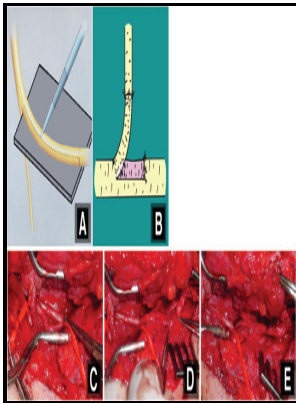


Facial reanimation with jump interpositional graft hypoglossal facial anastomosis and hypoglossal facial anastomosis - evolution in management of facial paralysis

Published on behalf of the Triological Society by Lippincott Williams & Wilkins - Facial Reanimation After Facial Nerve Injury Using Hypoglossal to Facial Nerve Anastomosis: The Gruppo Otologico Experience, Indian Journal of Otolaryngology and Head and Neck Surgery



Description: -

-
Enotrio, 1920- -- Appreciation.
Pediatrics -- Congresses.
Child health services -- United States -- Congresses.
Children -- Health and hygiene -- Congresses.
Facial paralysis -- Treatment.Facial reanimation with jump interpositional graft hypoglossal facial anastomosis and hypoglossal facial anastomosis - evolution in management of facial paralysis
-
Laryngoscope -- no. 90.
Laryngoscope -- v. 109, no. 2 (February 1999). Supplement no. 90Facial reanimation with jump interpositional graft hypoglossal facial anastomosis and hypoglossal facial anastomosis - evolution in management of facial paralysis
Notes: Includes bibliographical references.
This edition was published in 1999



Filesize: 16.43 MB

Tags: #Outcome #of #different #facial #nerve #reconstruction #techniques

Facial Reanimation Using the Masseter

A The patient had left extended total parotidectomy and left radical neck dissection, the black arrow points to the facial nerve stump.

Surgical results of the Hypoglossal

Anastomosis techniques between the facial and the hypoglossal nerves are the most described for replacement 3,5-7 , however, motor deficits and hemiglossal atrophy may result from this technique, and represent the main criticisms for its performance 8,9. Facial symmetry at rest and during animation improved in 16 of 17 patients.

GMS

Only forty patients completed a minimal follow up of 24 months at the time of evaluation and were included in the study population.

Frontiers

In 1979, Conley et al. Results with the anastomosis between the terminal stump of the facial nerve and the lateral wall of the hypoglossal nerve, or with part of the hypoglossal, aim at reducing tongue movement sequela 5,6. Glicenstein J 2015 Histoire de la paralysie faciale.

Recovered smiles were rated from 1 to 5 1, poor; 2, adequate; 3, good; 4, very good; 5, excellent.

Split hypoglossal facial anastomosis for facial nerve palsy due to skull base fractures: A case report

The full length of the descending branch is dissected carefully and divided at its most distal point. Combined approach in extratemporal facial nerve reconstruction. CONCLUSION Using the post-descendens hypoglossal nerve for side-to-end anastomosis with the mobilized intratemporal facial nerve is anatomically feasible and provides adequate axonal count for facial reanimation.

Facial Nerve Reanimation with Hipoglossal Nerve: Funicular Terminal Anastomosis

The masseter nerve has demonstrated a constant anatomical branching pattern and sufficient length to achieve a primary anastomosis to the facial nerve without the need for interposition nerve grafts.

Reanimation of the paralyzed face by indirect hypoglossal

He regained near perfect symmetry, excellent commissure excursion, symmetric dental show, and symmetric initiation of commissure movement with attempted smile. This period was chosen to allow a sufficient follow-up for all patients.

Related Books

- [HITS Tape Six - Various artists.](#)
- [Taming the lawyers - what to expect in a lawsuit and how to make sure your attorney gets results](#)
- [Insulation requirements of high-voltage power systems in future spacecraft](#)
- [Complete poetic and dramatic works of Robert Browning.](#)
- [Pat Need Help Neurologic Quiz](#)