After condylar resection a decision on whether to proceed immediately to reconstruction has to be decided. In this paper, two patients who had undergone hemimandibulectomy including exarticulation, in one because of an expanded keratocystic odontogenic tumour and in the other because of oral squamous cell carcinoma, are presented. In one patient a metallic condylar reconstruction plate combined with an iliac crest graft was implanted for primary mandibular reconstruction, whereas in the other the part of the mandible that had been removed and the condylar head were not replaced. One patient was followed up for 5 years and the other for 6 years. Functional (max. incisal distance, protrusive and lateral excursions, occlusion and joint noises) and cosmetic results (scarring, facial nerve function), and also quality of life with and without primary mandibular replacement by a metallic condylar reconstruction plate are compared.
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