

University "Ss Cyril and Methodius" Faculty of Dentistry, Department for Oral surgery and Implantology, Skopje, Macedonia



TYPES OF SUTURES IN ORAL SURGERY

Biljana Evrosimovska PhD, Daniela Veleska-Stevkovska PhD, Vesna Jurikovska-Sotarovska PhD, Cena Dimova PhD, Visar Disha PhD

2021

wound edge apposition;

provide adequate tension;

maintain hemostasis;

GOALS OF

suturing

aid in wound healing;

avoid wound infection;

produce aesthetically pleasing scar by approximating skin edges.





Types of sutures



Absorbable

Monocryl (polyglecaprone) Fast absorbing gut Chromic gut PDS II (polydioxanone)

Polyglicolic Acid Polygalactin 910 Polygalactin 910 – rapid **NON-ABSORBABLE**

Nylon Polyamide Polypropylene Polyester

Silk Lenin Cotton Polyamide braided Polyester braided

RESEARCH

2003

Polygalactin 910

Vestardis and Yukna

"MEDLINE", "PubMed" and "CYBERLENINKA" databases

The research is based on already confirmed analyzes of individual authors and their collaborators in the period from 2003 to 2018.

D. A. Abyldaev et al. Cotton, linen and silk Volodko V. A. Vicryl and Vicryl plus 2011 2007 2005 Banche et al. Jae- Senk Kim et al. Leknes et al. Silk, nylon, polyester and Silk and PTFE Nylon polyglucapron 25 (polytetrafluoroethylene) A. V. Dryga at al. Polysorb, Maxon and Vicryl 2010 Aim of the research : 2008 Yilmaz et al. to examine the reaction of the tissue to different * Silk, Catgut, and polyglycapron 25 Sortino et al. suturing materials, Shahla Kakoei et al. Silk and PGA (polyglycolic acid) to determine the speed of wound healing and the Catqut (plain qut) and silk incidence of complications after their use to prove which of them is most suitable for oral Pons-Vicente O. Et al. surgery procedure. Silk and polyester sutures coated with Teflon

2018

Study review

Authors et al./year	Subjects	Type of procedure	Suture material	Main results
Leknes et al. / 2005	Human	periodontal surgery	Silk and PTFE - polytetrafluoroethylene (monofilament, non-resorbable)	 A stronger inflammatory reaction of the tissue was observed in silk sutures compared to PTFE sutures.
Shahla Kakoei et al / 2010	Animal (albino mice)	surgical intervention on oral mucosa (buccal mucosa)	Catgut (plain gut) and silk	 In the first two postoperative days - the silk sutures showed a significantly greater inflammatory response to the surrounding tissue than the catgut sutures. However, in the next four days, a larger amount of fibrous tissue was observed around the catgut sutures compared to the silk sutures.
D. A. Abyldaev et al. / 2018	Human	oral-surgical intervention	Cotton, linen and silk (natural, multifilament, non-resorbable)	 Cotton, linen, silk as multifilament sutures induce infection and subsequent inflammation much more often than monofilament sutures. Silk has been shown to have a particularly inhibitory effect on macrophages, affecting mainly the adhesion of these cells.
Banche et al. / 2007	Human	dentoalveolar surgery	Silk (resorbable) nylon (monofilament, non-resorbable) polyester (multifilament, non-resorbable) and polyglucapron 25	 Bigger amount of adherent bacteria was observed around non-resorbable sutures than on resorptive ones. Resorbable silk and polyglucapron 25 showed the lowest amount of adherent bacteria.
Yilmaz el al. /2010	Animal	surgical intervention on oral mucosa (buccal mucosa)	Silk (natural, multifilament, non-resorbable), Catgut (natural, monofilament, resorbable) and polyglycapron 25 (synthetic, monofilament, resorbable)	 Reactions to silk and catgut are similar in animals with diabetes and in healthy individuals. More positive effects on tissue healing with polyglucapron 25 compared to others.
Pons-Vicente O. et al./2010	Human	Implantology	Silk and polyester sutures coated with Teflon	 The results showed that there is a larger accumulation of plaque on the silk threads. The intraoperative manipulation with the silk sutures was more uncomfortable, and the patients comfort was worse compared to the polyester sutures coated with Teflon.

Clinical cases



Clinical case No. 1:

- Loss of bone tissue on the canine and first premolar
- Bone augmentation was performed with PRF and PRF membrane
- Suture material: absorbable suture material



Clinical case No.2:

- Extraction of the radix on second premolar
- Bone augmentation was performed with PRF and PRF membrane
- Suture material: Non-absorbable





DISCUSSION

INFLAMATI

Studies conducted to determine the reactions of oral tissues caused by suturing materials have shown that they cause an inflammatory reaction, which is most pronounced in silk and cotton, and minimally expressed in others including nylon, ePTFE polyester, polyglecaprone 25, PGA.

(Effects of polyglecaprone 25, silk and catgut suture materials on oral mucosa wound healing in diabetic rats: an evaluation of nitric oxide dynamics. *Yilmaz N, Inal S, Muğlali M, Güvenç T, Baş B Med Oral Patol Oral Cir Bucal. 2010 May 1; 15(3):e526-30.*; Banche G, Roana J, Mandras N, et al. Microbial adherence on various intraoral suture materials in patients undergoing dental surgery. *Journal of Oral and Maxillofacial Surgery.* 2007;65(8):1503–1507)



- Confirmed results indicate the inflammatory tissue reaction caused by the adherent bacteria on the suturing material.
- Bacterial adhesion to nylon and poliglecaprone 25 compared to bacterial adhesion to silk is 5 to 8 times higher than nylon.

 Literary data indicate that bacterial dental plaque deposition is present 10 to 11 times on silk sutures and 4 to 11 times on ePTFE.



SYSTEMIC DISEASES

Systemic diseases such as poorly controlled diabetes mellitus and cardiovascular disease can cause an oral inflammatory reaction.

Therefore, an inflammatory tissue reaction that is primarily provoked by suturing materials may falsely suggest that it is caused by a systemic disease.

OTHER PROVOKING FACTORS

Other provoking factors that can contribute to the occurrence of oral inflammation are smoking and the use of other tobacco products.

However, there is still a lack of clinical studies that could reliably support this hypothesis.

CONCLUSION

it is evident that different suturing materials used in oral surgery cause a wide variety of tissue reaction, depending on several factors:

- the surface characteristics of the material and
- the amount of bacterial adherence.

This research emphasizes the need for careful selection of suturing material during oral surgery.

Characteristics of ideal suturing material:



should not be allergic or cause any tissue inflammation;

have least capillarity so that the material does not soak up much of the inflamed tissue fluid surrounding the wound and further exaggerate infection;

should have good knotting properties;

easy to sterilize;

to be visible in the surgical field;

to have an affordable price.