the cut.

Stuart Hislop from the west of Scotland then discussed the aesthetic considerations in trauma surgery. He discussed aesthetic incisions using pre-existing scars and using the scalp incision for coronal approaches. He uses an upper blepharoplasty incision for access to the zygomaticofrontal suture and transconjunctival and lateral canthotomy for approach to the orbital floor.

The next presentation was from Professor Luigi Clauser and Riccardo Tieghi who discussed fat grafting in more detail. The source of the fat was often inside the knees and thighs in ladies. They

used negative pressure with a syringe and no suction. They centrifuged the fat for five minutes and then injected with no excessive pressure. They explained it was important to be very careful around the orbit because of the risk of fat embolism. They emphasised that in a craniofacial deformity you may need several procedures as a child grows, to get the best results.

Phil Earl from Worcester then gave a presentation about his involvement in professional football as a club doctor. An audit undertaken by the Football Association in 2002 showed that only 2% of injuries in footballers were to the head and face. His own series included 65 lacerations in a 23 year period. He converted to using staples without local anaesthesia in the acute situation to allow a player to return to the field as soon as possible. He gave information to players at the beginning of the season in order to gain written consent for managing their injuries as the season progressed.

The final presentation of the day was from Manlio Galie who discussed distraction osteogenesis. He gave a history of distraction starting with Ilizarov in 1972 through to modern approaches to distraction on the craniofacial skeleton. He emphasised that distraction was particularly useful in young children who were unable to feed or breath, such as in the Pierre Robin syndrome.

The final dinner was in the Duchessa Isabella in the centre of Ferrara very near to the Palazzo. We had an excellent dinner with many guests from the University and Professor Clauser presented the Oral Surgery Club of Great Britain with a large cake to celebrate our visit to Italy.