

DOUBLE STEP OSTEOTOMY FOR CHIN ADVANCEMENT IN A PATIENT WITH MICROGNATHISM ASSOCIATED WITH NAGER'S SYNDROME

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Objective: to present a case report of a patient with micrognathism associated with Nager's Syndrome who underwent orthodontic treatment, bilateral coronoidectomy and chin advancement using a double-step osteotomy technique. **Case report:** Patient LYK, female, 21 years old, diagnosis of Nager's Syndrome, presenting skeletal dystrophy with severe mandibular deficiency, condylar hypoplasia and limitation of buccal opening (21 mm) due to hyperplasia of the coronoid processes. Orthodontic treatment was compensatory and achieved an adequate occlusion without the need for orthognathic surgery. However, in order to compensate for the convex facial profile and to improve the mouth opening, the patient underwent chin advancement with a double step osteotomy and bilateral coronoidectomy. Two titanium miniplates (2.0 mm system) were used for internal fixation. After 6 months of physiotherapy for mouth opening, the patient presented a gain of 7 mm of opening (33.33%) and was satisfied with the aesthetic-functional result achieved. **Conclusion:** The double-step osteotomy technique allowed a greater advancement of the chin in relation to the conventional single cut osteotomy technique, providing a better antero-posterior projection of the chin with great stability. The decision of not performing a complex bimaxillary orthognathic with counter clockwise rotation of the occlusal plane allowed the bilateral coronoidectomy to be performed at the same surgical time, making possible a postoperative physiotherapy and stability of the temporomandibular joint.