

**8th CONGRESS
OF BALTIC ASSOCIATION
FOR MAXILLOFACIAL AND PLASTIC SURGERY**



**BALTIC ASSOCIATION
FOR MAXILLOFACIAL
AND PLASTIC SURGERY**

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Park Inn by Radisson Hotel
Kaunas, Lithuania**

ABSTRACT BOOK

significant impairment of masticatory

sent bilateral sagittal split osteotomy
or malunited fracture of mandibular
with previously undiagnosed fracture
main post-traumatic clinical symptom

panied with flexible intermaxillary
sks, an intensive temporomandibular
ited.

OF SALIVARY GLAND ENDARTERECTOMY ID ARTERY

orkina
ercity, RIGA, Latvia

st study of salivary gland exocrine
ry endarterectomy. Restored blood
salivary gland function, which can

endarterectomy effects on salivary
ation with the help of sialometry and
nd after 3–5 weeks after endarterec-

tion of carotid artery endarterectomy
y Hospital Department of Vascular
The control group is a potentially
ients were investigated by sialome-
saliva) and Doppler. Measurements
libularis to assess PSV – peak systolic
e, RI – residitation index, as well as
carotis communis PSV,EDV.

tid artery stenosis have an impaired
er endarterectomy, the salivary gland
l or improved.

Conclusions. The results of sialometry, as compared to the pre-
operative data of the patients, have improved or extreme saliva by an ave-
rage of $62.25\% \pm 46.05\%$, 26.12% to stimulate the ± 15.64 . Overall, the
improvement observed, the suggesting exocrine salivary gland function.

Carotid artery stenosis affects not only a brain function but also the
salivary gland function.

With the blood supply changes, there are also changes in intensity of
the salivary gland exocrine function.

After the carotid artery endarterectomy, the salivary gland exocrine
function improved.

EMBOUCHURE OVERUSE SYNDROME IN BRASS PLAYERS: THREE-DIMENSIONAL MRI IMAGING OF LIPS PAIN

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Study Objectives. To associate clinical symptoms with objective
radiological signs in embouchure overuse syndrome that is a common
and underestimated occupational disease in professional trombonists and
brass players.

Methods and Materials. We segmented (3D Slicer open source
software, SPL, Harvard medical school, Boston, USA) and three-dimen-
sionally reconstructed muscle orbicularis oris from 3 Tesla T1-weighted
isotropic MRI imaging (Philips, Eindhoven, Nederland) in two patients
who were professional trombonists with embouchure overuse syndrome,
and in one control patient which was not a trombonist player.

Results. We found a good correlation between three-dimensional
MRI imaging and pain symptom in both patients. We found a difference
in the intensity of T1 signal at the level of vermillion between normal and
embouchure overuse patient.

Conclusions. Three-dimensional MRI imaging of the lips gives
a possibility for the surgeon to modify the subjective and rather vague
patient complaint into objective imaging. However, more patients, and
more specific MRI protocols are needed to obtain a full evidence in using
3D MRI imaging of the lips as radiological diagnostic in embouchure
overuse syndrome.