



Received: October 15, 2024 Revised: November 26, 2024 Accepted: January 7, 2025

Corresponding Author: Warit Powcharoen, Department of Oral and Maxillofacial Surgery, Faculty of Dentistry, Chiang Mai University, Chiang Mai 50200, Thailand E-mail: warit.p@cmu.ac.th

The Accuracy of In-house Personalized Surgical Cutting Guide for Segmental Mandibulectomy: A Proof of Concept In Vitro Study

Chinnakrit Suttitumrongsawat¹, Wannakamon Panyarak², Hanpon Klibngern^{3,4}, Krit Khwanngern^{5,6}, Warit Powcharoen⁷

¹Graduate School, Faculty of Dentistry, Chiang Mai University, Thailand
²Division of Oral and Maxillofacial Radiology, Department of Oral Biology and Oral Diagnostic Sciences, Faculty of Dentistry, Chiang Mai University, Thailand
³Department of Otolaryngology, Faculty of Medicine, Chiang Mai University, Thailand
⁴Department of Plastic and Reconstructive Surgery, Chang Gung Memorial Hospital and Chang Gung University, Taiwan
⁵Department of Surgery, Faculty of Medicine, Chiang Mai University, Thailand
⁶Princess Sirindhorn IT Foundation Craniofacial Center Chiang Mai University, Thailand
⁷Department of Oral and Maxillofacial Surgery, Faculty of Dentistry, Chiang Mai University, Thailand

Abstract

Objectives: Recently, the new computer-assisted surgery workflow for segmental mandibulectomy and reconstruction has been developed. The aim of this study was to evaluate the accuracy of in-house personalized surgical cutting guides for osteotomy on the mandible prior to reconstruction in *in vitro* study.

Methods: Twenty mandibular stereolithography underwent segmental mandibulectomy using the personalized surgical cutting guides. The virtual surgical plans with randomly generated anatomical defects were developed, and personalized surgical cutting guides were created. The stereolithography of mandible and personalized surgical cutting guides were manufactured with the three-dimensional printer using fuse deposition modelling. The segmental mandibulectomy was carried out using the personalized surgical cutting guide. The accuracy of osteotomy was determined using the superimposition between virtual surgical simulation data and scanned images of postoperative stereolithography in software. The error of osteotomy was evaluated in terms of absolute angular and distance deviation.

Results: After superimposition, the mean absolute angulation deviation of osteotomy was 1.3835±0.2357 degrees (95%CI; 1.3081-1.4588) and the mean absolute distance deviation of osteotomy was 1.2975±0.2907 mm (95%CI; 1.2045-1.3904).

Conclusions: The in-house personalized surgical cutting guides provided acceptable accuracy and feasibility for osteotomy on mandible. Further investigation in terms of clinical benefits is needed.

Keywords: computer assisted surgery, mandibular reconstruction, surgical cutting guide, three-dimensional printing, virtual surgical planning

Oral Sci Rep. 2025; 46(1): 38-46