

SECONDARY ALVEOLAR BONE GRAFTING USING PLATELET-RICH PLASMA IN ALVEOLAR CLEFT  
PATIENTS - TWO CASE REPORTS

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**Aim.** Cleft lip and palate is the most common congenital deformity affecting craniofacial region. Bone grafting of the alveolus is an essential part of the treatment protocol for cleft patients. Autogenous bone is still a gold standard for secondary bone grafting in alveolar clefts. The worldwide use of platelet-rich plasma (PRP) therapy shows good results in their intrinsic growth factors to stimulate and accelerate a healing response. Aim of this report was to demonstrate 2 cases with autogenous cancellous bone and PRP use in bone grafting procedure in cleft children.

**Methods.** Two patients 8 and 9 years of age with complete unilateral cleft lip, alveolus and palate and unilateral cleft lip and alveolus were described. Both underwent secondary bone grafting with autogenous cancellous bone graft harvested from tibia and additionally PRP.

**Results.** Early postoperative period and bone healing 6 month after operation were observed. Primary wound healing was seen in both patients with no significant pain and swelling postoperatively. PRP use is a relatively simple procedure to be performed simultaneously with secondary alveolar bone grafting.

**Conclusion.** Non-complicated wound healing occurred. Procedure with PRP demands either additional personal to make preparations or longer operation time. Long term observation is necessary to confirm the effectiveness of PRP use in secondary bone grafting for cleft children patients.