

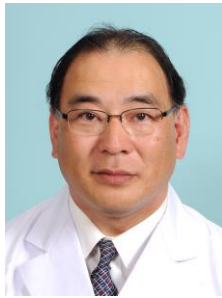


제 56차 대한악안면성형재건외과학회 종합학술대회 및 정기총회



The 56th Congress of the Korean Association of
Maxillofacial Plastic and Reconstructive Surgeons
November 3(Fri) – 4(Sat), 2017 | Global Convention Plaza, Seoul

Symposium 2



Prof. Akira Matsuo

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Present Position

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Academic Background

Graduated from Nippon Dental University, March 1986, D.D.S

Graduated from Nippon Dental University, Graduate School, March 1990, PhD

Academic Experiences

Nippon Dental University Hospital, Department of Oral and Maxillofacial Surgery, April 1990-March 2000

Honorary registrar: Canniesburn Hospital, Glasgow UK, 1998-1999

Tokyo Medical University Hospital, Department of Oral and Maxillofacial Surgery, January 2001-January 2015 March

Chief of Tokyo Medical University, Ibaraki Medical Center, Department of Oral and Maxillofacial Surgery, 2015 Apr - present

Certification of the Specialists

Fellow of the International Board for the Certification of Specialists in Oral and Maxillofacial Surgery (FIBCSOMS)

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Applications and limitations of maxillomandibular advancement from the sleep medicine perspective

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Abstract

Obstructive sleep apnea (OSA) disorders cause not only daytime sleepiness, but also cognitive task failure and consequently various circulatory disorders. OSA occasionally occurs concomitantly with other sleep disorders. Therefore, a multidisciplinary team approach is necessary to treat OSA.

Tokyo Medical University Hospital has set up a panel of doctors with expertise in relevant fields (i.e., circulatory internal medicine doctors, psychiatrists, otorhinolaryngologists, dentists, oral and maxillofacial surgeons) who function as a team to collectively examine OSA patients. This panel, which has been evaluating more than 2000 OSA patients since November 2004, has reached a consensus on an optimal treatment plan.

Continuous positive airway pressure and oral appliance therapy are the most common treatment options for OSA. However, both methods exert their effects only when the equipment is set, and are occasionally difficult to use overnight during sleep time. Surgical approaches overcome these problems completely, and maxillomandibular advancement (MMA) is highly effective. Our oral and maxillofacial surgeon team performs MMA as an OSA treatment option. The surgical procedures are basically the same as orthognathic surgery (sagittal split ramus osteotomy and Le Fort 1); however, the patient background and treatment goals are completely different. Occasionally, the chief complaint is not resolved despite a sharp decrease in the apnea hypopnea index. Therefore, MMA should be performed together with a medical sleep team. Moreover, surgeons who perform MMA should fully comprehend both orthognathic surgery and sleep medicine.

In my lecture, I will talk about the applications and limitations of MMA from the sleep medicine perspective.

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