

Letters to the Editor

Authors' Response:

We would like to thank Dr. Misch for his valuable feedback and comments. Indeed, he brought up several good points.

As readers are probably aware, it is not the intention of our article to propose a ramus bone graft harvest technique that deviates from the recommended technique, which Dr. Misch originally described. Our article was meant to provide the reader with information regarding the anatomy of the area involved in a ramus graft harvest procedure, in particular, the distance of the cortical plate to the inferior alveolar canal. The posterior osteotomy was intentionally placed from the distal aspect of the first molar to the mid-buccal aspect of the third molar region to make it easier for standardization measurements, since the thickness of the cortical plate to the nerve in this region was what we wanted to measure. To avoid any confusion, we have redrawn Fig. 1 so that readers can better understand where we measure the buccal plate thickness.

Dr. Misch stated, "Pain, swelling, and bleeding are not necessarily complications but normal postoperative sequelae of most oral surgical procedures." Indeed, these are not necessarily complications, but they can be if they occur as a result of a postoperative infection, for example, and this can complicate the situation.

With regard to possibilities of fracturing the mandible, we certainly do not suggest that mandible fracture is a frequent occurrence, but isolated reports have raised the concern of spontaneous mandibular fractures from bone harvesting from the retromolar area.¹

Regarding inferior alveolar nerve (IAN) damage, we agree that the risk of IAN damage associated with ramus bone harvest is low, but it remains a concern that is frequently reported in studies. In a recent literature review by Chiapasco et al.,² it was found that "postoperative morbidity related to bone harvesting from intraoral sites is mainly represented by temporary neural disturbances involving branches of the inferior alveolar nerve."

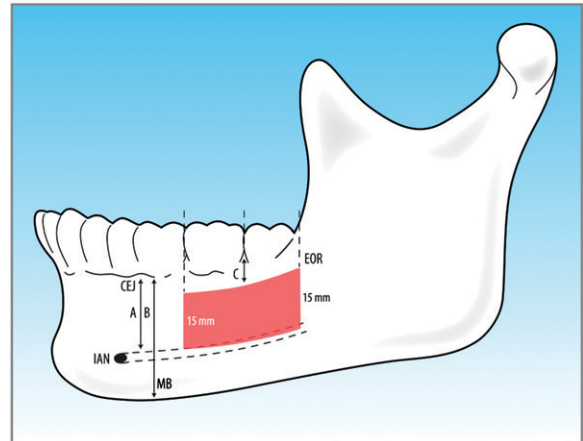


Figure 1.

Diagram illustrating the location of ramus-graft harvesting and locations of each measurement for dentate jaws. A = CEJ–IAN; B = CEJ–MandB (mandibular border); C = CEJ–EOR (external oblique ridge).

Once again, we appreciate Dr. Misch's comments, and we hope this paper will provide more insight on how to harvest the ramus graft and what anatomical structures we should be aware of in order to minimize procedure-related side effects.

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