

Orofacial anatomy

Anatomical aspects of odontogenic infections

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Illustrations:

Oral surgery (Fragiskos D. Fragiskos, DDS, PhD)

Regional anatomy (prof. Grim)

Atlas of Human Anatomy (Netter, MD)

Anatomie I, II, III (prof. Čihák)

Orofacial infections

- Infection of tissue surrounding alveolar process and jaw
- Typically polymicrobial infections
- Severity depends on type of infection, localization and patient's health status
- Spreading may lead to life-threatening conditions
- **Etiology:** **odontogenic**, trauma, fracture, salivary gland or lymph node lesions, iatrogenic, periimplantitis
- **Clinical manifestations:** dolor, tumor, rubor, calor, functio laesa (**pain, swelling, redness, heat, loss of function**), **contracture, fatique, fever, dysphagia**

Orofacial infections

- **Odontogenic causes:**
 - Periapical, periodontal, dry socket, periimplantitis, pericoronitis...
- **Spreading:**
 - Per continuitem
 - Lymphatic vessels
 - Blood borne

This presentation is focused
on odontogenic infections

Importance of anatomy?

Tooth localization

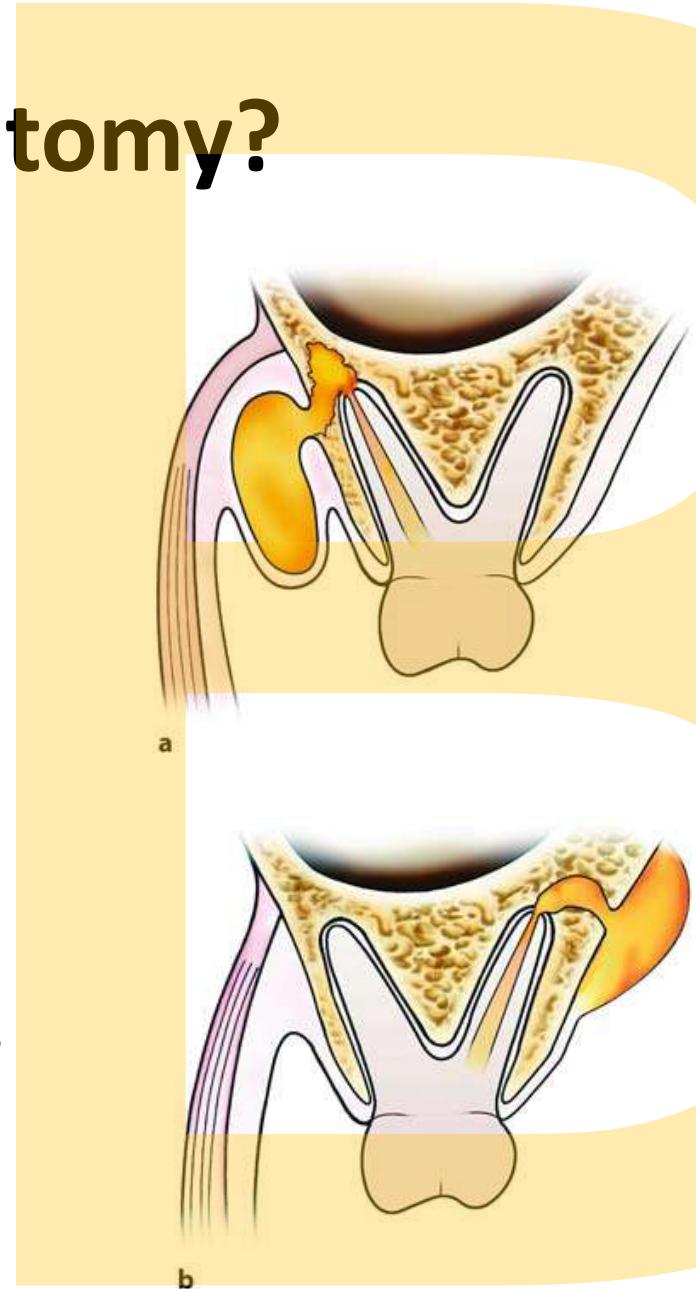
- Localisation of focus of infection

Borders of anatomical regions

- Ways of spreading

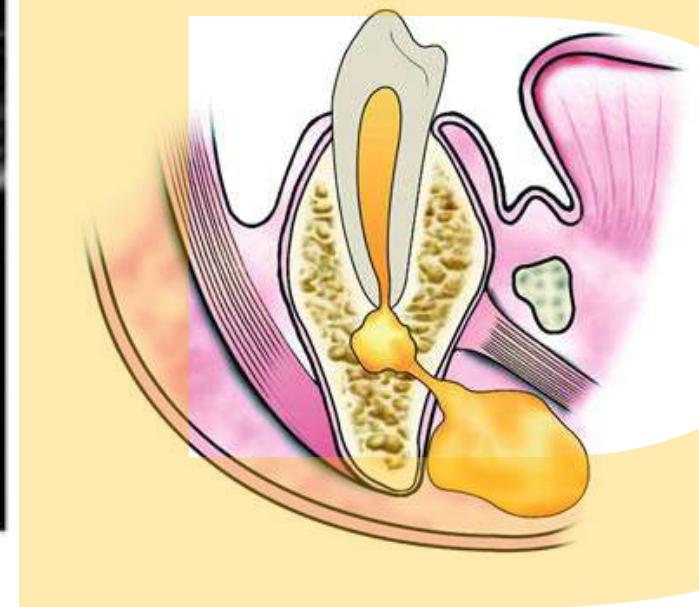
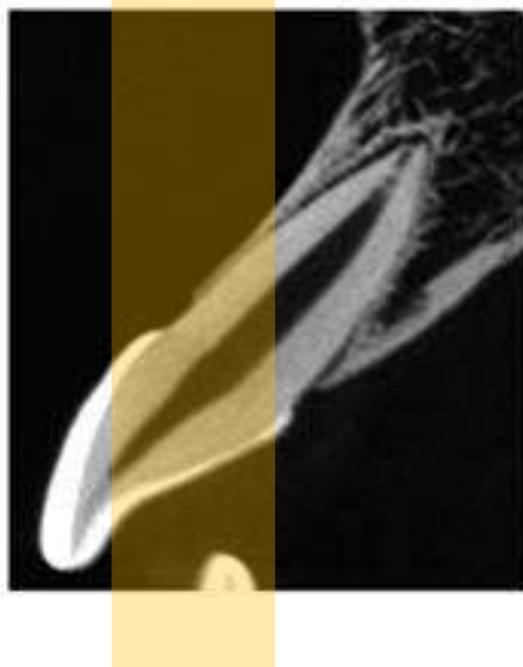
Treatment

- Access, important anatomical structures



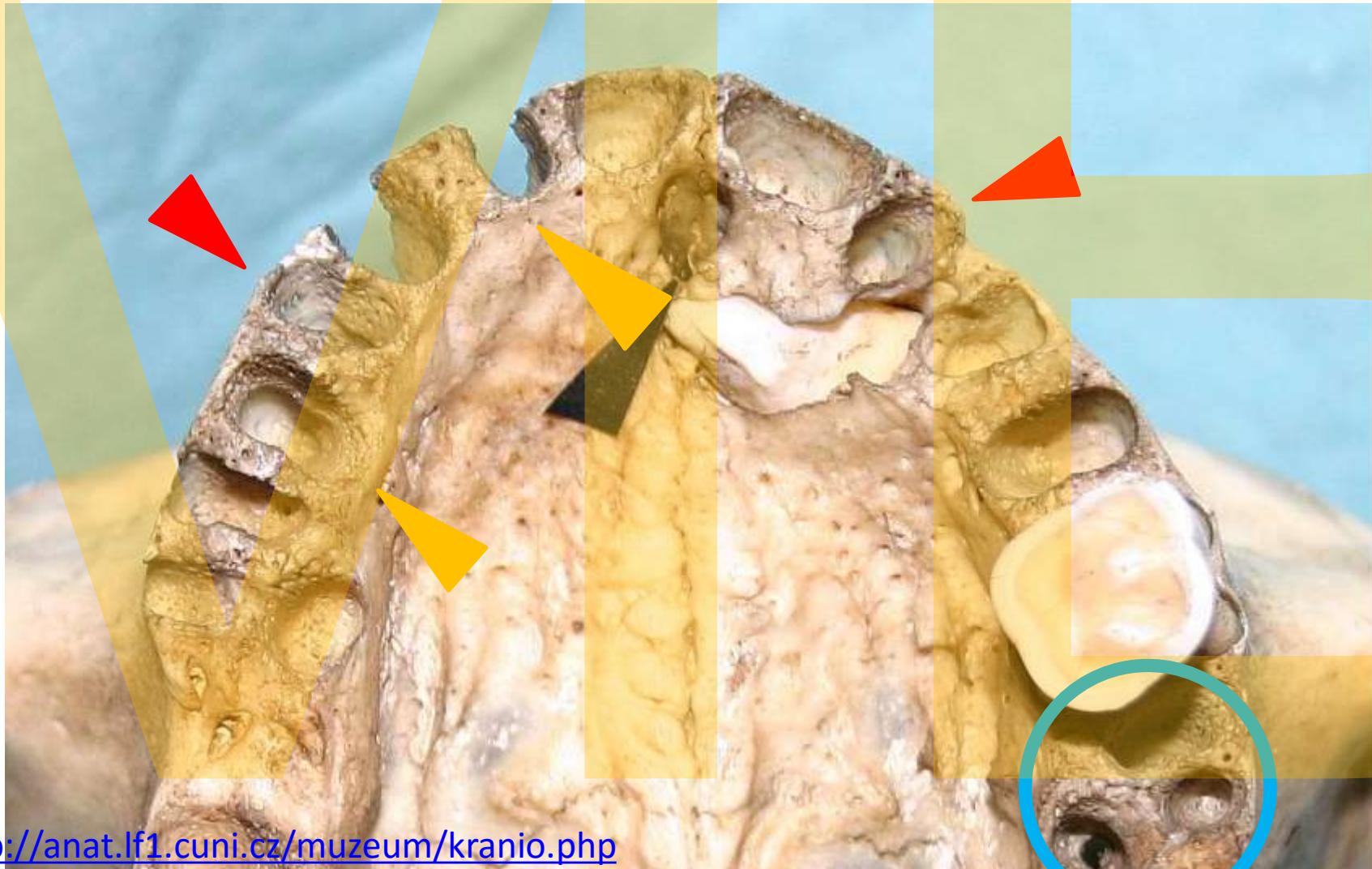
Tooth anatomy and its position in alveolar process

- Number and orientation of roots?
- Thickness of surrounding bone?



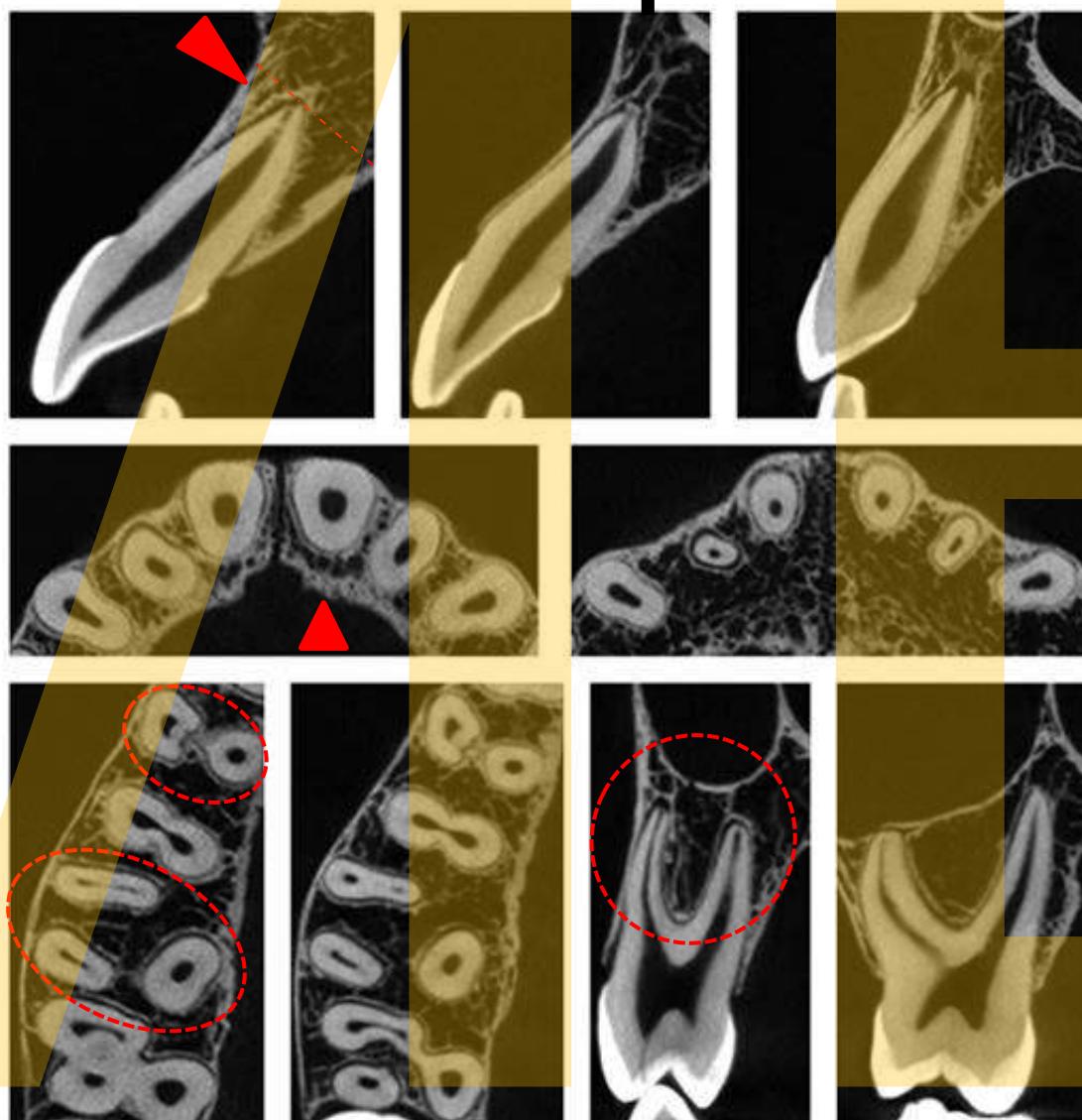
Tooth anatomy and its position in alveolar process

