Review Article

Use of Lasers in Oral Maxillofacial Surgery; a crosssectional study done in Riyadh, Saudi Arabia

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Abstract

This cross-sectional survey was aimed to assess the use of Lasers in oral maxillofacial surgery. The study subjects comprised of general dentists and specialists/consultants having experience of 1-10 years, and more than 10 years. The use of Lasers in oral maxillofacial surgery was measured using 24 items questionnaire. After ensuring the reliability of the questionnaire, differences across gender, clinical position, and clinical experience were seen using a statistical measure Chi-square through SPSS to determine the statistically significant differences (p<0.05). Findings 52.7% of the participants were female, and 89.7% were general dentists, with the majority having experience between 1-10 years. They rank their current knowledge regarding laser use overall as average (36.3%) and about its use in OMFS as good (37.3%). Findings revealed that female participants participated more than males and practicing as general dentists having experience of 1-10 years of experience, have good knowledge of laser, and use it in their practice. General dentists were only aware of the use of laser in cosmetic surgery and consider it useful in different problems. Both groups often use lasers in their practice, while about the usefulness of lasers in different problems, both groups' opinions vary.

Keywords: Lasers, Maxillofacial surgery, Cross-sectional, Riyadh

NTRODUCTION

As the first reported use of lasers dedicated to Oral and Maxillofacial surgery, Strong *et al.* may have utilized CO2 lasers to excision premalignant and malignant tumors, among other surgical procedures. Kaplan *et al.* used lasers to treat oral tumors in 1974 [1, 2].

When a laser is used instead of a scalpel, there is less bleeding. This creates a largely bloodless battlefield. Because of its heat effects, the laser also coagulates the surrounding region [3]. Hemostasis is performed using lasers by contracting the collagen of the vascular wall of arteries with diameters of up to 500 m. The vessel diameter is reduced as a result, and the bleeding is managed. This feature substantially simplifies the treatment of vascular defects as well as hemorrhage management [4].

Lasers can be used to perform all medical treatments that aid in prosthesis recovery [5].

According to several writers, the benefits of lasers over other traditional dental equipment include increased coagulation, resulting in a drier operative field for improved visibility. When there is tissue ingestion and directed warmth develops, this interaction occurs [6].

Literature Review

An audit article states about the laser utilized in the oral treatment that these days, the use of laser involves the standard utilization of different medicines and dental hardware. The headway of innovation and information on numerous applications in regular practice will build the utilization of laser and our consciousness of the wide scope of benefits related with a medical procedure and mending, "The clinical utilization of the laser is captivating for two reasons," said Dr. Theodore Maiman, the maker of the main laser. From one perspective, it is a confident mission, while on the other, it repudiates the underlying picture of the laser

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is a passing beam" [6].

Another review study on the application of laser in oral surgeries in 2020 by Karishna, R.N., states that laser dentistry is fascinating; good scientific principles require that novel laser applications for treating patients be explored with prudence and reasonable judgment. Specific laser technologies are likely to become a key part of modern oral and maxillofacial professional procedures in the coming time.

MATERIALS AND METHODS

Study Design

This is a cross-sectional study conducted among Saudi dental professionals using an online survey.

Study Sample

311 dentists from Riyadh city were utilized in this study.

Study Instrument

The online questionnaire consists of questions related to demographic data followed by questions including knowledge and attitude towards the lasers in general, then related to their use in oral and maxillofacial surgery. The questionnaire consisted of closed-ended questions. Consent was taken from the participants before beginning with answering the questions. Google forms were utilized as a mode of questionnaire building and distributing. Data were kept confidential and stored until their use.

Instrument Validity and Reliability

A pilot study was conducted by sending the survey to 20 participants. The data were inserted in SPSS version 22 to determine the **reliability** using Chronbach's coefficient alpha (value: 0.781). **The validity** of the questionnaire was tested by sending it to experienced researchers in PSMMC, and changes were made according to their feedback and comments.

Statistical Analysis

Collected data were analyzed using SPSS version 22, where descriptive as well as inferential statistics were conducted. Comparisons between groups were made with the value of significance kept under 0.05 using the Chi-square test.

RESULTS AND DISCUSSION

In **Table 1**, frequency analysis, 52.7% of the participants were female, and 89.7% were general dentists, with the majority having experience between 1-10 years. In **Table 2**, both male and female participants were mostly general dentists, and more females with 10 years working experience compared to male dentists.

Male participants' perception about the use of lasers in different kinds of problems varies between somewhat true and true. However, for female participants, it mostly lies on do not know. **Tables 3 and 4** shows the differences across experience and qualification.

