

International Journal of Dental Science and Innovative Research (IJDSIR)

IJDSIR : Dental Publication Service

Available Online at:www.ijdsir.com

Volume - 8, Issue - 2, March - 2025, Page No. : 15 - 19

Advancements and Applications of 3D Stereolithographic Models in Oral and Maxillofacial Surgery

¹Dr. Pooja Gopal Choudhary, Fellowship in Oral Oncology and Reconstruction Surgery, HCG Aastha Cancer Hospital, Ahmedabad.

²Dr. Saurabh Tomar, Junior Resident, Shrimant Rajmata Vijayaraje Scindia Medical College and Hospital, Shivpuri, M.P.

³Dr. Chayanica Midha, Department of Oral and Maxillofacial Surgery, PDM Dental College, Bahadurgarh, Haryana.

⁴Dr. Roopali Chahal, MDS Prosthodontics, Crown and Bridge, Sudha Rustagi College of Dental Sciences and Research.

⁵Dr. Rohit Singh, MDS Endodontist, Pvt Practitioner, Zonal Head - Clove Dental.

⁶Dr. Soumya V Shanbhag, Resident Doctor, OMFS, Apex Hair Transplant- Skin Clinic and Multispeciality Hospital, Noida.

Corresponding Author: Dr. Pooja Gopal Choudhary, Fellowship in Oral Oncology and Reconstruction Surgery, HCG Aastha Cancer hospital, Ahmedabad.

Citation of this Article: Dr. Pooja Gopal Choudhary, Dr. Saurabh Tomar, Dr. Chayanica Midha, Dr. Roopali Chahal, Dr. Rohit Singh, Dr. Soumya V Shanbhag, "Advancements and Applications of 3D Stereolithographic Models in Oral and Maxillofacial Surgery", IJDSIR- March – 2025, Volume – 8, Issue – 2, P. No. 15 – 19.

Copyright: © 2025, Dr. Pooja Gopal Choudhary, et al. This is an open access journal and article distributed under the terms of the creative common's attribution non-commercial License. Which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given, and the new creations are licensed under the identical terms.

Type of Publication: Original Research Article **Conflicts of Interest:** Nil

Abstract

Purpose: To explore the advancements and applications of three-dimensional (3D) stereolithographic (SLA) models in oral and maxillofacial surgery (OMFS), highlighting their impact on surgical planning, education, and patient outcomes.

Methods: A comprehensive review of the current literature on the development and utilization of 3D SLA models in OMFS was conducted, focusing on technological advancements, clinical applications, benefits, limitations, and future directions.

Results: 3D SLA models have significantly enhanced preoperative planning, intraoperative navigation, and

postoperative assessment in OMFS. They serve as valuable tools for surgical simulation, patient education, and the fabrication of custom implants and prosthetics. Challenges include high costs, the need for specialized equipment, and technical expertise.

Conclusion: The integration of 3D SLA models into OMFS has improved surgical precision and patient outcomes. Ongoing technological advancements are expected to further expand their applications and accessibility.

Keywords: 3D Stereolithographic Models, Oral and Maxillofacial Surgery, Surgical Planning, Patient-Specific Implants, Medical 3D Printing.

Introduction

Oral and maxillofacial surgery (OMFS) is a specialized field that deals with the diagnosis and surgical treatment of diseases, injuries, and defects affecting the face, jaw, and oral cavity. Given the complexity of craniofacial anatomy, precise surgical planning is essential to achieve optimal functional and aesthetic outcomes. Traditional imaging modalities such as two-dimensional (2D) radiographs and computed tomography (CT) scans provide valuable diagnostic information but often fall short in conveying intricate anatomical relationships, particularly in cases requiring detailed preoperative assessment.¹⁻³

The introduction of three-dimensional (3D) printing, particularly **stereolithographic (SLA) technology**, has revolutionized surgical planning and execution in OMFS. Stereolithography is an **additive manufacturing technique** that builds physical 3D models layer by layer using photopolymerization of liquid resin. The high resolution and accuracy of SLA models make them particularly valuable for **preoperative planning**, **intraoperative guidance, and patient education**.^{4,5}

3D SLA models offer a tangible and highly detailed representation of a patient's anatomy, enabling surgeons to visualize complex structures, plan osteotomies, and simulate surgical procedures before entering the operating room. This technology has proven beneficial in various OMFS applications, including:⁶⁻⁸

- Orthognathic Surgery Helps in planning and executing corrective jaw surgeries.
- **Trauma Reconstruction** Assists in restoring facial skeletal integrity after injuries.
- **Tumor Resection and Reconstruction** Facilitates resection planning and custom prosthetic fabrication.
- **Dental Implantology** Aids in implant placement and bone grafting procedures.

• **Congenital Deformities** – Supports surgical correction of conditions such as cleft lip and palate.