- Thin vestibular compact bone
- Thicker bone palatally
- Roots position



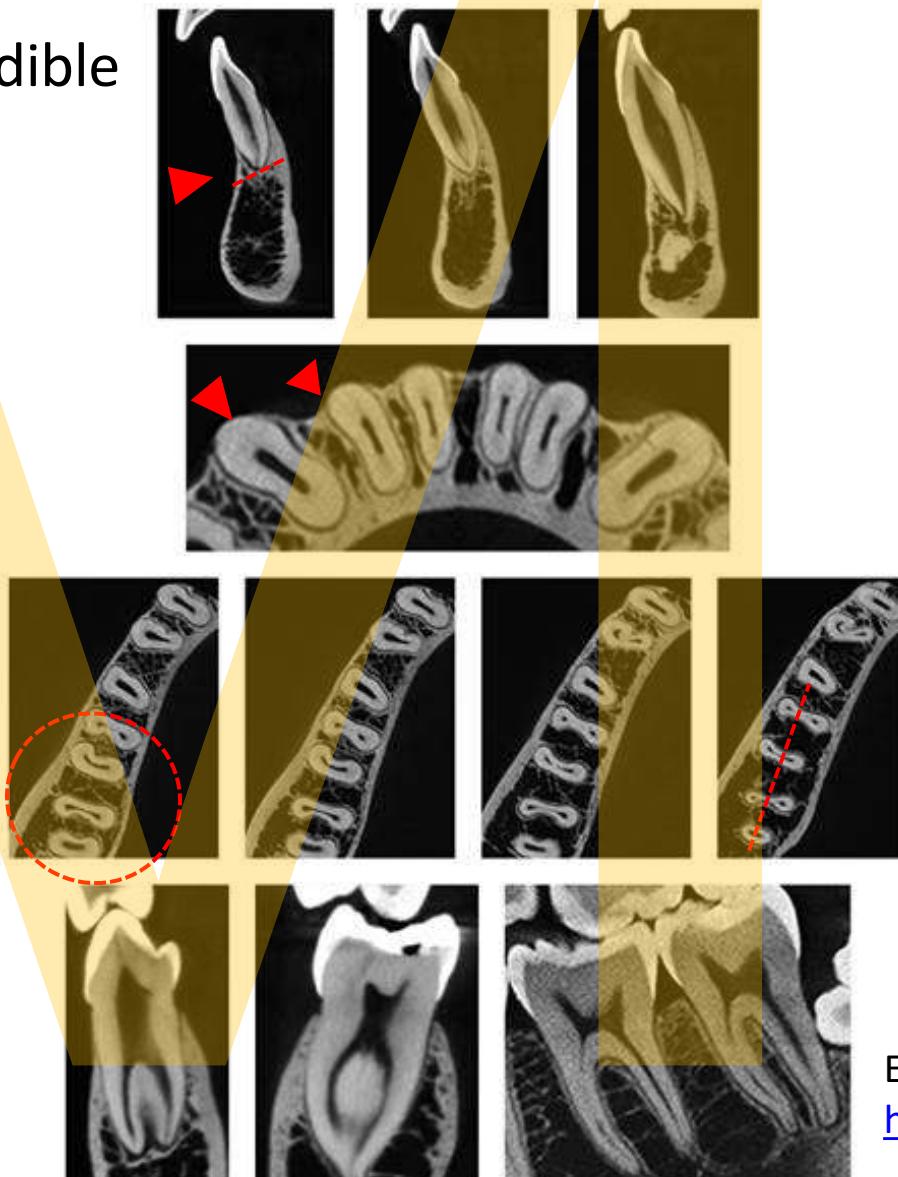
CBCT: tooth anatomy and its position in alveolar process

Maxilla



CBCT: tooth anatomy and its position in alveolar process

Mandible

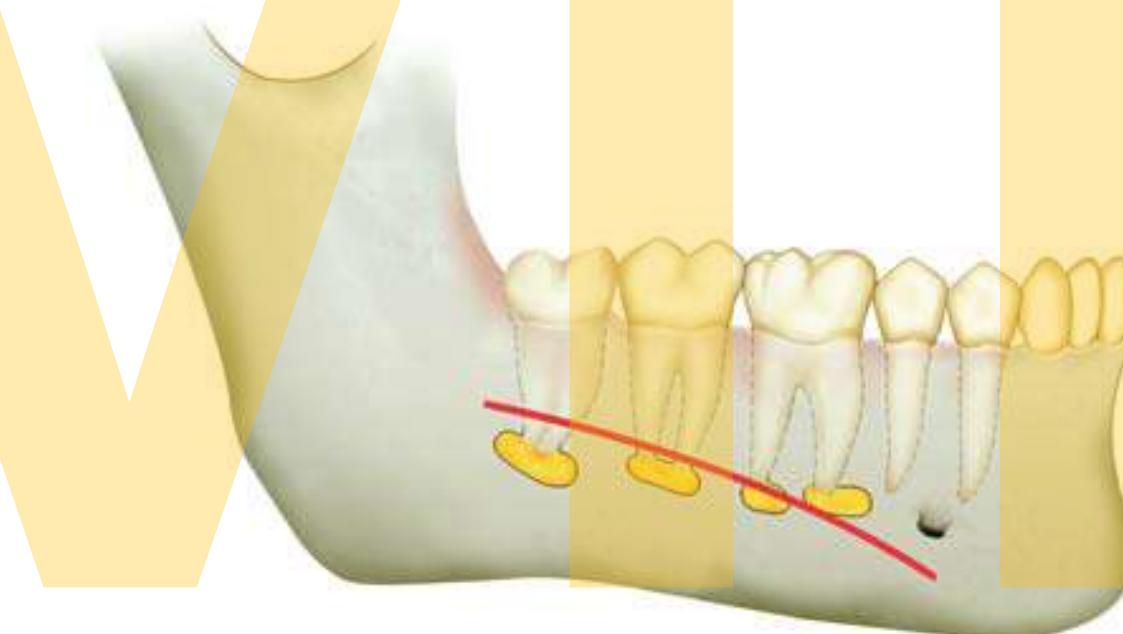


Distal molar roots are
More lingually

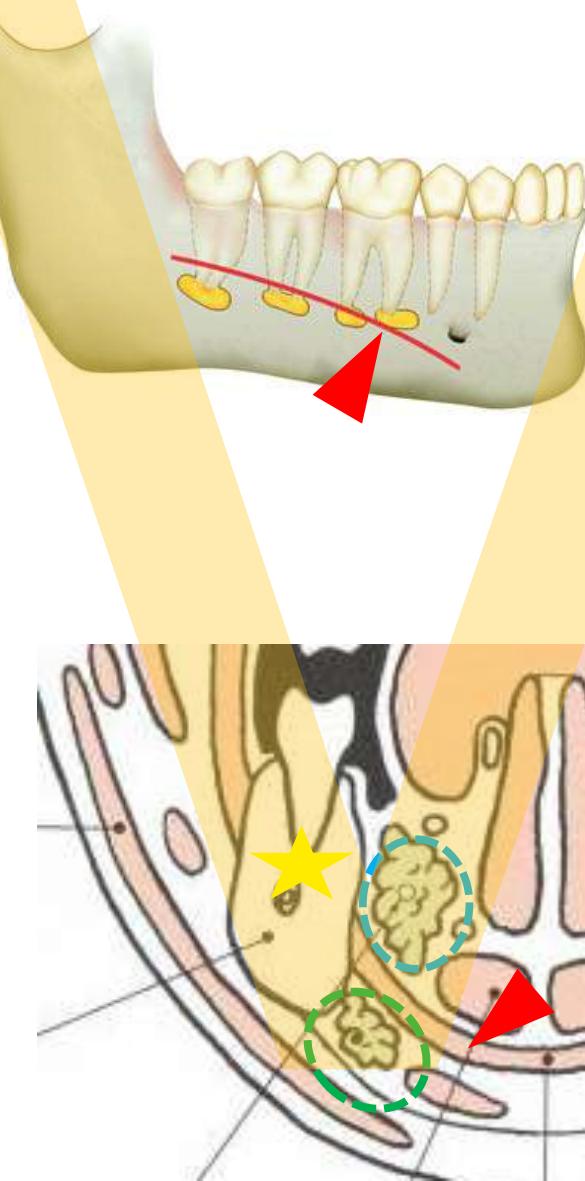
Estrela C et al., 2015,
<https://doi.org/10.1590/0103-6440201302448>

Anatomical borders and muscle insertions

- Muscle insertions forms borders in many anatomical regions
- e.g.: *m. mylohyoideus* insertion on *linea mylohyoidea*
 - separation of sublingual and submandibular space
- Spreading of the infection between muscles



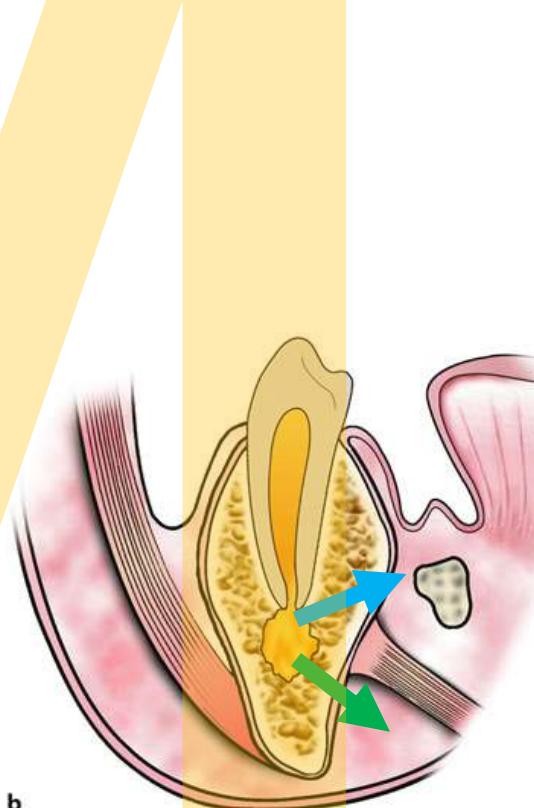
Anatomical borders and muscle insertions



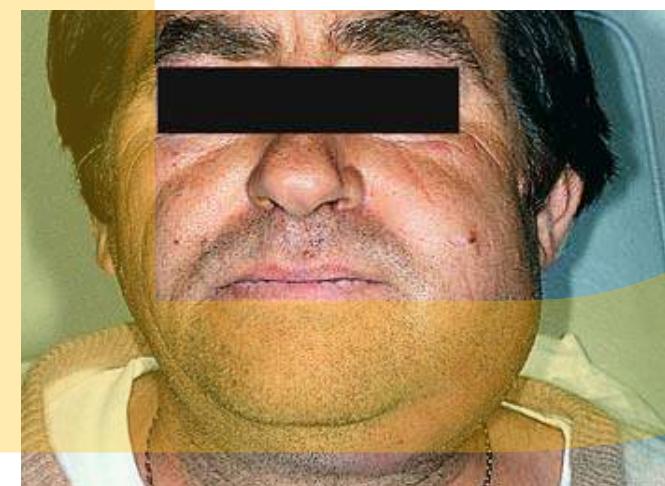
Sublingual space

m. mylohyoideus

Submandibular space



abscessus sublingualis

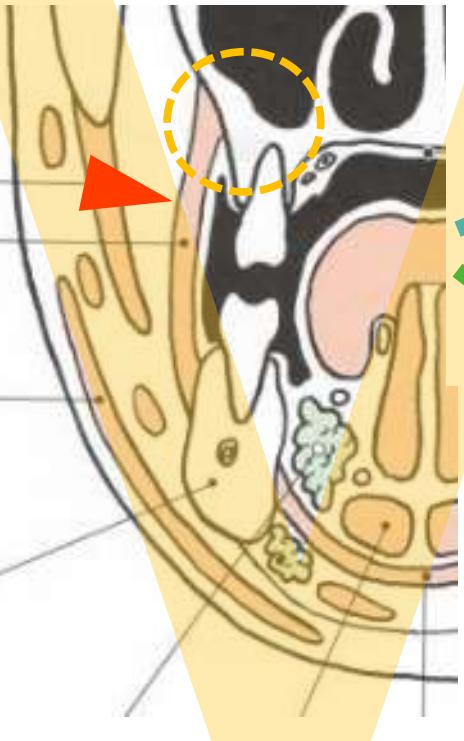


abscessus submandibularis

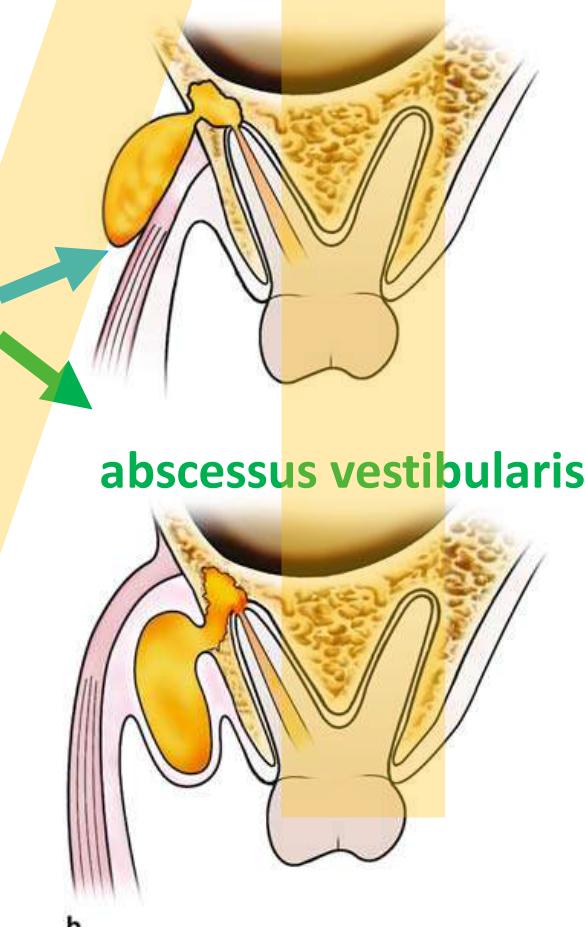
Anatomical borders and muscle insertions

- e.g.: insertion of *m. buccinator* – **relation to root apex**

m. buccinator



abscessus buccae

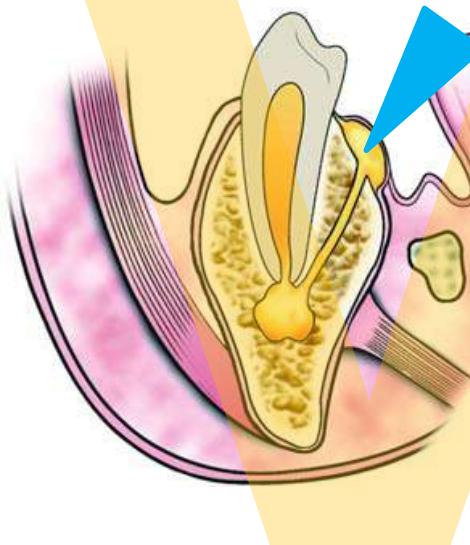


abscessus vestibularis



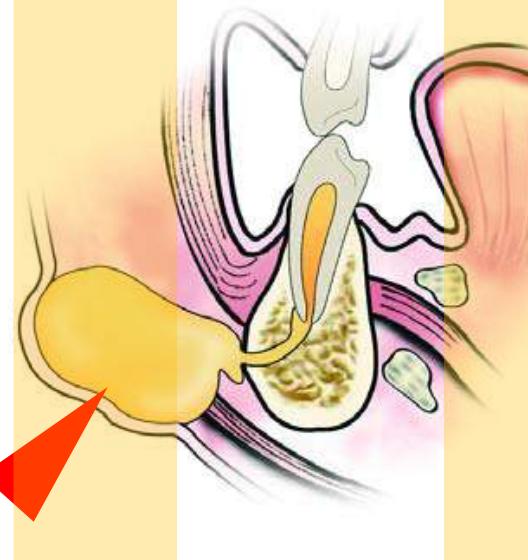
Anatomy and treatment

- Surgical intervention usually needed = incision and drainage
- Is there need for intraoral or extraoral incision?

