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ate for physicians to base their treatment of patients on scientific data rather than personal feelings about what is good medicine.

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Long-term Nasal Mucosal Tissue Expansion Use

After reading the interesting Clinical Note on long-term nasal mucosal tissue expansion by Romo et al,1 I would like to expand the knowledge of the authors and the reviewers. When Romo et al, in the final paragraph of their article, state, “These studies are the first description of expanded mucosal surfaces to our knowledge,” they are mistaken.

Actually, on the other side of their region of interest—the nasal floor—in the mouth, mucosal tissue expansion has been performed and reported since 1986.2-5 Initially, intraoral subperiosteal tissue expansion was used for alveolar ridge augmentation purposes.2,3 Later on, palatal soft-tissue expansion was applied for facilitating the closure of oronasal fistulas in cleft lip and palate surgery.3,7 Longitudinal animal experiments on mucoperiosteal expansion have already been performed and were and casual quos are to be published.8-10 The results indicate that mucoperiosteal expansion is as feasible as skin expansion and that it yields at least a temporary soft-tissue area gain of 85% of the base surface of a hemispherical expander. However, side effects were retardation of bony palatal growth in sagittal and transverse direction and the development of a bathtub bony depression. Microscopically, thinning of the epithelial layer, reorientation of collagenous fibers in sagittal and transverse direction, and the development of a bathtub bony depression. Microscopically, thinning of the epithelial layer, reorientation of collagenous fibers in the reticular layer (parallel to the surface of the tissue expander), and formation of a fibrous capsule were noted.10 The bony palatal shelf at the center of the expander base almost completely disappeared. Increased vascularity and focal chronic inflammation at the respective limitations of the capsule were not notable.

Maybe the authors would like to comment on these findings and to report on the effects of nasal mucosal expansion on the underlying bone of the nasal floor?

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