Preface

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On his return from his first expedition to Brazil, the historian and academic, Fernand Braudel wrote: “Brazil, by forcing me to think outside of my usual pattern, has made me more intelligent.” The same can be said when dealing with a patient who needs orthodontic surgery.

This orthognathic surgical interaction is indeed a great responsibility and demonstrates a real commitment on the part of the practitioner toward the patient. We must expand our vision beyond the technical aspects, either orthodontic or surgical. These conversations are a major asset to the different sequences of the protocol.

Before putting forward the surgical recommendation, it is indispensable to integrate a multidisciplinary vision into our decision. This is essential in clinical situations where it is necessary to choose between alveolar compensation and baseline bone surgery, both capable of offering a therapeutic solution for dysmorphia.

Obtaining informed consent on the part of the patients involves first presenting them with all the possible effects of the therapeutic plan. We must be fully aware and able to provide adequate information.

Throughout the therapy, our knowledge base must allow us to answer any questions that the patients may have about therapeutic consequences—psychological, physiological, and esthetic. Our vigilance and a multidisciplinary approach are equally indispensable during the consolidation phase where the facial modifications must be physiologically and psychologically assimilated by the patient.

This need for openness has brought up two issues published in *Revue d’ODF* and focusing on the multidisciplinary approach and orthognathic surgery. This work is the first of such pieces.
The compulsive need to take selfies by young adults shows the importance of the face and of self-perception in our society. The psychological dimension must be at the center of the orthognathic surgical process. It is introduced in the first stage of the process but very often, it exacerbates the patient’s dysmorphia and causes a sudden facial modification in the postoperative period. The team attached to the psychology unit in the maxillofacial department of Salpêtrière hospital is conducting a review of key indicators that require our vigilance and that will lead us to propose psychological treatment.

Incorporating musculature and orofacial functions in every sequence of the therapy is evidently essential. Mr. Gouzeland and Ms. Fournier, have created a summary report which constitutes an invaluable guide for optimal functional treatment.

A recent controversial topic—i.e., the correlation between orthognathic surgery and OSA (OSA)—is discussed by the multidisciplinary team of “Innov’apnée.” This article proposes an objective view of the therapeutic role of orthognathic surgery in OSA as well as the inclusion of respiratory function when planning baseline bone surgeries.

Implant-supported oral rehabilitation concomitant to orthognathic surgery is at the junction of different specialties and is at the heart of the current digital revolution. Dr. Thevenot and Dr. Carré discuss this phenomenon.

It is an often neglected in the initial stages because it constitutes a real bridging between the orthodontic preparation phase and the actual baseline bone surgery. In the same vein; the surgical splint; its importance and expected evolution at the dawn of the digital revolution are all discussed by the maxillofacial service team of the Lyon Sud hospital.

Lastly, the testimony of a practitioner, who has personally experienced the patient’s role in the orthognathic surgical process, enriches our interpretation of the experience of patients undergoing this therapy.

At a time where some people are reflecting on the purely esthetic aspect of adult orthodontics, the extensive multidisciplinary range presented on these issues published in Revue d’ODF causes us to collaborate with so many different specialties. This merging justifies the entire medical scope of adult orthodontics.

Happy Reading.

F. Braudel; Histoire et sociologie dans Traité de sociologie, publié sous la direction de Georges Gurvitch, PUF, 1958.