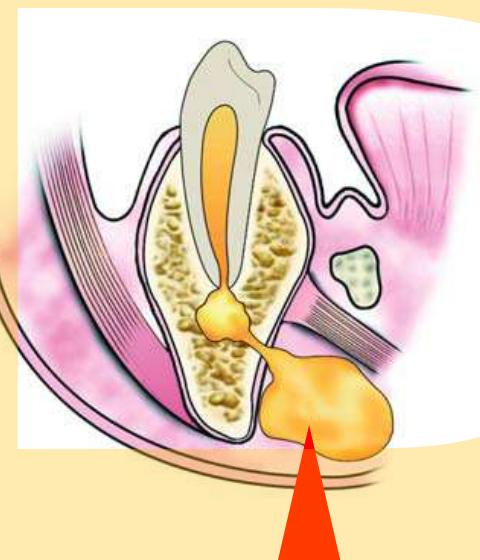


X

Intraoral incision

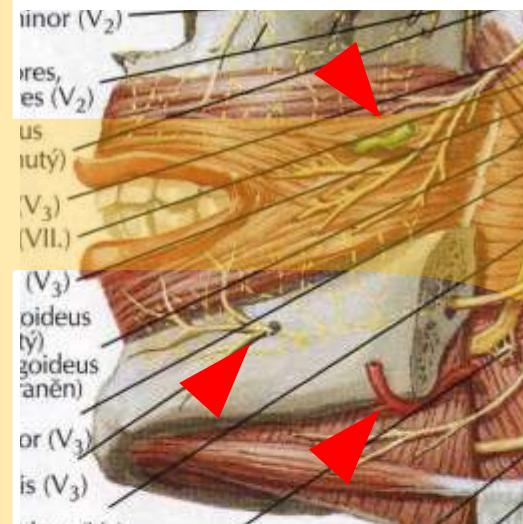
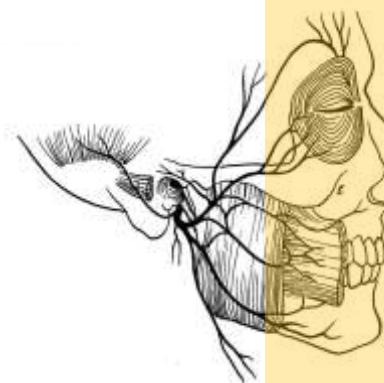
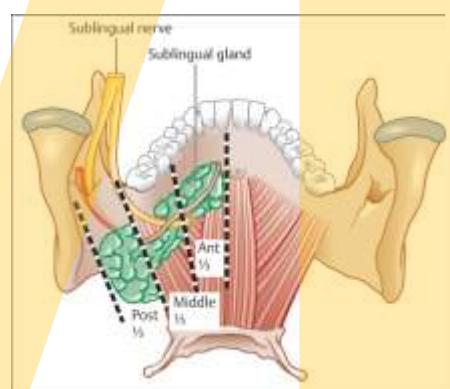


Extraoral incision



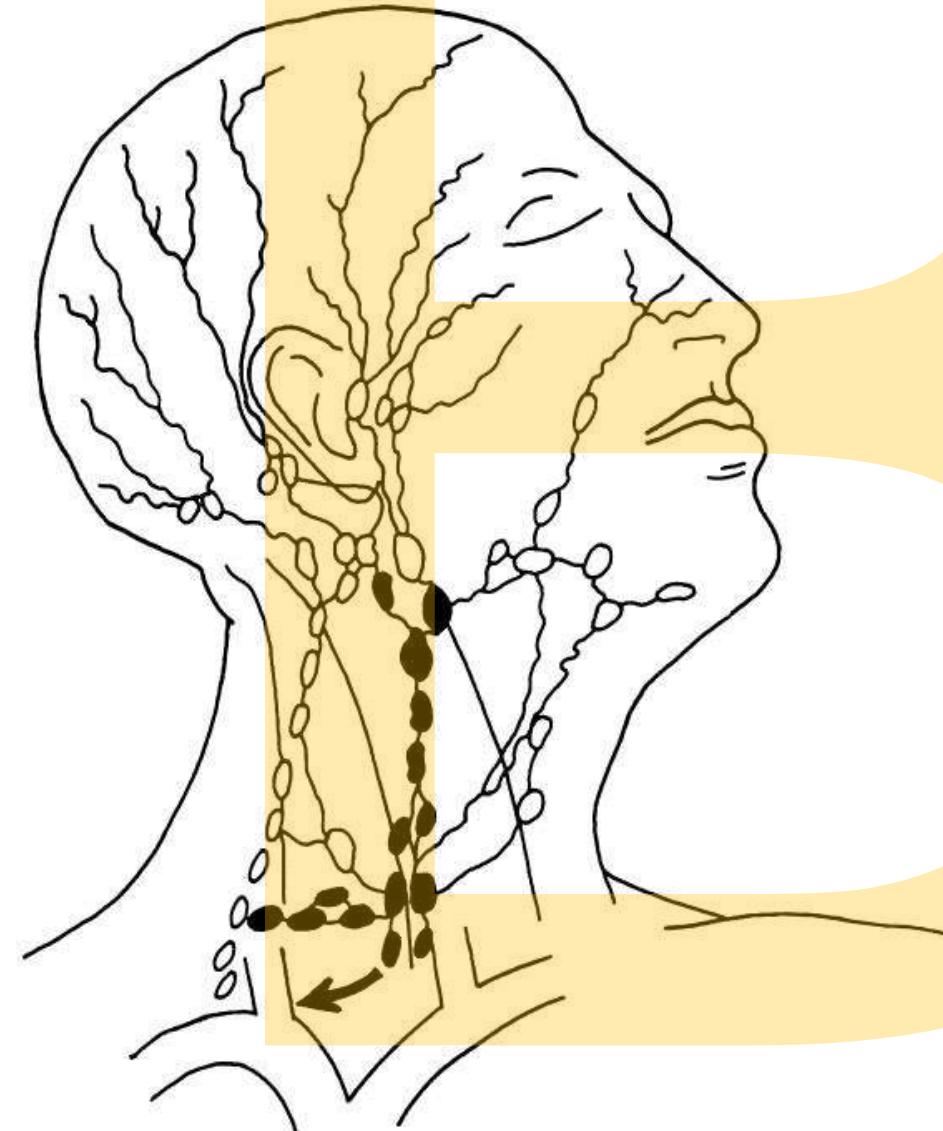
Anatomy and treatment

- Risk of traumatization of surrounding structures?



Lymphatic vessels and nodes

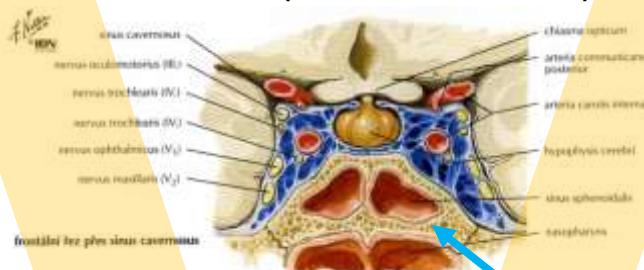
- Activation of regional nodes
- Infection spreading



Vascular supply - veins

- Possibility of infection spreading; incl. intracranial propagation

(*sinus cavernosus*)



sinus cavernosus

v. ophtalmica sup.

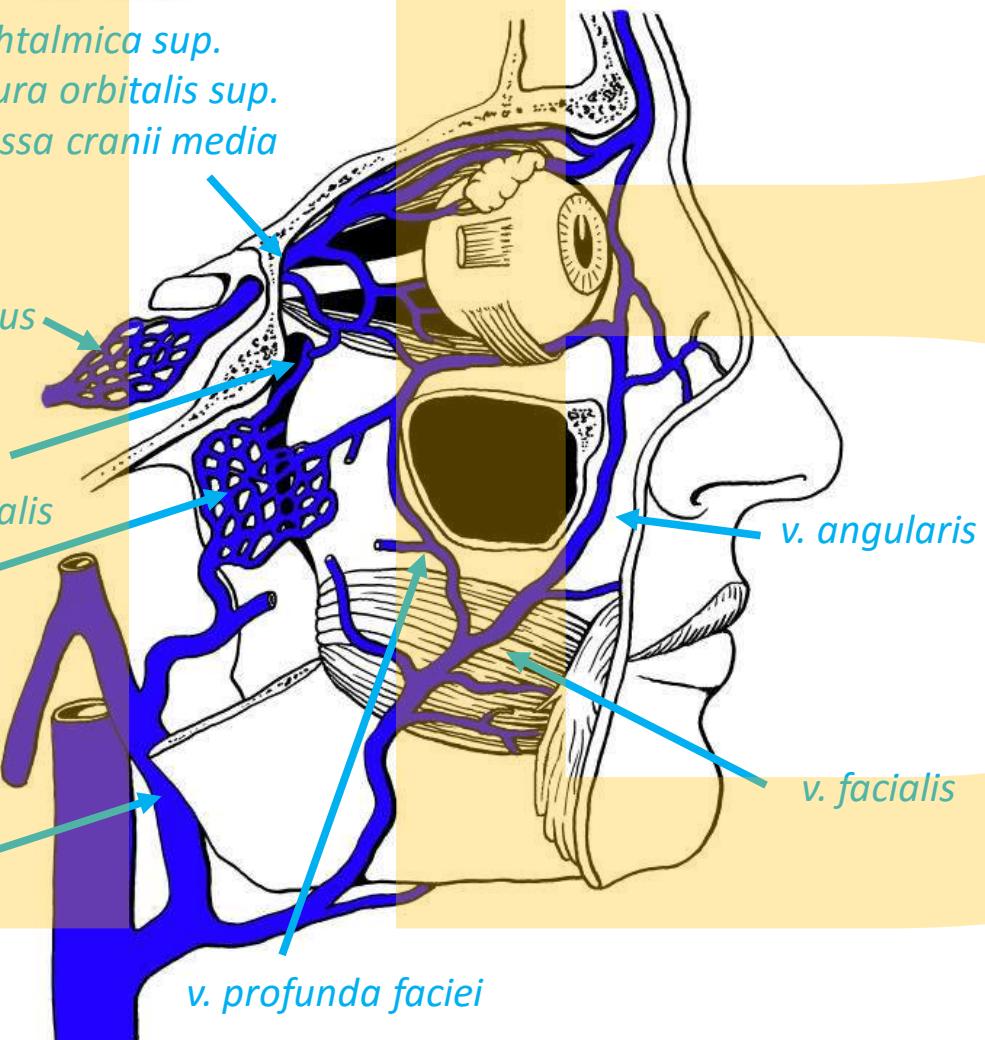
- *fissura orbitalis sup.*
do *fossa cranii media*

v. ophtalmica inf.

- *fissura orbitalis inf.*
do *fossa infratemporalis*

plexus pterygoideus

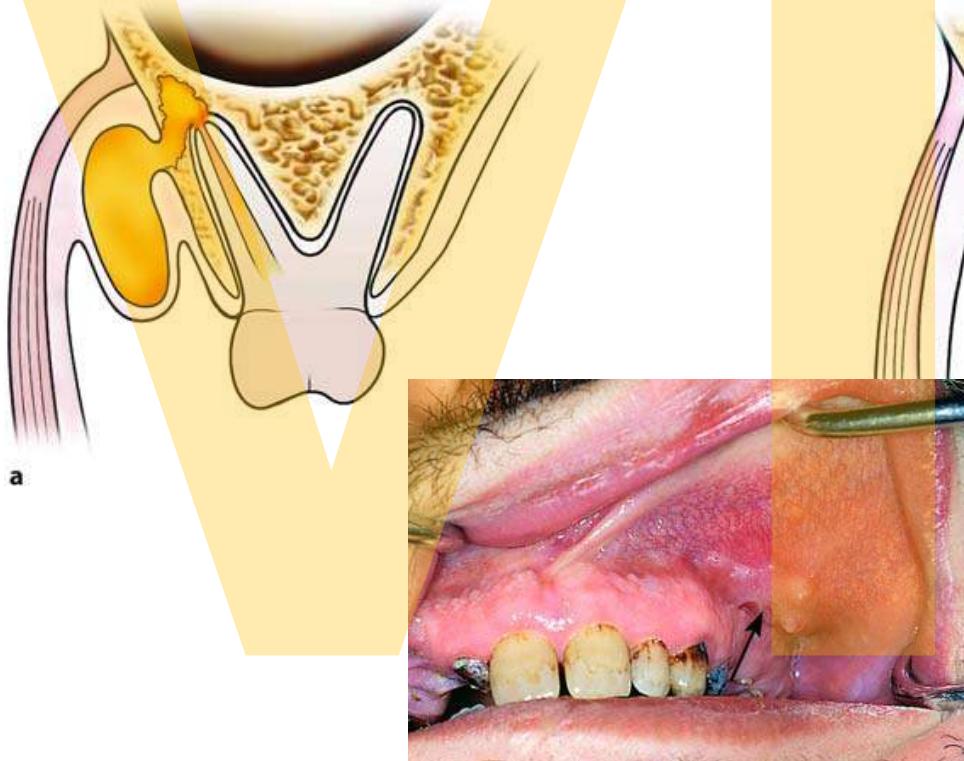
v. retromandibularis



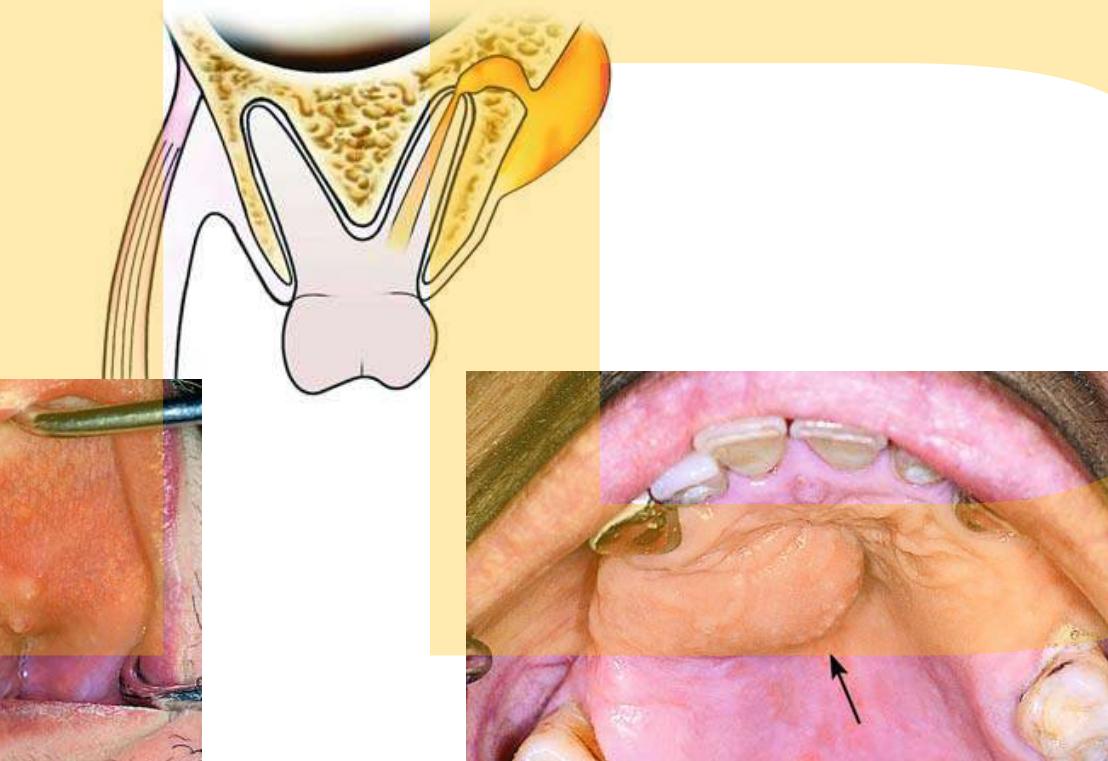
Maxilla

- Usually vestibular spreading – abscessus vestibularis
- Palatal roots – abscessus palatinus
- Possible spreading to *sinus maxillaris*

