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Editorial

One aspect of oral pathology and maxillofacial not to be overlooked in the anesthesiological approach to the patient are complications due to local anesthesia in maxillary bone.

Main procedures of local anesthesiology involve the greater palatine nerve, the infra-orbitary nerve and the posterior superior alveolar nerve: all of these nerves derive from the second sensitive

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Complications in Maxillary Local Anesthesia

branch of the trigeminal nerve. Complications that may arise following local anesthesia are breakage of the needle, injection of the solution in vessels, mechanical damage to the nerve bundle and migration of the solution in different sites. In breakage of the needle this should be quicky removed or identified; the injection of solution in vessels may determine distant transient effect of the solution (the ephinephrine present should be considered, too), while mechanical damage to the nerve bundle is rare but may occurr. With regards to the migration of the solution in different sites, the most common procedure that may determine this complication is posterior superior alveolar block, as this technique provides the block of this nerve with a long distance of the needle inside the soft tissues. Most common symptom is diplopia that commonly recovering with the local anesthesia.

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