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Mandibular growth direction following adenoidectomy.

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The purpose of this article is to test the hypothesis that the establishment of nasal respiration in children with severe nasopharyngeal obstruction can be eliminated as a factor in determining mandibular growth direction. The article describes the changes in mandibular growth direction (MGD) in a 5-year period after adenoidectomies and the establishment of nasal breathing in a population of Swedish children. Measurements of mandibular growth directions were obtained from serial cephalometric radiographs after adenoidectomies in 38 Swedish children aged 7 to 12 years with previous nasopharyngeal obstructions. These were compared with the growth directions in a control sample of 37 Swedish children with clear airways and matched for age and sex. The adenoidectomy sample initially showed significantly longer lower face heights, steeper mandibular plane angles, and more retrognathic mandibles than the matched controls. Analysis showed that during the 5 years after adenoidectomies, the girls had a more horizontal MGD (P less than 0.02) than did the female controls. A corresponding but not significant trend was found for the boys. The individual growth directions that were obtained following adenoidectomies were more variable than those found in the controls.

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