abscessus vestibularis

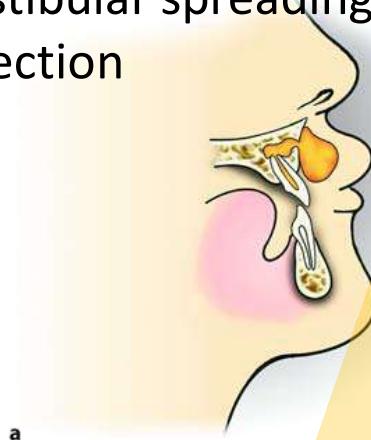


abscessus palatinus

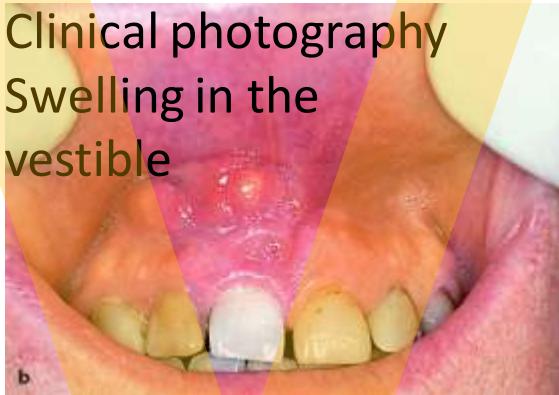


Abscessus vestibularis

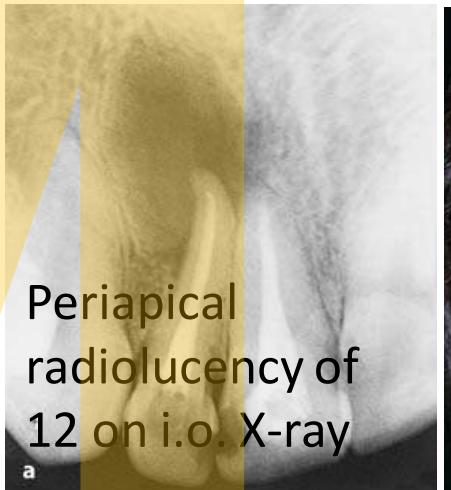
Vestibular spreading of infection



Clinical photography
Swelling in the vestibule



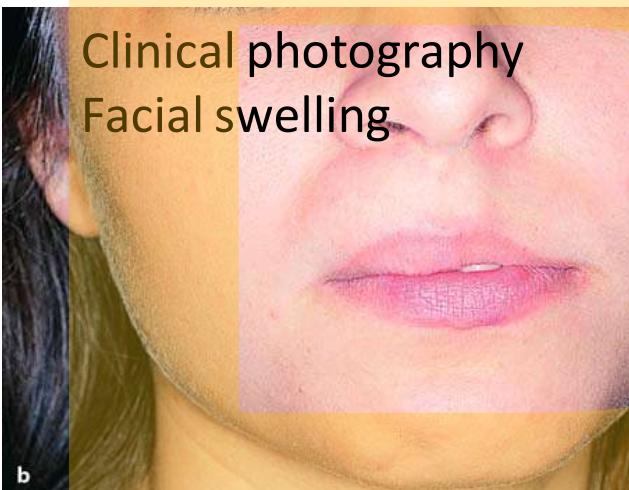
Drainage



Intraoral incision



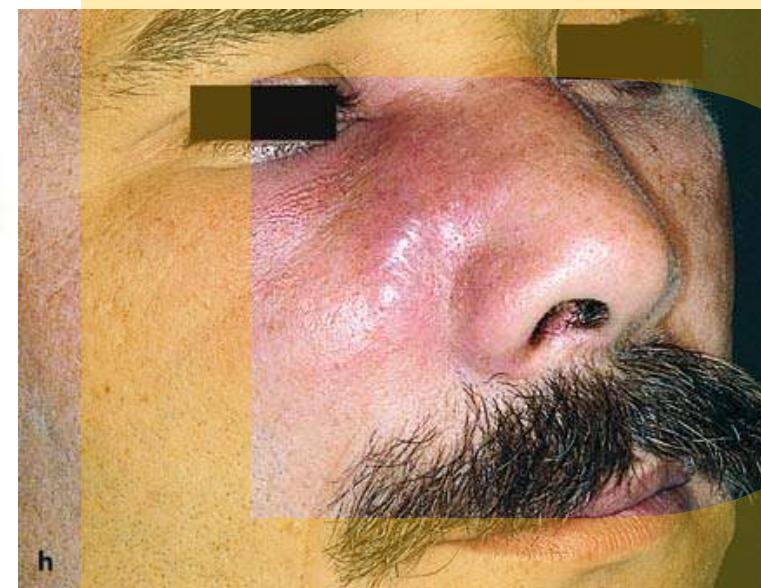
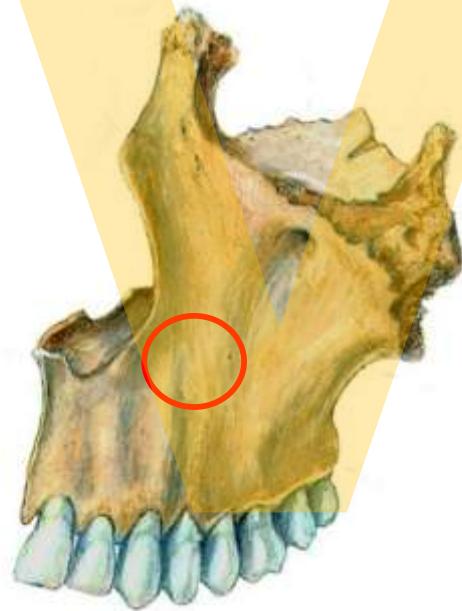
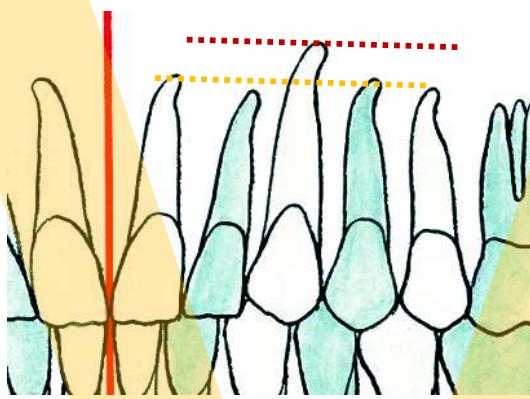
Clinical photography
Facial swelling



Intraoral incision



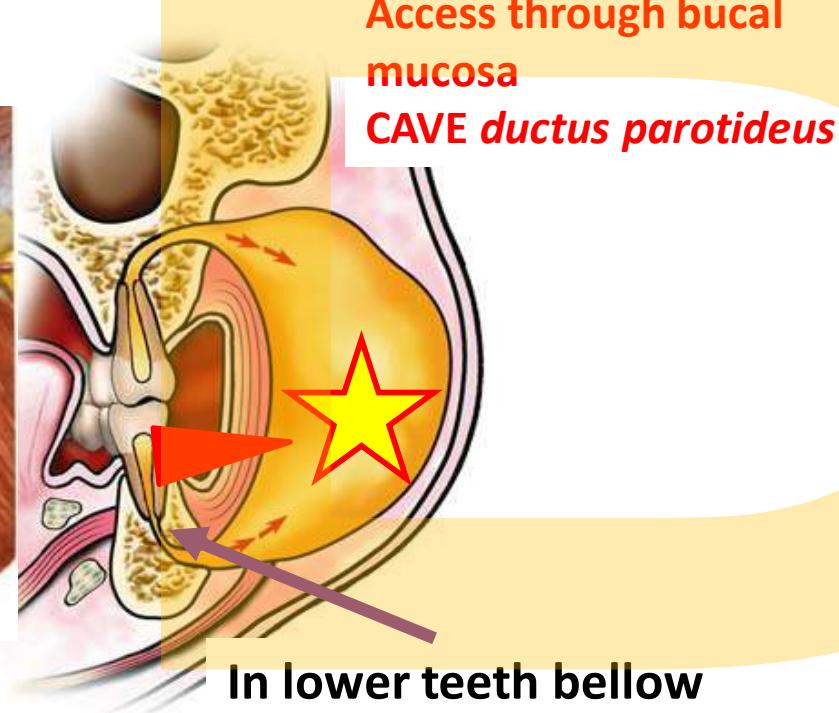
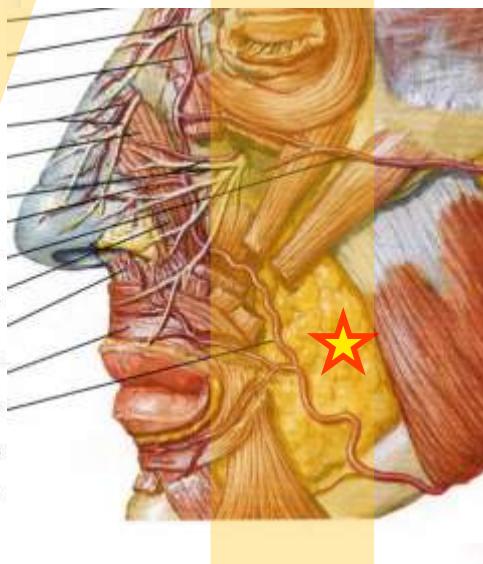
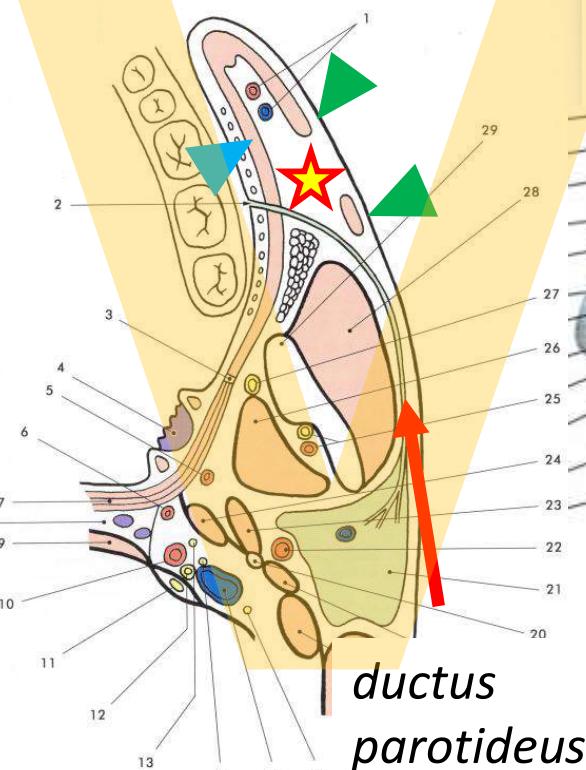
Canine – inflammation above *fornix vestibulae* (apex position) – abscessus fossae caninae



h

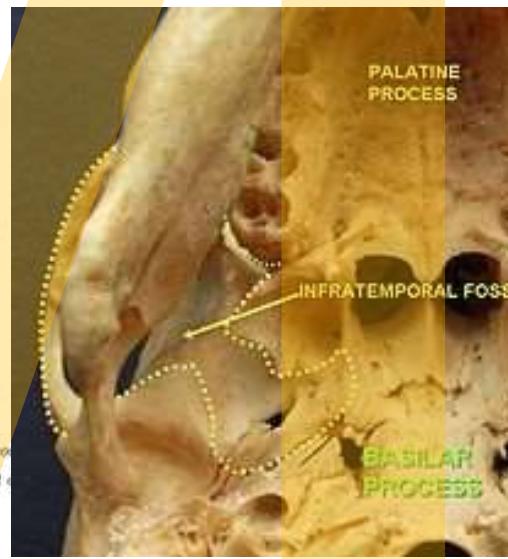
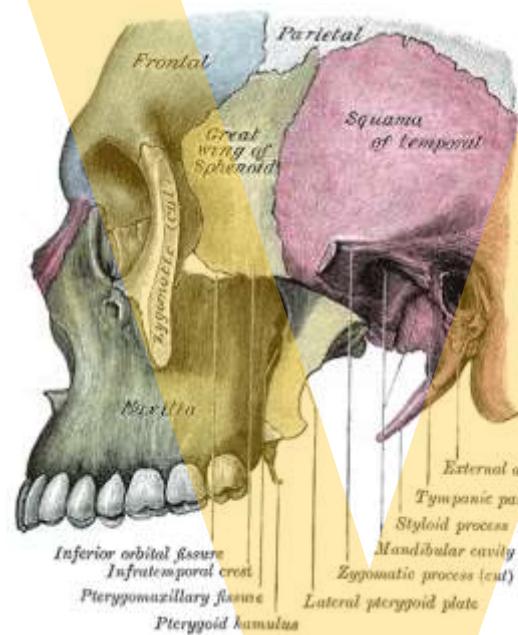
Spreading above insertion of *m. buccinator* – abscessus buccae

- Infection between **superficial** (mimic muscles) and **deep** (*m. buccinator*) layer of muscles in bucal region - *spatium intermusculare*; with *corpus adiposum buccae*



Upper molars (esp. M3) – spreading to *tuber maxillae* – abscessus retromaxillaris

