Trigeminal nerve injuries after mandibular oral surgery in a university outpatient setting-a retrospective analysis of 1,559 cases.

In general, trigeminal nerve injury is known as a potential risk of many surgical procedures in the oral cavity. Recent literature demonstrated that the risk of nerve injury is correlated with the experience of the surgeon. Therefore, the purpose of this study was to evaluate retrospectively the incidence of trigeminal nerve injuries in a teaching university setting. From January 2000 to December 2009, a total of 1,559 patients underwent one intervention in the postcanine region of the mandible. Interventions included extractions, osteotomies, periradicular surgery, and implant surgery. In 2010, all 1,559 patient charts were screened. A record was made if trigeminal nerve injury was documented within the first month following surgery. These patients were re-evaluated. Documentation in the charts revealed that sensorial disturbance following surgery was seen in 42 patients (2.69%). Among them, nine patients were clinically re-evaluated by the authors and 12 were interviewed by phone and observed by their dentist without any problems. Persistence of sensory disturbance was found in 5 of the 21 patients (0.32%), and four of these five lesions were in the lingual nerve (0.25%). Related to the type of surgery, most sensory disturbances were seen following periradicular surgery. Within the limitations of this study, it may be stated that oral
surgery in an outpatient setting of a teaching university hospital resulted in very low rates of trigeminal nerve injuries. It may be concluded that adequately surveyed trainees can perform mandibular surgery without an increased risk of trigeminal sensorial disturbance.

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