

DENTAL NEEDLE FRACTURE IN A 3-YEAR-OLD PATIENT: CASE REPORT

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INTRODUCTION

Dental needles are the primary instrument for administering the anesthetic agent in order to block nerve conduction of the painful stimulus.1 The Causes of needle rupture are probably due to poor workmanship, expired expiration date, incorrect length and gauge selection, incorrect technique for infiltration, and sudden movements.1,2 The broken needle within the soft tissue is a difficult object to locate and its removal requires total Knowledge Of anatomy, and in most cases hasto be under general anesthesia by trained maxillofacial surgeon.3

CASE REPORT

A three-year-old male patient went to the Specialty of Pediatric Dentistry and the mother reported that her son was treated 2 days earlier privately, when applying the mandibular technique on the right side, the needle was fractured, apparently due to the sudden movements that her son made, after this he was referred to the Civil Hospital of Guadalajara Dr. Juan I. Menchaca. Orthopantomography and Computed Tomography were performed with three-dimensional reconstruction where a foreign body corresponding to the fragment of the needle used was observed, later under general anesthesia an intraoral approach was performed on the inner aspect of the mandibular ramus on the right side, the internal and external pterygoid muscle was dissected by plans, the needle was observed, It was removed with a fly tweezer. It was sutured by surgical planes with Vicryl 4-0.





TREATMENT

The Fragment of the needle, which has a length of approximately 2 cm, was extracted. Postoperative Management consisted of antibiotic prophylaxis based on amoxicillin with clavulanic acid, analgesic and anti-inflammatory. The evolution of the postoperative follow-up was satisfactory.







CONCLUSION

Although the rupture of dental needles in the mandibular technique is low, interdisciplinary management should prevail for the correct handiling of these accidents.

Bibliography

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