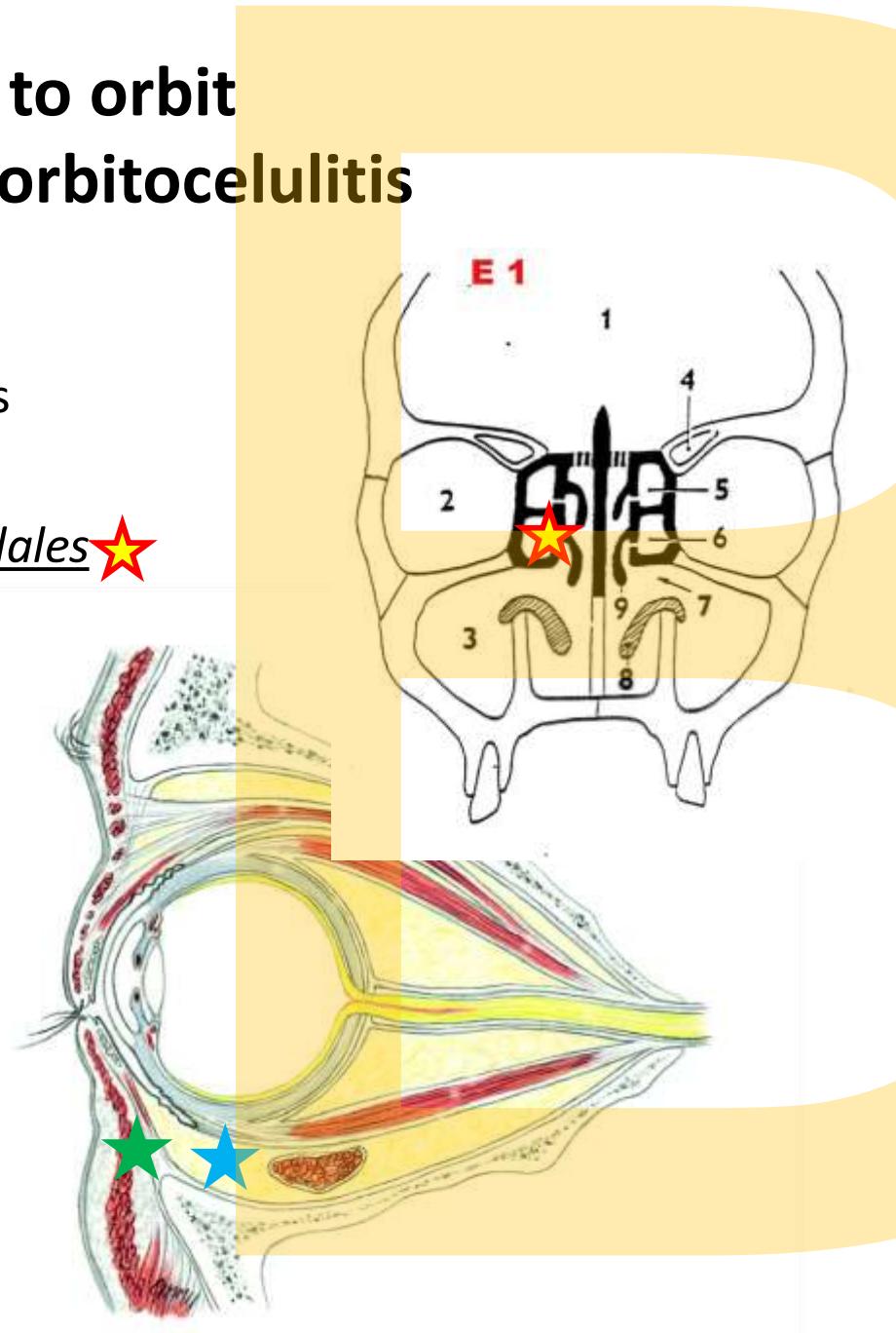
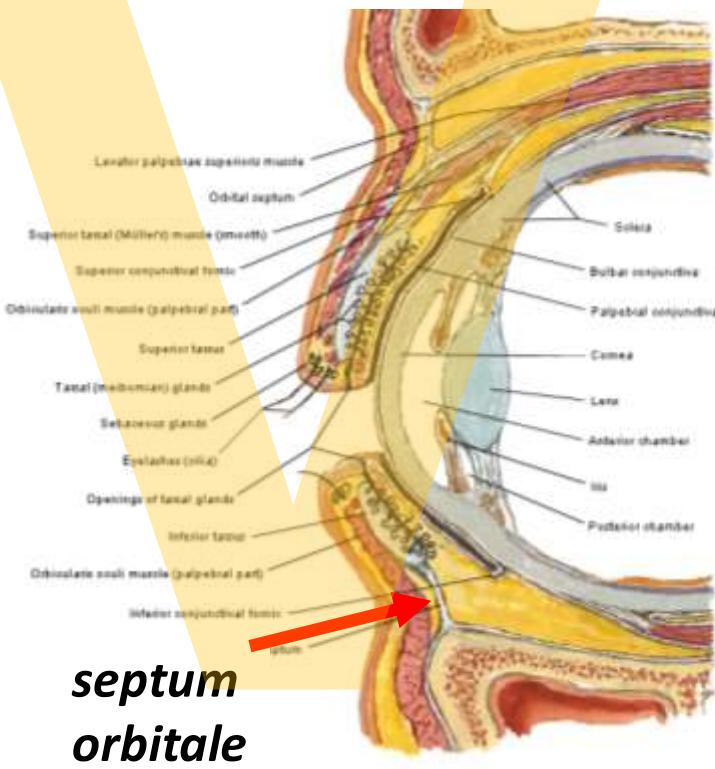
- Part of *fossa infratemporalis* – risk of spreading to surrounding regions (in the illustration to *fossa temporalis*)



https://en.wikipedia.org/wiki/Infratemporal_fossa

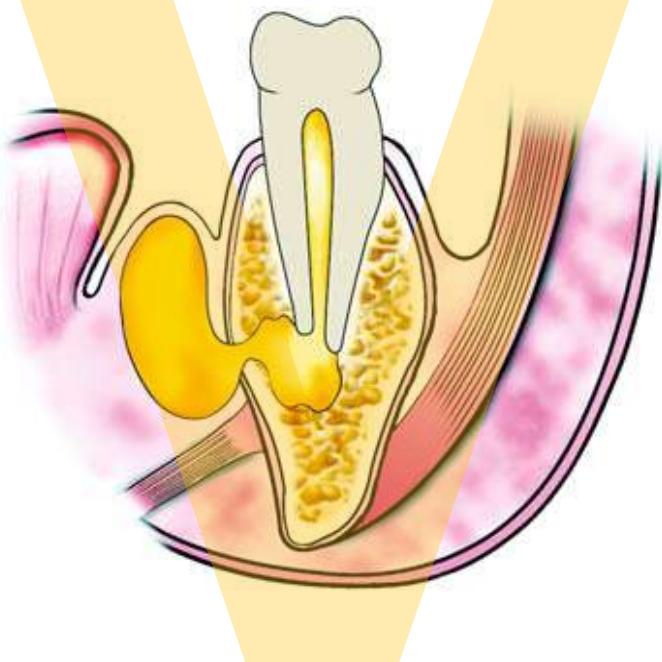
Spreading to orbit pre/retroseptal orbitocelulitis

- Via
 - *fossa canina/ perimaxillary abscess*
 - *tromboflebitis v. angularis*
 - *sinus maxillaris / cellulae ethmoidales* 

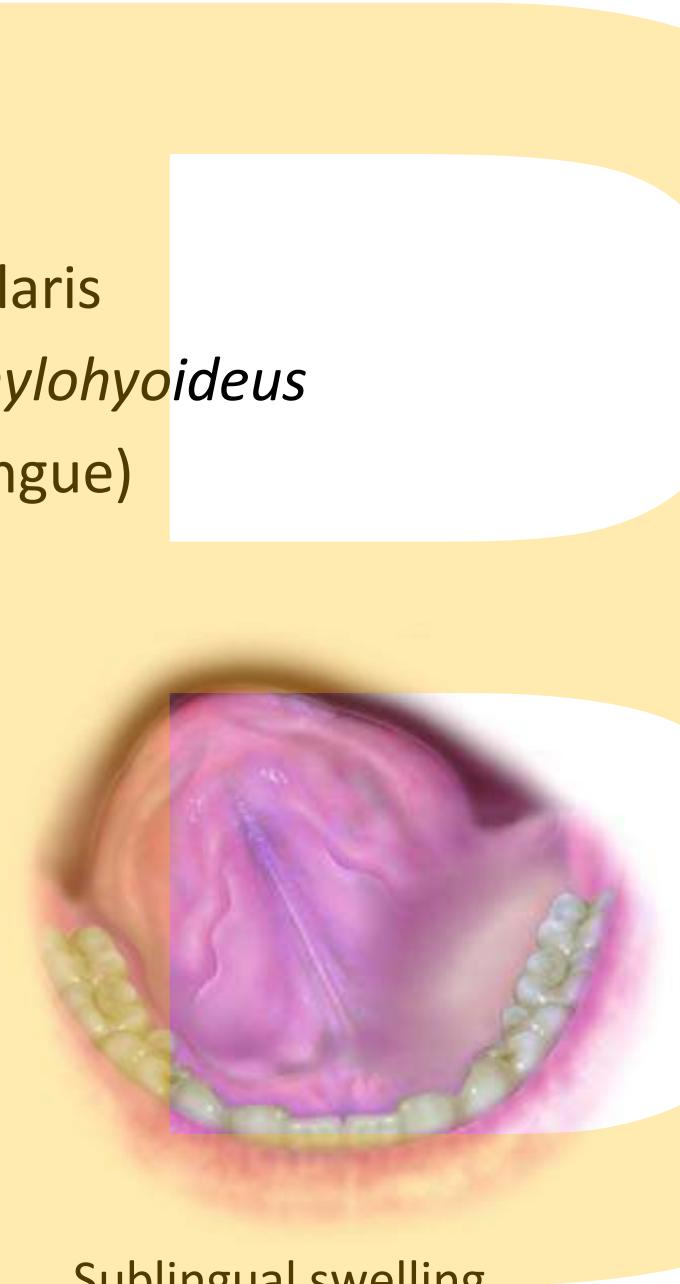


Mandible

- Vestibular spreading – abscessus vestibularis
- Oral spreading – above insertion of *m. mylohyoideus*
 - abscessus sublingualis; (event. into the tongue)

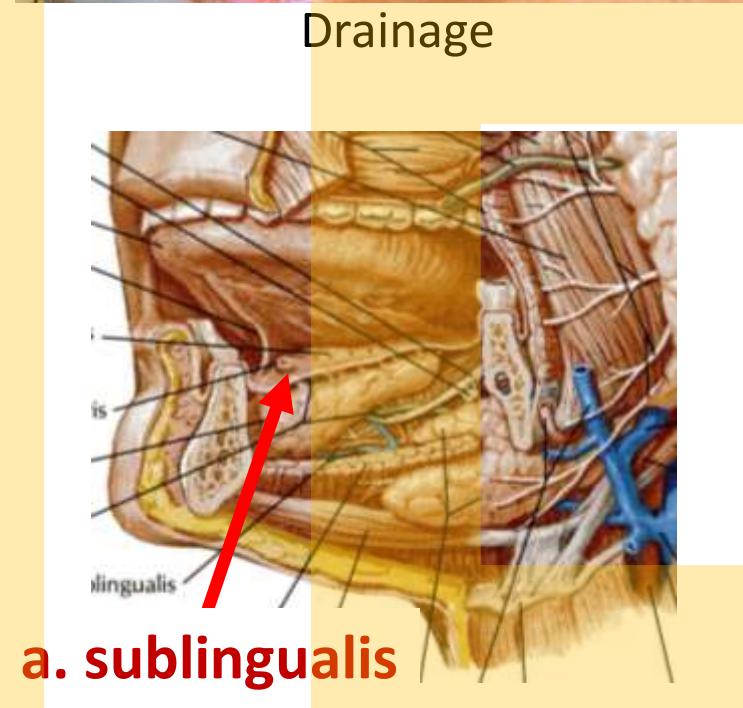
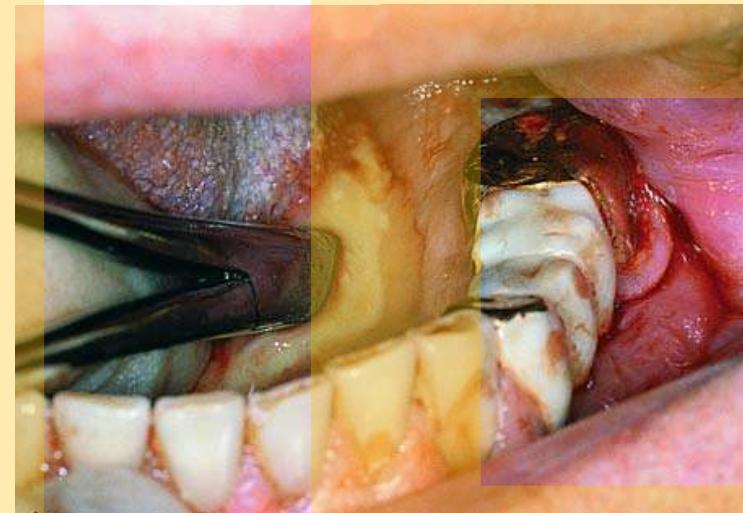
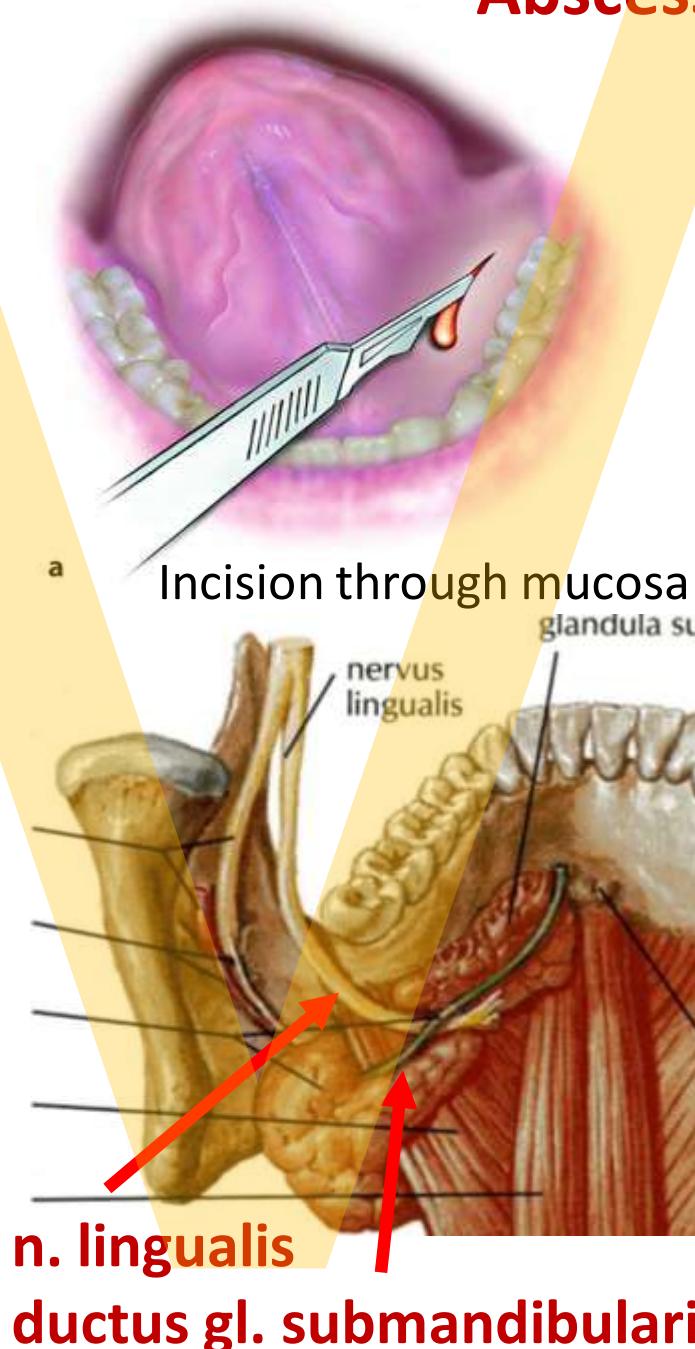


