

The Surgical Landmark for Facial Foramen

Jumroon Tungkeeratichai, Thongchai Bhongmakapat, Porncharn Saitongdee, Pisamai Orathai

ABSTRACT

Objective: To study the localization and relative of the supratrochlear, supraorbital, infraorbital and mental foramen in Thai cadavers to external landmarks for helps the surgeon to easily and practically identify these foramen.

Materials and methods: The localization of the supratrochlear, supraorbital, infraorbital and mental foramen in adult Thai cadavers were studied in 110 cadevers (220 sides) from 2008 until 2012. The analyses were also performed to compare differences between sexes and sides.

Results: Mean length of supraorbital foramen from nasal midline on the right side was 2.76 cm, left side 2.75 cm, above supraorbital rim right side 0.23 cm, left side 0.23 cm. Mean length of supratrochlear foramen from nasal midline on the right side was 1.77 cm, left side 1.76 cm. Mean length of infraorbital foramen from maxillary midline on the right side was 3.06 cm, left side 3.07 cm, from infraorbital rim on the right side was 0.94 cm, left side 0.92 cm. Mean length of mental foramen measurement straight to symphysis menti on the right side was 3.19 cm, left side 3.18 cm. Measurement along curvature of the mandible on the right side was 3.49 cm, left side 3.49 cm.

Conclusion: The knowledge gained from this study is quite important, since it helps the surgeon to easily and practically identify supraorbital notch/foramen, supratrochlea foramen, infraorbital foramen and mental foramen. This will help avoid injury of the neurovascular bundles passing though these sets of foramen.

Keywords: Supraorbital foramen, Supratrochlear foramen, Infraorbital foramen, Mental foramen.

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INTRODUCTION

The supraorbital notch/foramen, supratrochlear foramen, infraorbital foramen and mental foramen are important anatomical landmarks to facilitate surgery of several diseases including trauma, tumor, inflammation, infection and esthetic procedure. For many surgeons including facial plastic, general plastic, occuloplastic, maxillofacial and neurosurgeon, it is essential to avoid injury of the neurovascular bundles passing though these kinds of foramen.

Agthong¹ studied and reported on the anatomical variations of the important apertures in the orbit. The present results suggest that race, side and gender should be of concern during the orbital surgery.

Tulika Gupta² reported that supraorbital, infraorbital and mental foramen most often lies on a vertical line with second premolar in 80% of skulls. Computer tomographic (CT) scan offers a more accurate detection of the mental foramen than conventional radiographs.

Taiseer Al-Khateeb³ found that the position of mental foramen on panoramic radiographs in Jordenians is most commonly located between the mandibular premolar tooth, and this result was similar to previous findings in caucasion population.

METERIALS AND METHODS

The subjects for this research consisted of 110 Thai cadavers: 61 male and 49 female adults at the Department of Anatomy, Faculty of Science, Mahidol University, Bangkok, Thailand. The anatomical structures of facial foraminas were studied on 220 sides of 110 cadavers during 2008 to 2011. Measurements were made at the center of supraorbital notch/foramen from nasal midline and above orbital rim, supratrochlear foramen from nasal midline, infraorbital foramen from the maxillary midline and below infraorbital rim. The distance between mental foramen to

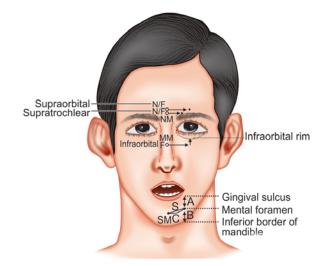


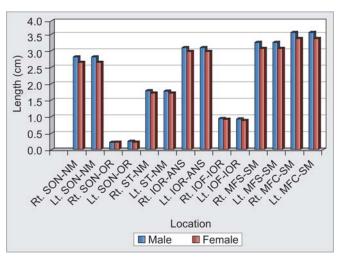
Fig. 1: Measurements were made—SON-NM: Supraorbital notch or foramen to nasal midline; SON-OR: Supraorbital notch or foramen to orbital rim; ST-NM: Supratrochlear foramen to nasal midline; IOR-MM: Infraorbital rim to maxillary midline; IOF-IOR: Infraorbital foramen to infraorbital rim; A: From gingival sulcus to mental foramen; B: From mental foramen to inferior border of mandible; C: From symphysis menti to the mental foramen (in curved line related to mandibular curvature as measured with a flexible ruler); D: The ratio of A/A+B: D; S: Straight measurements from symphysis menti to the mental foramen to related to mandibular curvature as measured with a sliding caliber)

symphysis menti was measured straight and along the curvature of mandibular bone. Measurements in vertical plane were also made: (i) from gingival sulcus to mental foramen = A, (ii) from mental foramen to inferior border of mandible = B, and (iii) the ratio of A/A+B = D (Fig. 1).

The position of the mental foramen was recorded with the long axis of a tooth. Complete data of measurements were separated into gender and sides. The statistical package for social science (version 11) was used for the analyses. The mean, standard deviation, minimum and maximum for each of the measurements were assessed as well as comparison between genders and sides using the paired and unpaired t-test.