Beyond surgical applications, **3D SLA models enhance patient-doctor communication** by allowing patients to better understand their condition and the proposed surgical intervention. Additionally, they are valuable **teaching tools for medical education and resident training**, enabling hands-on learning without direct patient involvement.^{9,10}

As 3D printing technology continues to evolve, advancements in **biocompatible materials**, **printing speed**, **and cost-effectiveness** are expected to further enhance its role in OMFS. This review explores the latest developments in **stereolithographic 3D printing** and examines its **current and future applications** in oral and maxillofacial surgery.

Discussion

Advancements in 3D Stereolithographic Technology (11,12)

The evolution of 3D SLA technology has led to improvements in printing speed, resolution, and material properties. Modern SLA printers can produce highly detailed models with complex geometries, facilitating their use in various surgical applications. Advancements in biocompatible resins have also expanded the potential for intraoperative use and the development of patientspecific implants.

Applications in Surgical Planning and Simulation¹³

3D SLA models have become indispensable in preoperative planning and surgical simulation. They allow surgeons to visualize patient-specific anatomy, plan osteotomies, and rehearse procedures, thereby reducing intraoperative uncertainties. For instance, in orthognathic surgery, these models enable precise planning of bone repositioning, leading to improved functional and aesthetic outcomes.

Patient Education and Communication¹⁴⁻¹⁷

Physical 3D models serve as effective tools for patient education, enhancing understanding of surgical procedures and fostering informed consent. They also improve communication among multidisciplinary teams by providing a tangible reference for discussing surgical approaches and expected outcomes.

Fabrication of Custom Implants and Prosthetics¹⁸⁻²¹

The precision of 3D SLA models facilitates the design and fabrication of custom implants and prosthetics tailored to individual patient anatomy. This customization enhances the fit and function of implants, reduces operative time, and minimizes the risk of complications.

Limitations and Challenges^{22,23}

Despite their benefits, 3D SLA models present challenges, including high production costs, the necessity for specialized equipment, and the requirement for technical expertise in model creation and interpretation. Additionally, the accuracy of the models depends on the quality of the initial imaging data and the precision of the printing process.

Conclusion

The integration of 3D stereolithographic models into oral and maxillofacial surgery has significantly enhanced surgical planning, execution, and patient education. These models provide a tangible representation of complex anatomical structures, allowing for meticulous preoperative assessment and customization of surgical interventions. As technology continues to advance, it is anticipated that the accessibility and applications of 3D SLA models will expand, further improving patient outcomes and setting new standards in surgical care.

Future Directions

Future research and development in 3D SLA technology should focus on reducing production costs and

simplifying the fabrication process to make these models more accessible in routine clinical practice. Exploring biocompatible materials new could expand intraoperative applications, such as the direct production of implantable devices. Integrating 3D SLA models with emerging technologies like augmented reality and robotic surgery may also enhance surgical precision and outcomes. Additionally, establishing standardized protocols for the use of 3D models in surgical planning and education could further optimize their benefits across the field of oral and maxillofacial surgery.

The image below illustrates a 3D-printed stereolithographic model used in the surgical simulation of Le Fort I osteotomy and sagittal splitting ramus osteotomy in oral and maxillofacial surgery.



References

- Keser, E.; Naini, F.B. Accelerated orthodontic tooth movement: Surgical techniques and the regional acceleratory phenomenon. Maxillofac. Plast. Reconstr. Surg. 2022, 44, 1.
- Hartmann, A.; Schmohl, J.; Cascant Ortolano, L.; Bayer, O.; Schweizer, S.; Welte-Jzyk, C.; Al-Nawas, B.; Daubländer, M. Therapy of neurophysiological

- changes after oral and maxillofacial surgery—A systematic review. Appl. Sci. **2022**, 12, 1507.
- Lee, Y.C.; Sohn, H.B.; Park, Y.W.; Oh, J.H. Evaluation of postoperative changes in condylar positions after orthognathic surgery using balanced orthognathic surgery system. Maxillofac. Plast. Reconstr. Surg. 2022, 44, 11.
- Bartella, A.K.; Kamal, M.; Scholl, I.; Schiffer, S.; Steegmann, J.; Ketelsen, D.; Hölzle, F.; Lethaus, B. Virtual reality in preoperative imaging in maxillofacial surgery: Implementation of "the next level"? Br. J. Oral Maxillofac. Surg. 2019, 57, 644– 648.
- Park, S.Y.; Hwang, D.S.; Song, J.M.; Kim, U.K. Comparison of time and cost between conventional surgical planning and virtual surgical planning in orthognathic surgery in Korea. Maxillofac. Plast. Reconstr. Surg. 2021, 43, 18.
- Sugahara, K.; Koyachi, M.; Odaka, K.; Matsunaga, S.; Katakura, A. A safe, stable, and convenient three-dimensional device for high Le Fort I osteotomy. Maxillofac. Plast. Reconstr. Surg. 2020, 42, 32.
- Alkhayer, A.; Piffkó, J.; Lippold, C.; Segatto, E. Accuracy of virtual planning in orthognathic surgery: A systematic review. Head Face Med. 2020, 16, 1–9.
- Aydil, B.A.; Akbaş, M.; Ayhan, M.; Atalı, O.; Can, S.; Çömlekçioğlu, Y. Retrospective examination of complications observed in orthognathic surgical surgery in 85 patients. Turk. J. Trauma Emerg. Surg. 2022, 28, 698.
- Schneider, D.; Kämmerer, P.W.; Hennig, M.; Schön, G.; Thiem, D.G.; Bschorer, R. Customized virtual surgical planning in bimaxillary orthognathic

