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## ISP-8-5 Single-port access laparoscopic myomectomy using a new suturing material, V-Loc TM

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Single-port access laparoscopic surgery has been widely applied to gynecological operation. However, the application of single-port access laparoscopic surgery has been experienced some limitations because of technical difficulty, especially in intracorporeal suturing and knot tying.

We performed a single-port access laparoscopic myomectomy in a 32-year old, unmarried patient with a huge myoma using a new suturing material, V-Loc TM (Covidien, USA). A 1.5cm sized vertical intra-umbilical skin incision, an Alexis® wound retractor (Applied Medical) was inserted into peritoneal cavity. We used a surgical glove as the single 3 channel port.

Entering the abdominal cavity, 7 x 7cm sized subserosal myoma on fundus was identified. Myoma was dissected from uterus using conventional straight laparoscopic instrument and EnSeal® (Ethicon Endo-surgery, USA). Uterine defect was closed layer by layer using a V-Loc TM (Covidien, USA), an absorbable suturing material with unidirectional barbs and welded loop, which made suturing faster and knot tying eliminable. Total operation time was 148 minutes and blood loss was about 30mL. The patient was discharged without any complications on postoperative day 2.

We concluded that single-port access laparoscopic myomectomy could be performed conveniently without any complications with V-Loc TM (Covidien, USA), a new suturing material with barbs and welded loop.

## **ISP-8-6** A method of dental implant installation before pregnancy

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Objective: Before pregnancy, women should pay attention to their oral health. When they lost their teeth, dental implant is one of the options to rehabilitate the missing teeth. In general, the dental implant was installed into edentulous ridge and waiting for osseointegration. Then, dentists reflected the gingival and using healing abutment to shape the gingival in phase II surgery. However, consideration of the risk of drugs or anesthesia on fetal development, dentists could combine phase I and phase II surgery before pregnancy.

Methods: This 35y/o woman had a right mandible second premolar missing for a period of time and asked for a dental implant treatment before pregnancy. After routine history taking and examination, we confirm that she is not pregnant before dental implant surgery. We installed the dental implant (Ankylos, Dentsply Friadent, Mannheim, Germany) and soft tissue management at the same time. Due to the installation of implant body and connect the healing abutment simultaneously, we don't have to use extra anesthetic drug for the next steps. After three months osseointegration waiting, we connect the implant abutment and crown.

Results: After the dental implant prosthesis delivery, patient regains her chewing function and esthetic. From then to now, patient is satisfied the treatment results. Conclusion: Fear of the impact of drugs on fetal development, most pregnant women and dentists do not want to take medicine or anesthesia injections during pregnancy. Implant body installation and soft tissue management at the same time before pregnancy can decrease the alveolar ridge atrophy and reduce the risk for the fetal development.

## ISP-8-7 The miniscrew as orthodontic anchorage replaced conventional dental implant before and during pregnancy

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Objective: Much  $25\sim40$  years-old female had pregnant experiences during the dental orthodontic treatment period. Usually, the orthodontics avoided to use any radiography taking and an esthetic drug the pregnancy stage as rarely as possible in the dental surgical procedure, but this was difficult in past days. Now, orthodontics can choice the  $2\times10$  mm stainless-steel miniscrew with simple and safe surgical procedure to replace conventional dental implants as posterior anchorage when lacking posterior teeth.

Methods: The 32 years-old woman had bilateral mandibular second molars missing due to periodontal bony lesion with severe bony destruction, the dental treatment plan included periodontal treatment for control periodontitis, orthodontic treatment for alignment of dentition and adjustment of malocclusion, and dental implants of bilateral mandibular posterior area are final prosthesis. Before the pregnancy of the patient, we completed periodontal treatment and used the  $2 \times 10$  mm mini-screws over the mandibular buccal shelf under local anesthesia as posterior orthodontic anchorage. During the 12-months orthodontic treatment, the miniscrew losing due to gingival inflammation and been removed directly without any anthesthia and drug when the gestation age of 28 weeks. The  $2 \times 10$  mm miniscrew reimplanted over the buccal shelf and completed orthodontic treatment after pregnancy that didn't delay all dental treatment time. Result: Use of stainless-steel miniscrews replaced aggressive surgical procedures of dental implants during the orthodontic treatment in the pregnant stage is a simple, safe treatment, and orthodontics can complete orthodontic treatment effectually.

Conclusion: Prevention of drugs and anesthesia injection during pregnant period is very important, we used simple method as the minimum bone screw to complete orthodontic treatment that can achieve the goal easy.