

## SUTURE OF THE MONTH

# Monosyn® Quick Dental

The topic of wound closure in veterinary dentistry and oral surgery has been growing in importance in recent years as pet owners are recognising the relevance of dental health. This rising awareness and the numerous pets with genetic predispositions (like brachy-cephalic breeds) are the reasons for more frequent oral surgery in cats and dogs.

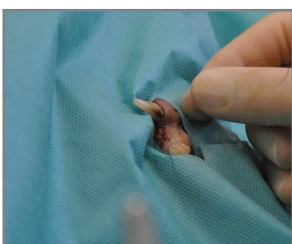
The anaesthetised and intubated patient is lying on the side for oral surgery. In addition to the general anaesthesia (by injection and inhalation) we recommend regional anaesthesia of the head. With such peripheral nerve-blocks a selective pain elimination can be achieved (see also: Peripheral Nerve Block ([bbraun-vetcare.com.au](http://bbraun-vetcare.com.au))). For extraction of teeth that are still tight in the alveoli, a gingival flap is prepared over the affected tooth / teeth first. With a lateral surgical approach, the gingiva is cut trapezoidal with a scalpel and cautiously detached from the periosteum. After the gingival flap is opened, the bone can be milled, so that the roots of the affected tooth are freed and the whole tooth can be extracted without great effort. Be careful not to leave remains of the roots in the alveoli.

Loose teeth usually can be extracted without the preparation of a flap. Ensure the complete extraction of roots also using this method.



1. After the tooth extraction

After cleaning the wound, the alveoli is closed by suturing the gingiva / gingival flap. Simple interrupted patterns or cross cruciate patterns are performed.



2. Beginning of the mucosal suture



The adaptation of the gingival edges should bring them into anatomic apposition without excessive tension, so that a good vascularisation of the wound is warranted. The threads are usually left in the mouth. Removal of stitches is usually not required



3. Completed mucosal suture

Gingiva is a tissue with fast healing processes, so the suture material should be a fast resorbable one with only a short stimulus to the tissue.

Monosyn® Quick is a short term resorbable and monofilament suture material which loses 50 % of its tensile strength after 6-7 days. It is intended for use in soft tissue approximation when only short-term wound support is required (e.g., 7 days) and when rapid suture absorption is beneficial.

Fields of application are oral cavity, paediatric surgery, gynaecology and urology.

An additional advantage of Monosyn® Quick is a smooth surface that glides easily through the mucosa without harm. As all the other monofilament suture materials, Monosyn® Quick has no capillary action and thus plays no role in the spread of infection.

### SOURCE:

Clinical expert: Dr. A. Wagner, data on file at B. Braun Group, Germany