surgery: A prospective randomized trial. Clin. Oral Investig. **2019**, 23, 3115–3122.

- Wang, Y.; Cao, D.; Chen, S.L.; Li, Y.M.; Zheng, Y.W.; Ohkohchi, N. Current trends in threedimensional visualization and real-time navigation as well as robot-assisted technologies in hepatobiliary surgery. World J. Gastrointest. Surg. 2021, 13, 904.
- Sadeghi, A.H.; El Mathari, S.; Abjigitova, D.; Maat, A.P.; Taverne, Y.J.; Bogers, A.J.; Mahtab, E.A. Current and future applications of virtual, augmented, and mixed reality in cardiothoracic surgery. Ann. Thorac. Surg. 2022, 113, 681–691.
- Youn, S.; Geismar, H.N.; Pinedo, M. Planning and scheduling in healthcare for better care coordination: Current understanding, trending topics, and future opportunities. Prod. Oper. Manag. 2022, 31, 4407– 4423.
- Ge, Q.; Li, Z.; Wang, Z.; Kowsari, K.; Zhang, W.; He, X.; Zhou, J.; Fang, N.X. Projection micro stereolithography based 3D printing and its applications. Int. J. Extrem. Manuf. 2020, 2, 022004.
- Awad, A.; Fina, F.; Goyanes, A.; Gaisford, S.; Basit, A.W. 3D printing: Principles and pharmaceutical applications of selective laser sintering. Int. J. Pharm. 2020, 586, 119594.
- Prakash, K.S.; Nancharaih, T.; Rao, V.V.S. Additive manufacturing techniques in manufacturing—An overview. Mater. Today Proc. 2018, 5, 3873–3882.
- Yang, Y.; Wang, G.; Liang, H.; Gao, C.; Peng, S.; Shen, L.; Shuai, C. Additive manufacturing of bone scaffolds. Int. J. Bioprint. 2018, 5, 148.
- Paxton, N.C.; Nightingale, R.C.; Woodruff, M.A. Capturing patient anatomy for designing and manufacturing personalized prostheses. Curr. Opin. Biotechnol. 2022, 73, 282–289.

- Carneiro, N.C.; Oliveira, D.V.; Real, F.H.; da Silva Tabosa, A.K.; Júnior, J.T. A new model of customized maxillary guide for orthognathic surgery: Precision analysis. J. Craniomaxillofac. Surg. 2020, 48, 1119–1125.
- Seok, J.; Yoon, S.; Ryu, C.H.; Kim, S.K.; Ryu, J.; Jung, Y.S. A personalized 3D-printed model for obtaining informed consent process for thyroid surgery: A randomized clinical study using a deep learning approach with mesh-type 3D modeling. J. Pers. Med. 2021, 11, 574.
- 20. May, M.M.; Howe, B.M.; O'Byrne, T.J.; Alexander, A.E.; Morris, J.M.; Moore, E.J.; Kasperbauer, J.L.; Janus, J.R.; Van Abel, K.M.; Dickens, H.J.; et al. Short and long-term outcomes of three-dimensional printed surgical guides and virtual surgical planning versus conventional methods for fibula free flap reconstruction of the mandible: Decreased nonunion and complication rates. Head Neck **2021**, 43, 2342– 2352.
- Hertanto, M.; Ayoub, A.F.; Benington, P.C.; Naudi, K.B.; McKenzie, P.S. Orthognathic patient perception of 3D facial soft tissue prediction planning. J. Craniomaxillofac. Surg. 2021, 49, 783– 788.
- Steinbacher, D.M. Three-dimensional analysis and surgical planning in craniomaxillofacial surgery. J. Oral Maxillofac. Surg. 2015, 73, S40–S56.
- Park, J.H.; Jo, E.; Cho, H.; Kim, H.J. Temporomandibular joint reconstruction with alloplastic prosthesis: The outcomes of four cases. Maxillofac. Plast. Reconstr. Surg. 2017, 39, 6.