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RE-INNERVATION OF INTRAORAL REVERSED DERMAL GRAFTS "Experimental Study"

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ABSTRACT

Re-innervation of reversed dermal graft, was no longer studied. This study was conducted on dogs to evaluate and study the re-innervation of reversed dermal grafts intra-orally. The grafts were taken from the thigh of each animal and transplanted to the cheek mucosa of the same animal. The results showed that re-innervation started at the second week and continued on. It started to form at the base and periphery of the graft following the course of blood vessels and collagen fibers. Such results are similar to a great extent to that was found by other anuthers but with other types of skin grafts. It could be concluded that; re-innervation is a part of the healing process, a procedure which is done by the graft bed, so, it is not the graft that is responsible for healing but actually the vital bed, and the graft is only a receiver for the healing process. If it is expected to find a difference between different graft types, it could be related to the inherited structure of the graft and the distribution of the blood vessels, collagen fibers and intrinsic nerve fibers. Further studies on an electron microscopic level may be needed to go through such level.

INTRODUCTION AND REVIEW OF LITERATURE:

Autogenous soft tissue grafts have been advocated for reconstruction of congenital or acquired intraoral mucosal defects. The most popular of which are mucosal grafts, split thickness skin grafts, dermis grafts and reversed dermal skin grafts. Concerning the indications, advantages, disadvantages and technical concepts, there are many studies[1,2,4,5,7,9,10-18], that have covered such fields of research.

Vindenes[22] mentioned that transplantation of skin was adopted as a clinical method for wound closure soon after Reverdin's introduction of skin grafts in 1869.

Valencia et al.[21] mentioned that skin graftin has become a technique that is routinely and some times preferentially considered as skin replacemer for burns, chronic ulcers, and skin defects after cu taneous surgical procedures. When selected as th best alternative for wound closure, autologous ski grafts are commonly considered the gold standarc Availability of autologous grafts is a major ob stacle, however, and the search for a manufacture skin replacement has continued. No doubt that ser sation is known to be one of the protective mech anisms for livings.

In spite of the too much and accumulative re search work done in respect to soft tissue graftin but still relatively rare the work done about the re

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