RESULTS

The results of 61 male and 49 female cadavers were revealed (Graph 1). The most common of supraorbital had two branches. Right supraorbital had two branches 52.73% and had three branches 44.55%. Left supraorbital had two branches 54.55% and three branches 40.91%. The most common of supratrochlear had two branches 81.82% and left supratrochlear had two branches 80.00% (Table 1).



Graph 1: Differences of mean length in each location between male and female

Table 2 shows the mean length of supraorbital foramen from nasal midline on the right side 2.76 cm and left side 2.75 cm, and there is a significant difference between gender, above from supraorbital rim right side 0.23 cm and left side 0.23 cm.

The mean length of supratrochlear foramen from nasal midline right side was 1.77 cm and left side 1.76 cm; the distrance between supraorbital foramen and supratrochlear

Number of branches		Supr	atrochlear			Supraorbital				
	Right			Left		Right		.eft		
	n	%	n	%	n	%	n	%		
One branch	10	9.09	10	9.09	3	2.73	5	4.55		
Two branches	90	81.82	88	80.00	58	52.73	60	54.55		
Three branches	10	9.09	12	10.91	49	44.55	45	40.91		
Total	110	100.00	110	100.00	110	100.00	110	100.00		

Table 1: Number of nerve branches: supratrochlear and supraorbital

 Table 2: Anthropometric measurements related to the supraorbital notch/foramen, supratrochlear foramen, infraorbital foramen and mental foramen

Locations (cm)	Total (n = 110)				Males (n = 61)				Femal	t-test			
	Mean	SD	Min	Max	Mean	SD	Min	Max	Mean	SD	Min	Max	p-value
Rt. SON-NM	2.76	0.31	2.05	3.88	2.83	0.33	2.05	3.75	2.67	0.28	2.22	3.88	0.010**
Lt. SON-NM	2.75	0.27	2.22	3.75	2.83	0.29	2.25	3.75	2.65	0.20	2.22	3.05	0.000***
Rt. SON-OR	0.24	0.07	0.10	0.42	0.24	0.08	0.1	0.42	0.24	0.05	0.15	0.33	0.623
Lt. SON-OR	0.27	0.06	0.15	0.52	0.27	0.06	0.15	0.42	0.26	0.06	0.15	0.52	0.597
Rt. ST-NM	1.77	0.23	1.35	2.51	1.80	0.24	1.51	2.51	1.73	0.21	1.35	2.15	0.094
Lt.ST-NM	1.76	0.22	1.35	2.51	1.79	0.22	1.51	2.51	1.72	0.20	1.35	2.25	0.096
Rt. IOR-ANS	3.06	0.24	2.25	3.62	3.11	0.22	2.66	3.62	3.00	0.25	2.25	3.5	0.011*
Lt. IOR-ANS	3.07	0.25	2.2	3.8	3.13	0.24	2.65	3.8	3.00	0.25	2.2	3.5	0.006**
Rt. IOF-IOR	0.94	0.17	0.28	1.55	0.95	0.17	0.45	1.25	0.93	0.18	0.28	1.55	0.534
Lt. IOF-IOR	0.92	0.21	0	1.55	0.94	0.22	0	1.55	0.90	0.21	0	1.55	0.334
Rt. MFS-SM	3.19	0.30	2.4	3.85	3.27	0.29	2.52	3.85	3.09	0.28	2.4	3.52	0.001**
Lt. MFS-SM	3.18	0.29	2.45	3.8	3.26	0.27	2.5	3.8	3.09	0.28	2.45	3.5	0.002**
Rt. MFC-SM	3.49	0.31	2.73	4.4	3.57	0.29	2.84	4.4	3.39	0.30	2.73	3.84	0.002**
Lt. MFC-SM	3.49	0.30	2.75	4.4	3.57	0.28	2.82	4.4	3.40	0.30	2.75	3.85	0.003**

SON/F: Supraorbital notch or foramen; NM: Nasal midline; ST: Supratrochlear foramen; NM: Nasal midline; IOF: Infraorbital foramen; MM: Maxillary midline; IOR: Infraorbital rim; MFS: Mental foramen measurement straight; MFC: Mental foramen measurement along curvature of the mandible; SM: Symphysis menti; *: Significant difference between genders at p < 0.05; **: p < 0.01; ***: p < 0.001

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the right eide and left eide

Position	Gender	n	Mean (cm)	SD	K-S test	p-value
Right A	Male	61	1.33	0.32	1.299	>0.05
-	Female	49	1.19	0.37	1.483*	< 0.05
Left A	Male	61	1.33	0.32	1.299	>0.05
	Female	49	1.19	0.37	1.483*	< 0.05
Right B	Male	61	1.33	0.24	1.145	>0.05
	Female	49	1.37	0.34	1.588*	< 0.05
Left B	Male	61	1.33	0.24	1.145	>0.05
	Female	49	1.37	0.34	1.588*	< 0.05
Right D	Male	61	0.50	0.07	2.427*	< 0.05
	Female	49	0.46	0.09	1.712*	< 0.05
Left D	Male	61	0.50	0.07	2.427*	<0.05
	Female	49	0.46	0.09	1.712*	<0.05