OPG: periapical
radiolucency 37

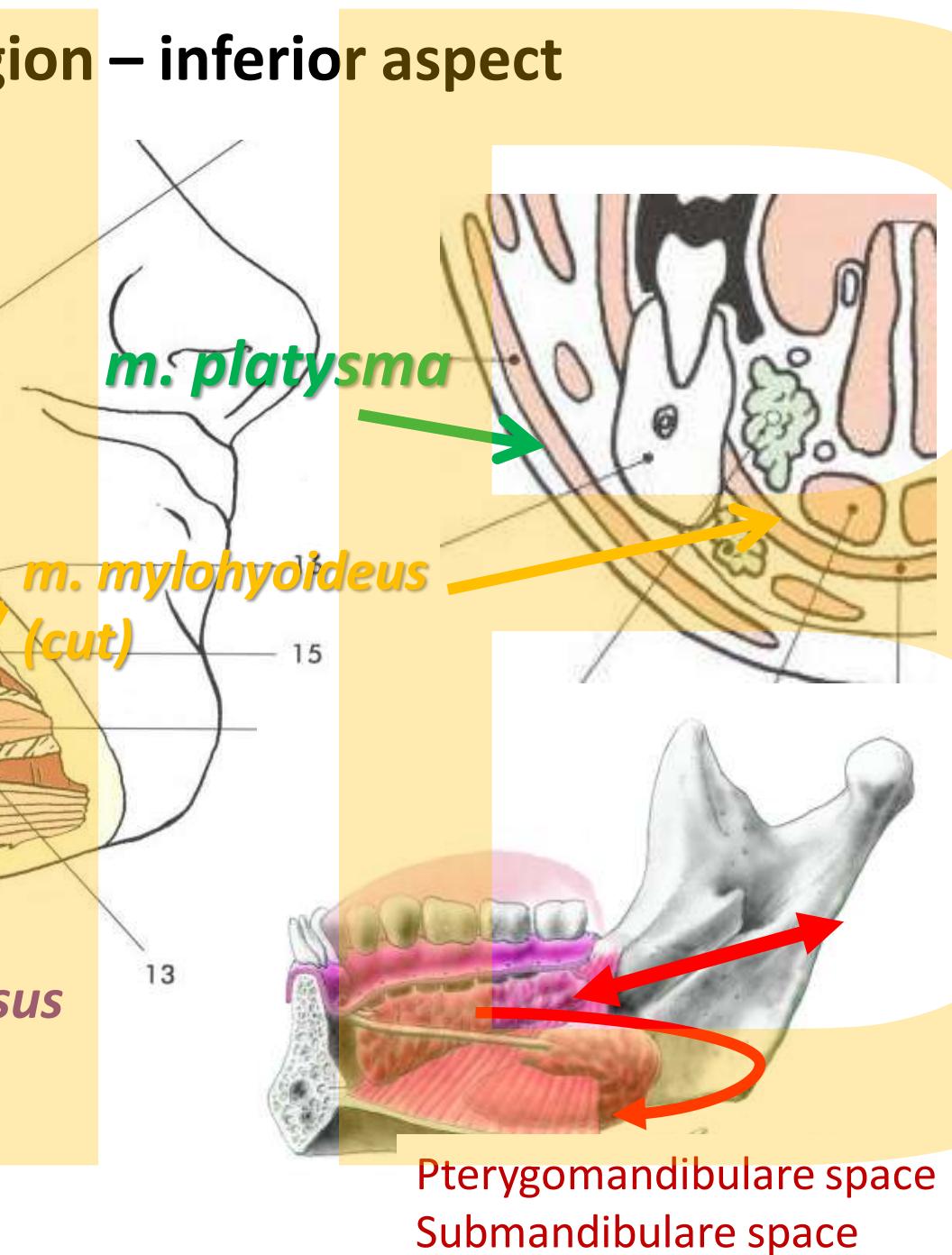
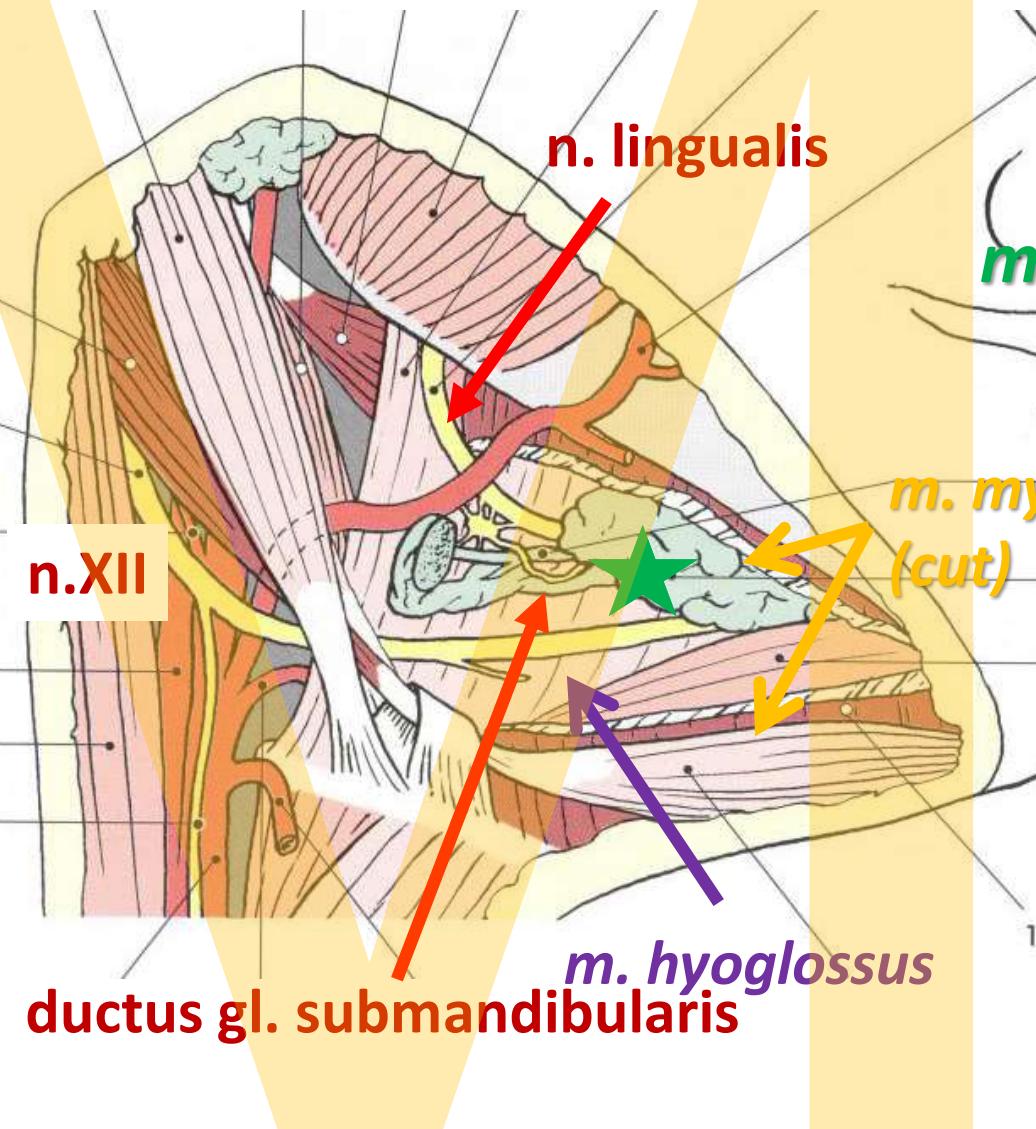


Sublingual swelling

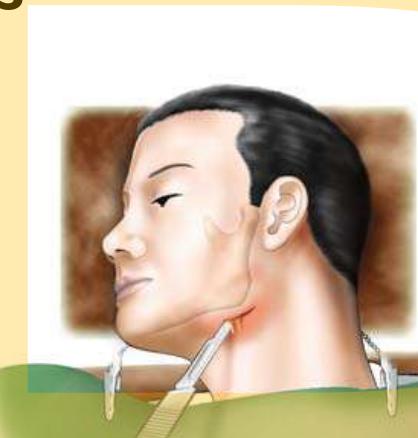
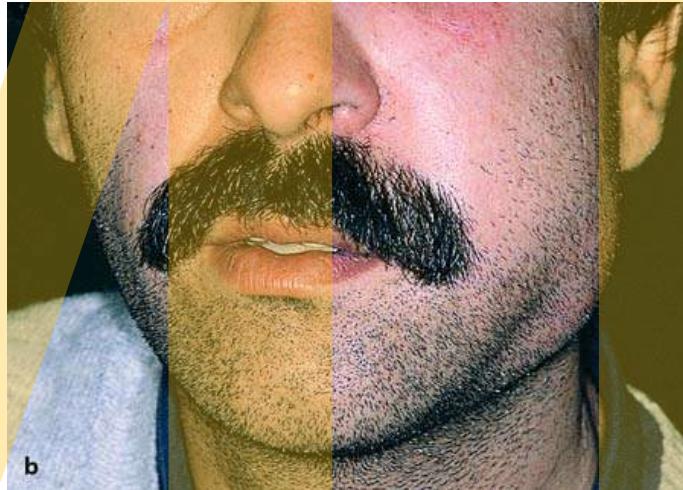
Abscessus sublingualis



Sublingual region – inferior aspect

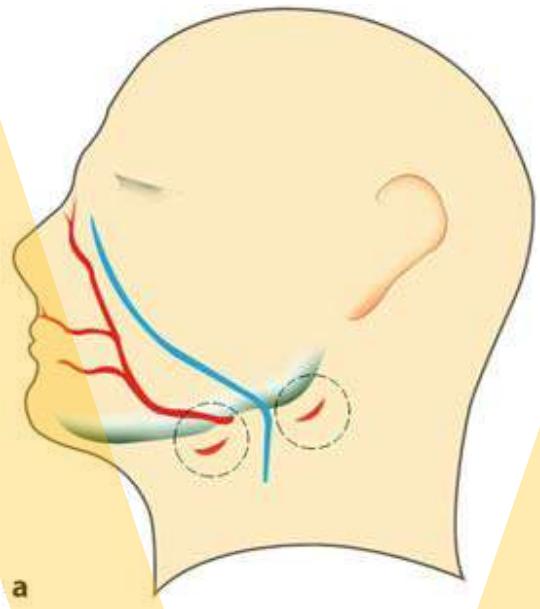


Spreading bellow insertion of *m. mylohyoideus* – abscessus submandibularis

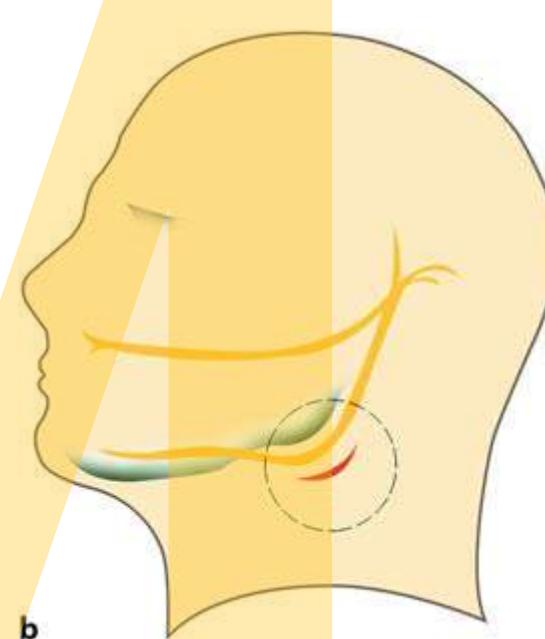


Submandibular triangle - borders

- lower margin of the mandible
- ant. and post. belly of *m. digastricus*
- floor – *m. mylohyoides*
- superficial – cervical fascia – lam. spf.



