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Management of Gnatodiaphyseal Dysplasia, a Systematic Review.

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Objectives to identify the dental and maxilla-facial management for patients with gnatodiaphyseal dysplasia (GDD) and propose guidelines for practitioners in their care.

Methods An electronic search on Pubmed, Cochrane and Embase databases attempted to inventory all relevant studies regarding dental and maxillofacial management. The search was also expanded to fibrous dysplasia (FD), a similar disease. Papers published in English or French were identified after a review of their titles, abstracts, and full text. The inclusion criteria were studies measuring the dental and/or maxilla-facial management of GDD patients. Studies with no full text available or on patients with oral cancer or oral radiotherapy

Results Only 12 studies were identified concerning GDD, 23 concerning FD. Management of osseous lesions and facial deformation had been surgical for 90% of patients treated for GDD. Monitoring and surgery of FD and GDD lesions depends on their stability and width and the age of the patient. For patients with GDD 59% of mandibular and 57% of maxillary rehabilitations of the loss of substance induced by the surgery was by a fibular or iliac graft. Success rate of the fibular graft at 9 months was 100% and it was 60% for the iliac graft at 6 years. 3 implant-supported prosthesis, 3 removable resin prosthesis and 1 obturator had been made for dental rehabilitation of patients with GDD.

Conclusions Dental and maxillo facial management of GDD has been few documented. Treatments are complex, multidisciplinary, and evolving with patient age and lesions.