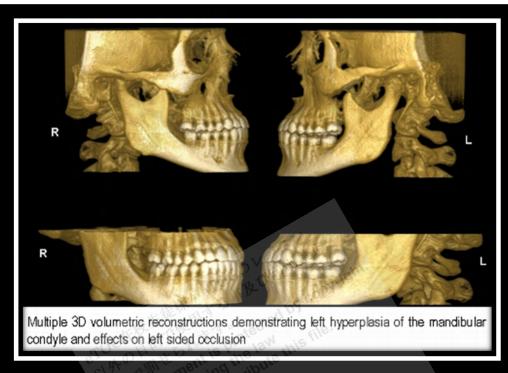
Condylar Hyperplasia



http://www.dmfiua.com/resources/ wsb 482x332 Slide8.PNG

Condylar hyperplasia is a disorder of unknown etiology characterized by persistent or accelerated growth of the condyle when growth should be slowing or ended. Growth eventually stops without treatment.

Slowly progressive unilateral enlargement of the head and neck of the condyle causes crossbite malocclusion, facial asymmetry, and shifting of the midpoint of the chin to the unaffected side. The patient may appear prognathic. The lower border of the mandible is often convex on the affected side. Chondroma and osteochondroma may cause similar symptoms and signs, but they grow more rapidly and may cause even greater asymmetric condylar enlargement.

Diagnosis

- Plain x-rays
- Usually CT

On x-ray, the temporomandibular joint may appear normal, or the condyle may be proportionally enlarged and the mandibular neck elongated. CT is

usually done to determine whether bone growth is generalized, which confirms the diagnosis, or localized to part of the condylar head. If growth is localized, a biopsy may be necessary to distinguish between tumor and hyperplasia.

Treatment

- During active growth, usually condylectomy •
- After growth cessation, orthodontics or surgical mandibular repositioning

Treatment usually includes condylectomy during the period of active growth. If growth has stopped, orthodontics and surgical mandibular repositioning are indicated. If the height of the mandibular body is greatly increased, facial symmetry can be further improved by reducing the inferior border.

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