Table 2: Mean and standard doviation of A R and D of male and female and

Note: *: Non-normality; A: Length from gingival sulcus to mental foramen; B: Length from mental foramen to inferior border of mandible; D: A/A+B; K-S test: Kolmogorov-Smirnov test

Table 4: Location	of teeth and mental foramen
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Gender	Ri	ght location of t	ooth		Left loo			
	In the line with the first premolar	Between the first and second premolar	In the line with the second premolar	Total	In the line with the first premolar	Between the first and second premolar	In the line with the second premolar	Total
Males n (%)	12 (19.67)	24 (39.34)	25 (40.98)	61 (55.45)	11 (18.03)	24 (39.34)	26 (42.62)	61 (55.45)
Females n (%)	9 (18.37)	17 (34.69)	23 (46.94)	49 (44.55)	9 (18.37)	17 (34.69)	23 (46.94)	49 (44.55)
Total n (%)	21 (19.09)	41 (37.27)	48 (43.64)	110 (100.00)	20 (18.18)	41 (37.27)	49 (44.55)	110 (100.00)

foramen was on average on the right side 1 cm and left side 1 cm.

The mean length of infraorbital foramen from maxillary midline on the right side was 3.06 cm and left side 3.07 cm. There is a significant difference between gender. The mean length of infraorbital foramen from infraorbital rim on the right side was 0.94 cm and left side 0.92 cm.

The mean length of mental foramen measurement straight to symphysis menti on the right side was 3.19 cm and left side 3.18 cm, while measurement along curvature of the mandible on the right side was 3.49 cm and left side 3.49 cm.

On the right side, the average length from gingival sulcus to mental foramen (A) of male and female was 1.33 and 1.19 cm (SD = 0.32 and 0.37), the average length from mental foramen to inferior border of mandible (B) of male and female was 1.33 cm and 1.37 cm (SD = 0.24 and 0.34), and the proportion of A/A+B (D) of male and female was 0.50 and 0.46 (SD = 0.07 and 0.09). On the left side, the average length from gingival sulcus to mental foramen (A) of male and female was 1.33 cm and 1.19 cm (SD = 0.32 and 0.37), the average length from mental foramen to inferior border of mandible (B) of male and female was 1.33 cm and 1.37 cm (SD = 0.24 and 0.34), and the proportion of A/A+B (D) of male and female was 0.50 and 0.46 (SD = 0.07 and 0.09) (Table 3). Mental foramen was on the same vertical plane as in the line of second premolar 43.64% on the right side, 44.55% on the left side and between the first and second premolar 37.27% on the right side and 37.27% on the left side (Table 4).

DISCUSSION

The supraorbital notch/foramen, supratrochlear foramen, infraorbital foramen and mental foramen are very important anatomical landmarks for the surgeon before surgery. In this study cadavers have the same skin subcutaneous and periostium as alive people. There was no shrink effect from formalin, because some cadavers are fresh cadavers. Distance of supraorbital N/F, supratrochlear foramen from midline did not show any difference from previous studies in Thai⁴ but was different from those studied in white, black and Hispanic subjects.⁵ Distance between supraorbital notch/foramen and supratrochlear foramen was 1 cm. Before surgery the surgeon can palpate notch/foramen and measurement from midline and mark 1.7 cm to supratrochlear foramen and 2.7 cm to supraorbital notch/ foramen and supraorbital foramen above orbital rim .23 cm. Distance from infraorbital foramen to maxillary midline mean was 3 cm, below infraorbital rim 0.9 cm.

Mental foramen is very important because when measurement straight from symphysis menti to mental foramen it was shorter than measurement along curvature of mandibular bone and longer than when compared with prior study that measurement was made from skull, because the skull does not have subcutaneous skin and periostium.

The mean distance from the mental foramen to the symphysis menti in this study was different from that in previous studies in Thai,⁶ Chinese⁷ and British.⁸

The position of the mental foramen related to the tooth ia variable among races,^{2,9,10} but the most common position of mental foramen in this studies (44.55%) was in line with the long axis of the second lower premolar,which was in agreement with previous studies in Thais, Asians and Westerners.^{4,11-14}

CONCLUSION

The knowledge gained from this study is quite important, since it helps the surgeon to easily identify supraorbital N/F 2.7 cm from midline and 0.23 above supraorbital rim, supratrochlear foramen 1.7 cm from midline, infraorbital foramen from maxillary midline 3.06 cm, and there is a significant difference between sexes and gender. The mean of length of infraorbital foramen from infraorbital rim on the right side was 0.94 cm and left side 0.92 cm. The mean length of mental foramen measurement straight to symphysis menti on the right side was 3.19 cm and left side 3.18 cm; measurement along curvature of the mandible on the right side was 3.49 cm and left side 3.49 cm. This was half way between gingival sulcus and inferior border of mandible in vertical plane and closely related with the second premolar.

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