a



b



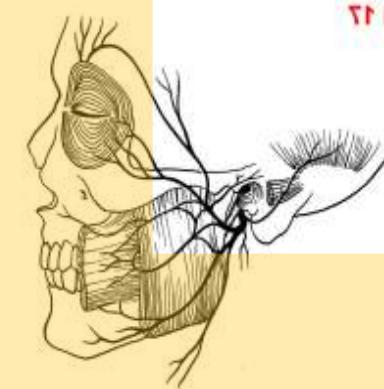
b

Extraoral incision

CAVE

a. + v. facialis

r. marginalis mandibulae n. VII

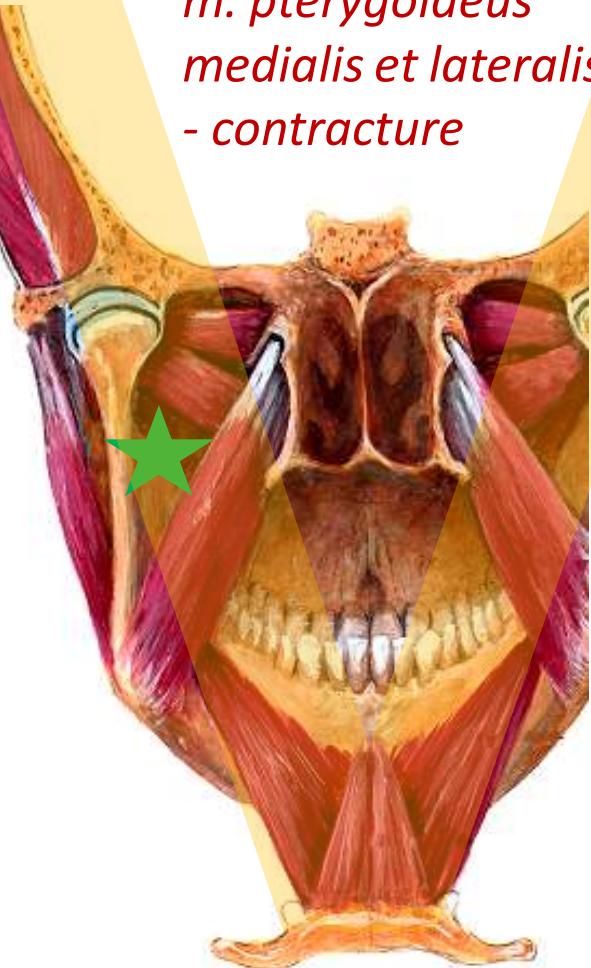


b

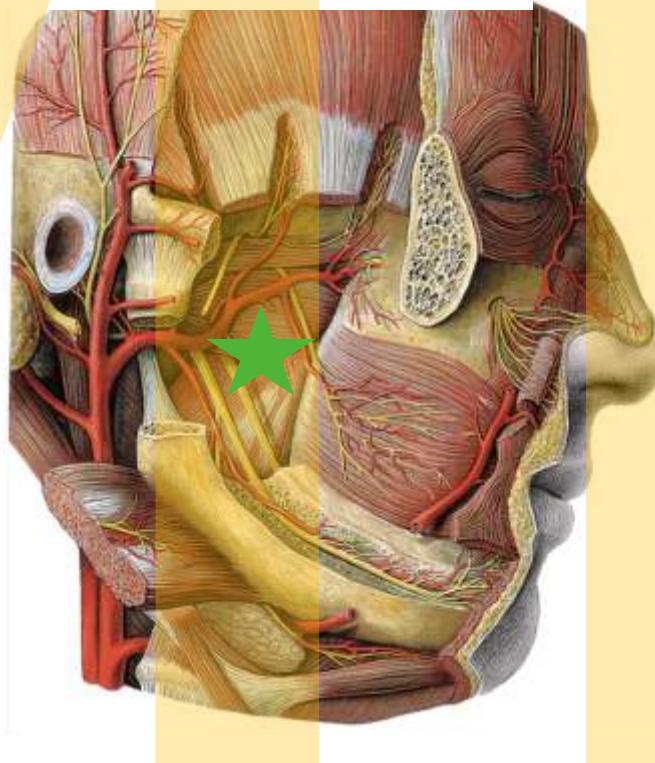
Extraoral incision and drainage

Spreading to pterygomandibulare space – abscessus pterygomandibularis

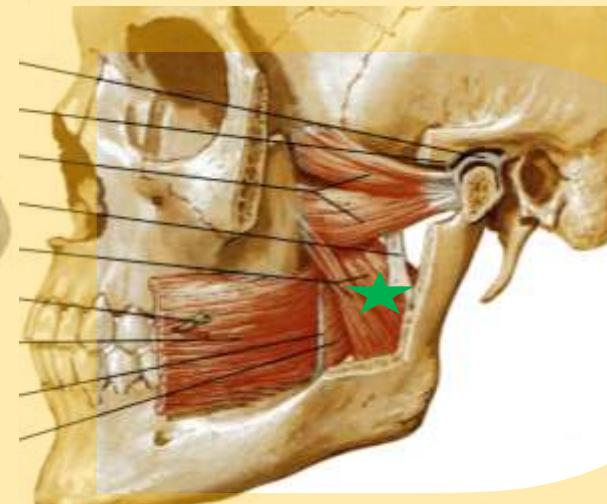
*m. pterygoideus
medialis et lateralis
- contracture*



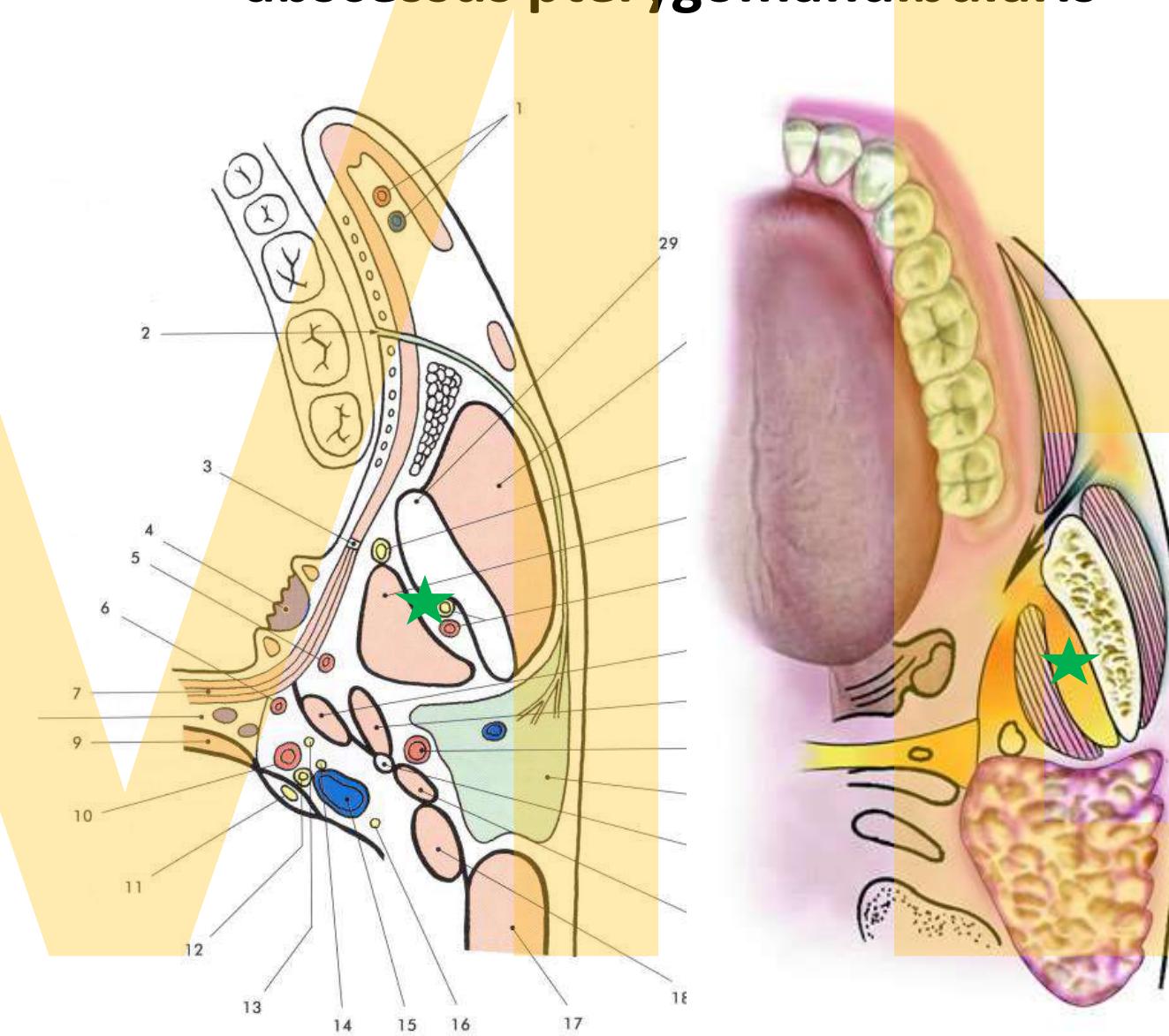
ramus mandibulae



pohled z laterální strany



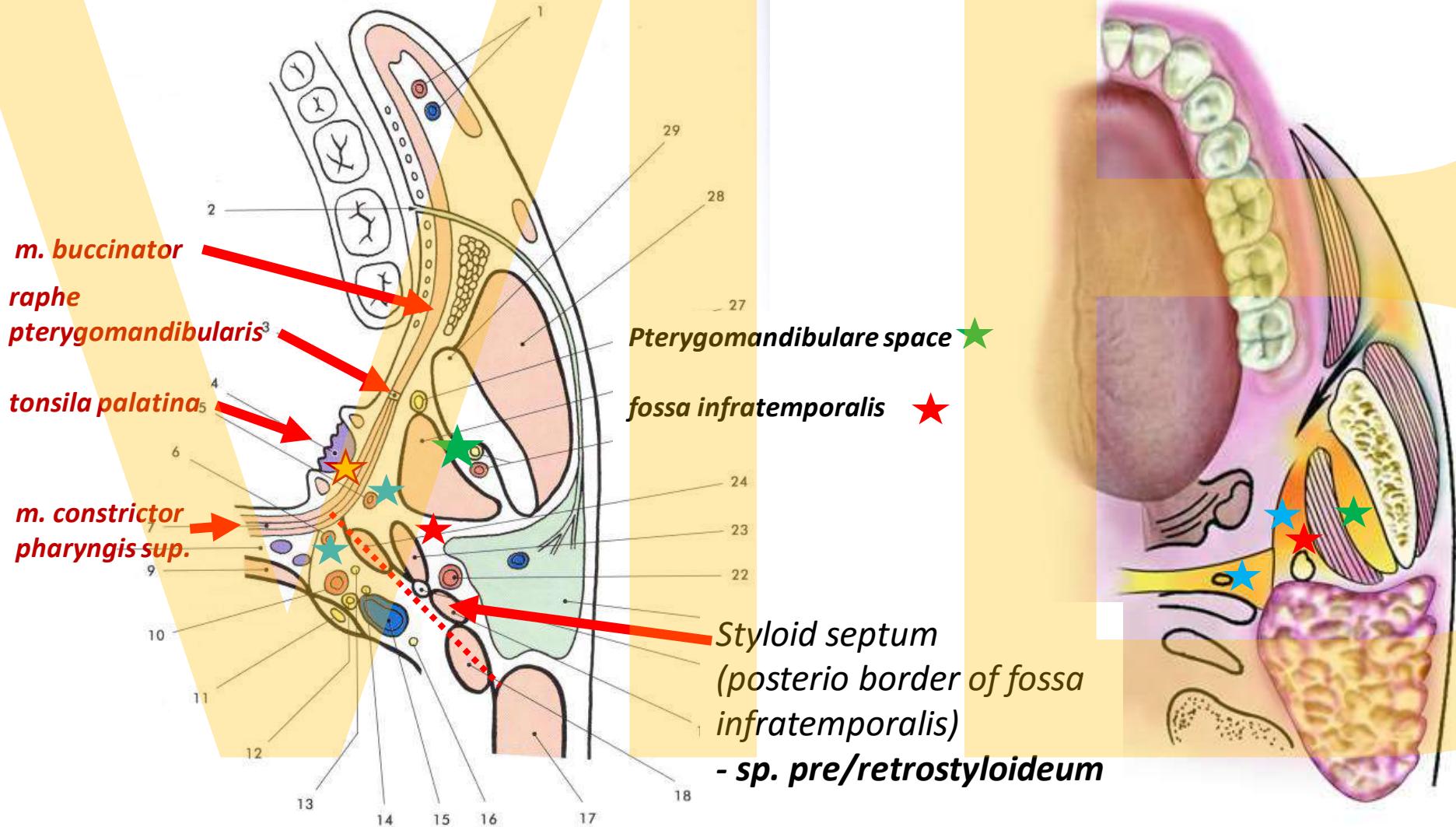
Spreading to pterygomandibulare space – abscessus pterygomandibularis



Spreading to para/retrofaryngeal space ★

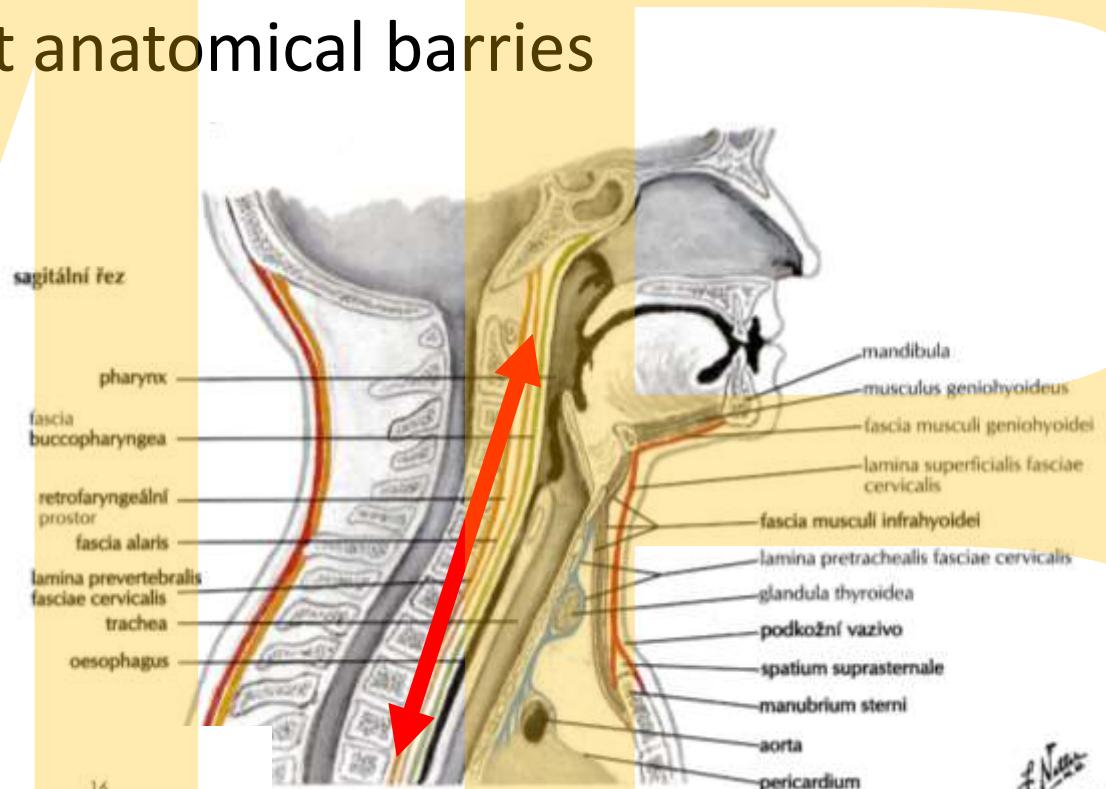
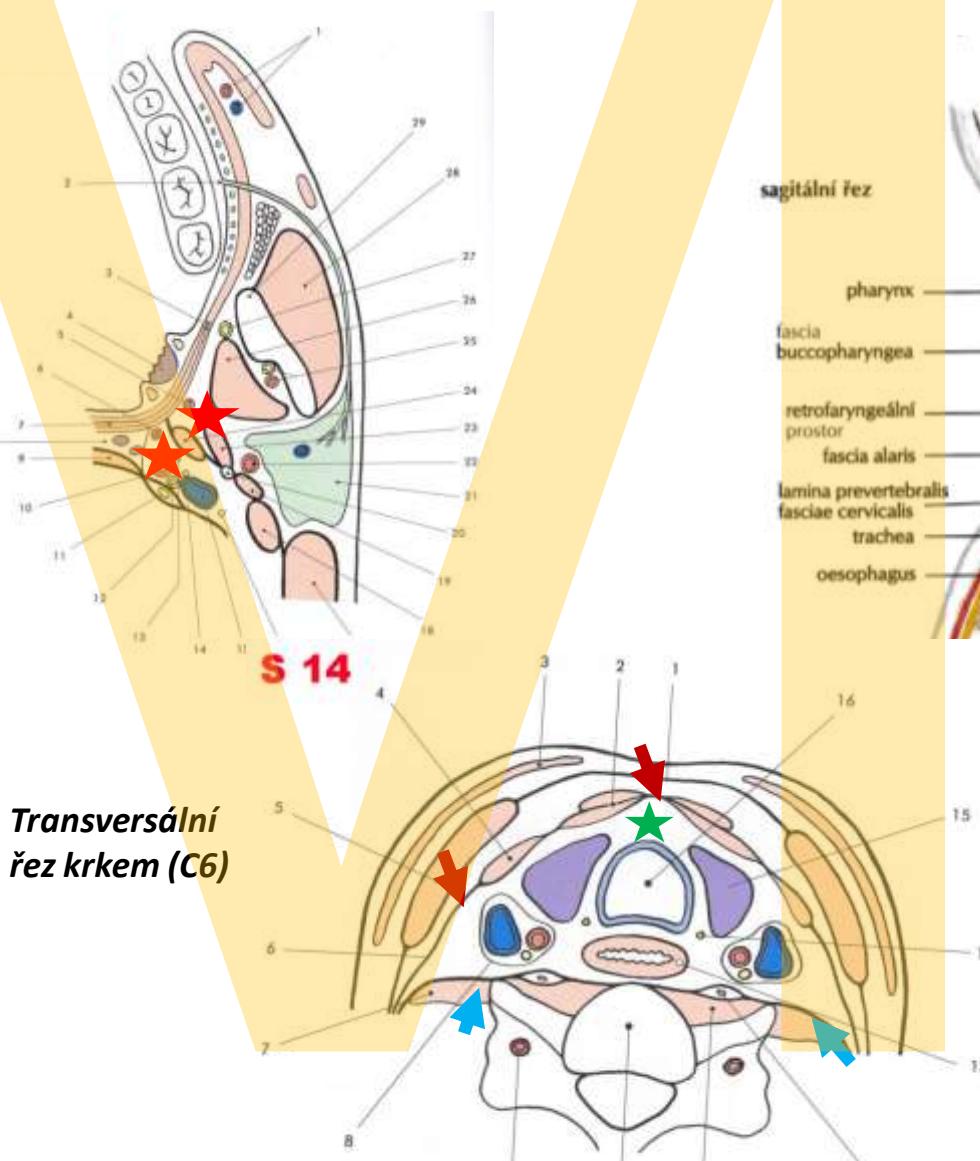
direct spreading from lower molars

secondary spreading from submandibular, pterygomandibular and parotic space
(diff. dg. abscessus peritonsilaris) ★



