



Subsequently, with advancement in technology, the idea of preservation took over and these days any tooth for the matter can be preserved with the help of appropriate treatment as required.

Thus these days Dental Surgeons are looked upon as surgeons providing cosmetic and functional treatment to the jaws, rather than as pain relieving personnel.

Oral and maxillofacial surgery is a technically demanding and intellectually stimulating surgical specialty with the basic concepts of dentistry. It can accommodate the generalist who provides a comprehensive service to a local community and the specialist working in specialist centres with their work restricted to the management of more complex oral maxillofacial conditions.

The specialty of oral and maxillofacial surgery is unique in requiring a dual training in medicine and dentistry and is a recognized international specialty.

The scope of the specialty is extensive and includes the diagnosis and management of facial injuries including maxillofacial fractures, facial disproportion and maxillofacial deformity, facial pain, temporomandibular joint (TMJ) disorders, impacted teeth, cysts and tumours of the jaws including the reconstruction of the jaws, dental and maxillofacial implants as well as numerous problems affecting the oral mucosa such as mouth ulcers and infections.

As dentistry and surgery became increasingly super-specialized, each

made its distinct and separate approach to the field of oral surgery. It was inevitable that ultimately dentists and surgeons would confront one another as rivals rather than as collaborators in the practice of oral maxillofacial surgery. This situation was unfortunate, particularly for the patient, because each profession had its own distinct contributions to make.

Today communication between specialties is improving by leaps and bounds, and the goal of better patient care has brought increased realization of oral and maxillofacial surgery skills. There are many favorable signs of continued improvement in the understanding of this specialty in health care. Policy makers have come to understand that Oral health will ultimately lead to overall health and dentistry would have to be integrated to provide comprehensive health care be it in control of non communicable diseases, tobacco and cancer control initiatives, school health and geriatric health. The prospects suggest optimism for a super-specialty that has gradually evolved in response to the definite need of the community.

Technology is evolving very rapidly, and we can see the bright light ahead of the tunnel, in regard to the future in the field of dental and oral surgery.

One has heard of the potential of stem cells to treat a wide range of serious diseases. Stem cell therapy is emerging as a revolutionary treatment modality to treat various diseases and injury, with wide-ranging medical benefits. Yet few of us realize that a rich source of these cells is teeth-baby teeth that become loose during childhood, wisdom teeth extracted in young adults, and teeth that need to be extracted for orthodontic treatment. These potent stem cells are present in the dental pulp of healthy teeth, and as long as they are ethically collected, transported, processed and stored properly, they can be preserved to protect the future health of a family.

Are you grateful for being born when you were? I think so. Be thankful for your pearly whites. If you were born a few decades before, they might not be there at all.

Changing Trends in Treatment of Oral Submucous Fibrosis.

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Abstract: The term LASER is an acronym for 'Light Amplification by the Stimulated Emission of Radiation'. As its first application in dentistry by MIAMAN, in 1960, the laser has seen various hard and soft tissue applications. Lasers have opened a new door for the treatment of various disorders. For many intraoral soft-tissue surgical procedures the laser has become a desirable and dependable alternative to traditional techniques. Oral submucous fibrosis is a pre-cancer condition and it occurs predominantly among Indians and even those settled outside India. The causative factors for the occurrence of this disease are attributed to areca nut chewing, tobacco chewing, and consumption of hot chilies and genetic predisposition of people of Indian subcontinent. OSMF in later stages invariably leads to trismus due to retromolar fibrosis and buccal mucosa involvement. Medicinal treatment has limited role once the trismus is established. We here report a case in which we have used diode laser to relieve the trismus.

INTRODUCTION

Introduction of laser in dentistry, in the 1960s, by Miaman¹, led to a continuous research in the various applications of lasers in dental practice. Lasers are rapidly becoming the standard of care for many procedures performed by dental surgeons. The reason for this

transition is due to the fact that many procedures can be executed more efficiently and with less morbidity using lasers as compared to a scalpel and electrocautery.

Oral submucous fibrosis is a chronic debilitating disease of the oral cavity characterized by inflammation and progressive fibrosis of the submucosal tissues (lamina propria and deeper connective tissues). Oral submucous fibrosis results in marked rigidity and an eventual inability to open the mouth. The condition is well recognized for its malignant potential and is particularly associated with areca nut

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