Spreading caudally to *spatium viscerale colli*

connected with mediastinum
without anatomical barriers



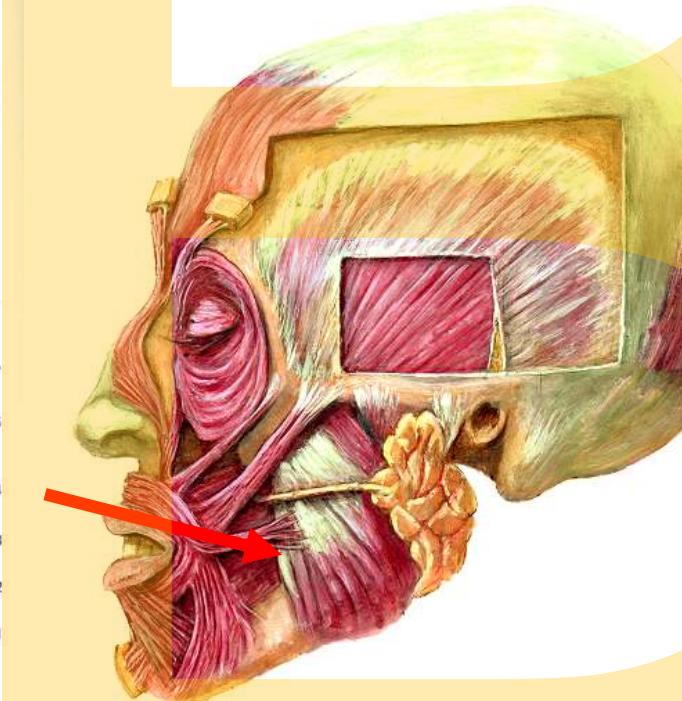
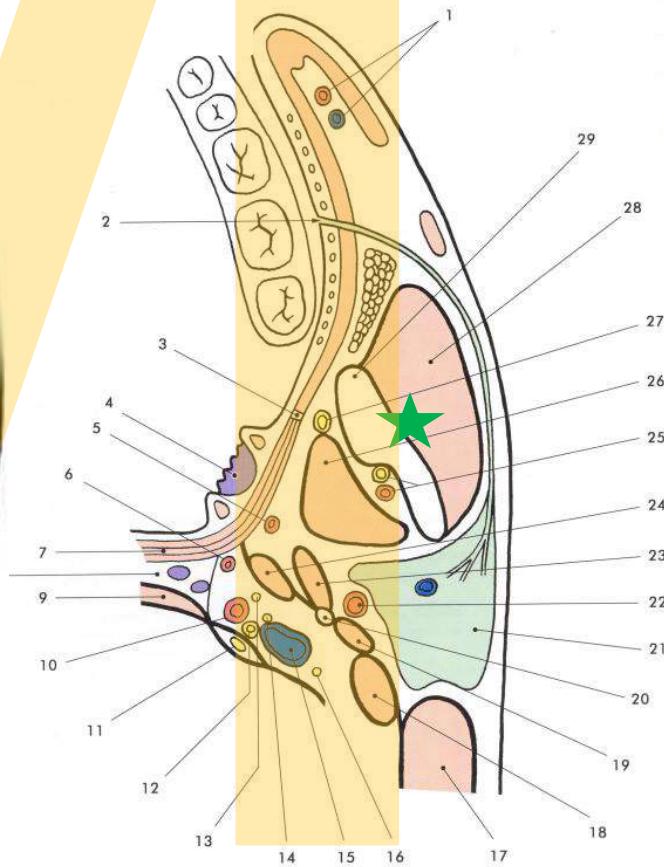
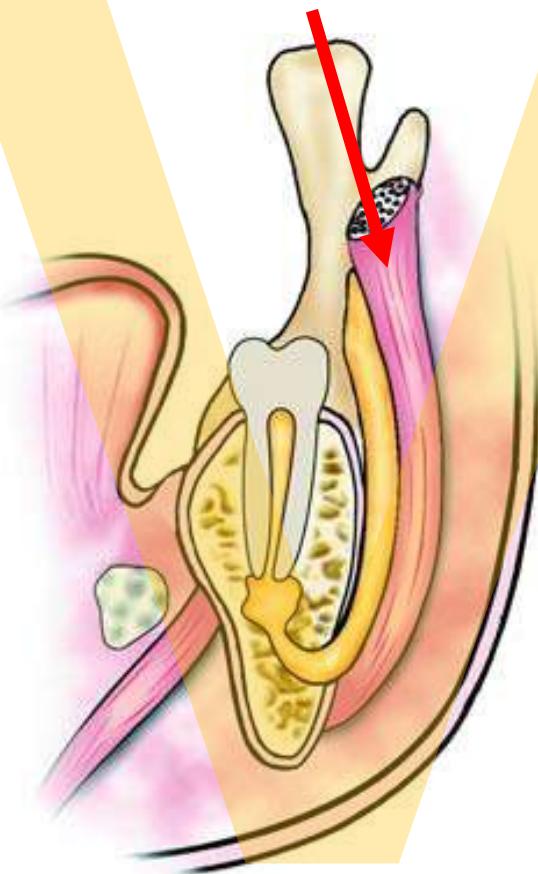
spatium viscerale colli
mezi lamina pretrachealis
a l. prevertebralis fasciae cervicalis

trachea, oesophagus
nervově-cévní svazek krční
gl. thyroidea

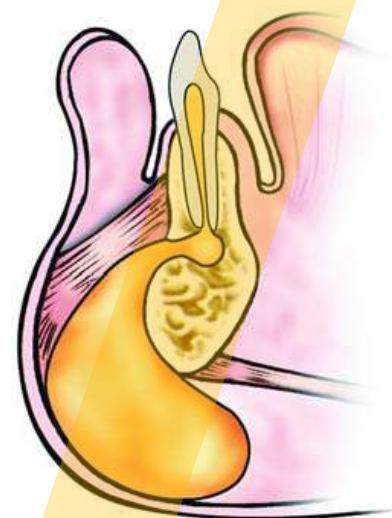
...

Spreading between *ramus mandibulae* anf *m. masseter* – *abscessus submasseticus*

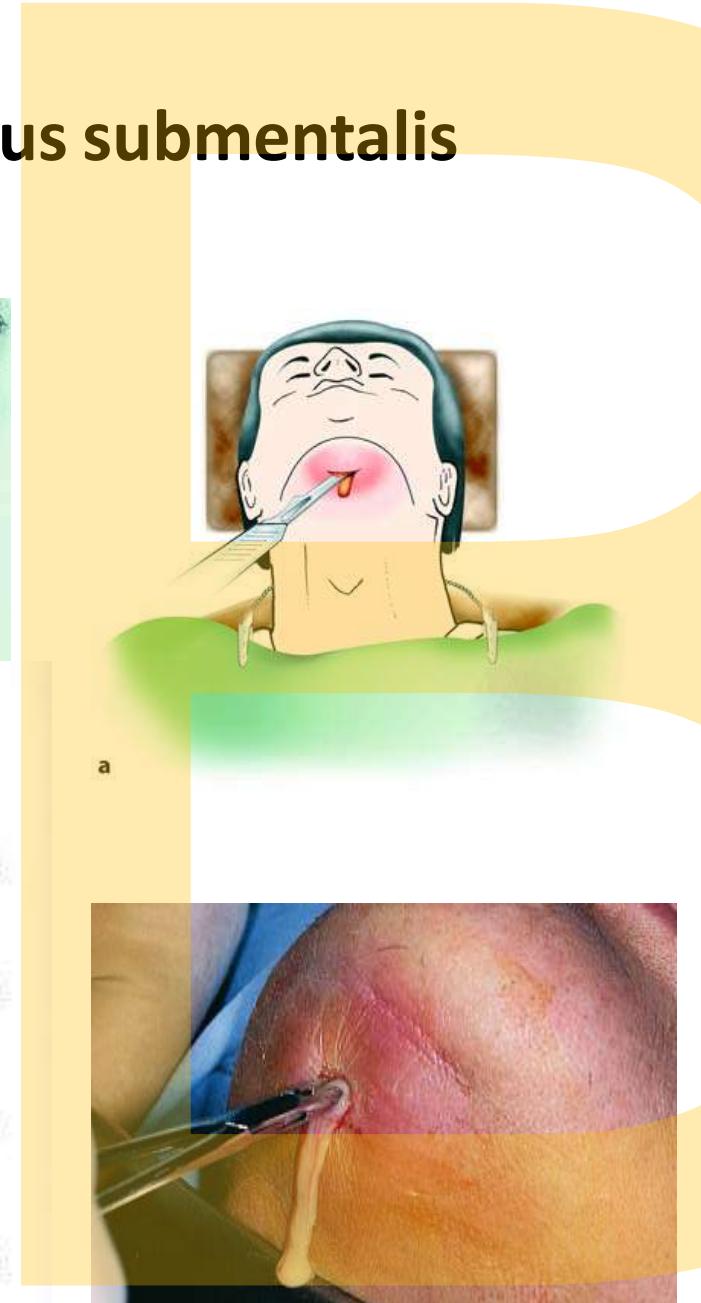
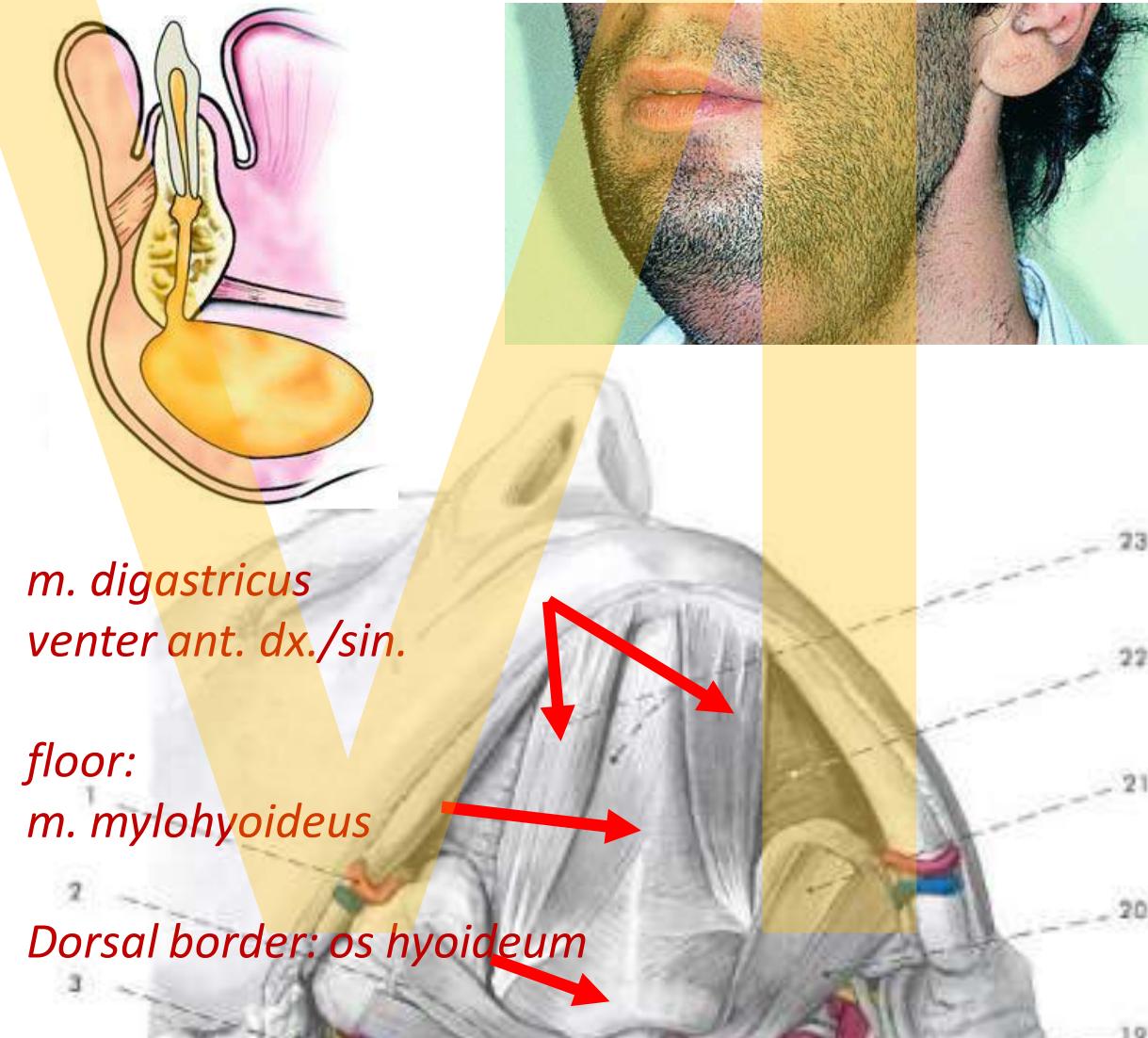
m. masseter
- contracture



Spreading bellow insertion of *m. mentalis* - abscessus mentalis



Spreading submentally – abscessus submental



<http://anat.lf1.cuni.cz/vyuka/zub3/sylabus.php>

<http://anat.lf1.cuni.cz/vyuka/zub3/program.php>

Recommended literature:

- Oral Surgery (Fragiskos D. Fragiskos, PhD)
- Contemporary Oral and Maxillofacial Surgery
(prof. Hupp, prof. Tucker, prof. Ellis)
- Regional anatomy (prof. Grim)
- Atlas of Human Anatomy (Netter, MD)