Questions		Frequency	Percent
	Male	147	47.3%
Gender	Female	164	52.7%
O Per d	General dentist	279	89.7%
Qualification	Specialist/consultant	32	10.3%
***	1-10 years	183	58.8%
Work experience	10+ years	128	41.2%
	Poor	101	32.5%
Iow do you rate your current level of knowledge	Average	113	36.3%
regarding lasers overall?	Good	97	31.2%
	Poor	102	32.8%
ow do you rate your current level of knowledge	Average	93	29.9%
regarding lasers used in OMFS?	Good	116	37.3%
	The 1910s	69	22.2%
W	1930s	51	16.45%
When were the lasers invented?	1950s	32	10.3%
	Don't Know	159	51.1%
How often do you use lasers in your practice?	Never		38.6%
	Often	120 184	59.2%
		7	

	Not useful	22	7.1%	
Can lasers be useful in performing biopsy procedures? Can lasers be useful for surgical extraction procedures?	Somewhat useful	105	33.8%	
	Very useful	76	24.4%	
	Don't know	108	34.7%	
	Not useful	39	12.5%	
	Somewhat useful	65	20.9%	
	Very useful	84	27.0%	
	Don't know	123	39.5%	
	Not useful		1.3%	
	Somewhat useful	4	28.0%	
Can lasers be useful for Pre-prosthetic surgery?		87 108	34.7%	
rre-prosincue surgery.	Very useful	112		
	Don't know		36.0%	
	Not useful	13	4.2%	
Can lasers be useful for implantology?	Somewhat useful	102	32.8%	
Can fasers be useful for implantology:	Very useful	56	18.0%	
	Don't know	140	45.0%	
	Not useful	1	.3%	
	Somewhat useful	1 87	28.0%	
Can lasers be useful for cosmetic surgery?	Very useful	127	40.8%	
	Don't know	96	30.9%	
	Not true		6.8%	
Vous possession about llagora effectively accordate		21 122		
Your perception about 'lasers effectively coagulate blood vessels in the field of operatory'?	Somewhat true	62	39.2%	
	Very true	106	19.9%	
	Don't know Not true		34.1% 5.5%	
		17		
Your perception about 'lasers provides a reduced need	Somewhat true	74	23.8%	
for sutures'?	Very true	116 104	37.3%	
	Don't know	101	33.4%	
	Not true	31	10.0%	
Your perception about 'lasers causing increased pain 4-	Somewhat true	72	23.2%	
7 days postoperatively'?	Very true	71	22.8%	
	Don't know	137	44.1%	
	Not true		3.5%	
	Somewhat true	11	30.9%	
Your perception about 'lasers causing health hazard if	Very true	96	27.7%	
beams are scattered or reflected'?	Don't know	86		
		118	37.9%	
	Don't know		40.2%	
	Argon	108	34.7%	
Which laser is indicated for pigmented lesions,	Diode	75	24.1%	
vascular anomalies, plastic surgery?	Nd: YAG, Ho: YAG	101	32.5%	
	Er, Cr: YSGG, ER: YAG	27	8.7%	
	Argon	7.0	24.4%	
	Diode	76 118	37.9%	
Which laser is indicated for soft tissue procedures?		103		
	Nd:YAG, Ho: YAG Er, Cr: YSGG, ER: YAG	14	33.1% 4.5%	
			4.2%	
	Argon Diode	13	28.0%	
Which laser is indicated for hard tissue procedures?		87 106		
	Nd:YAG, Ho: YAG	105	34.1%	
	Er, Cr: YSGG, ER: YAG		33.8%	
Do you think you require more knowledge about lasers	Yes No	161 12	51.8% 3.9%	51.8
in oral maxillofacial surgery procedures?	May be	138	3.9% 44.4%	55.6
	•			

Table 2. Comparison across Gender				
Questions		Male	Female	P value
Qualification	General dentist	137	142	.04
Qualification	Specialist/consultant	10	22	
Work experience	1-10 years	106	77	.000
F	10+ years	41	87	
How do you rate your current level of knowledge regarding lasers	Poor	59	42	
overall?	Average	71	42	.000
	Good	17 147	80 164	
	Poor	59	43	
How do you rate your current level of knowledge regarding lasers used in	Average	69	24	.000
OMFS?	Good	19	97	
	Never	112	8	
How often do you use lasers in your practice?	Often	32	152	.000
	Sometimes	3	4	
	Not useful	10	12	
	Somewhat useful	51	54	001
Can lasers be useful in performing biopsy procedures?	Very useful	49	27	.001
	Don't know	37	71	
	Not useful	12	27	
Can lasers be useful for surgical extraction procedures?	Somewhat useful	40	25	.000
Can fasers be useful for surgical extraction procedures:	Very useful	61	23	.000
	Don't know	34	89	
	Not useful	2	2	
Can lasers be useful for pre-prosthetic surgery?	Somewhat useful	41	46	.033
cum and to a moral for propulation ourgery.	Very useful	62	46	
	Don't know	42	70	
	Not useful	12	1	
Can lasers be useful for implantology?	Somewhat useful	50	52	.000
	Very useful	33	23	
	Don't know Not useful	52 1	88 0	
Can lasers be useful for	Somewhat useful	52	35	
cosmetic surgery?	Very useful	67	60	.000
cosmette surgery.	Don't know	27	69	
	Not true	4	3	
Your perception about 'lasers providing better healing as compared to	Somewhat true	49	31	
scalpel wounds'?	Very true	42	59	.028
•	Don't know	52	71	
	Not true	8	9	
77 (1 1 (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Somewhat true	51	23	000
Your perception about 'lasers provides a reduced need for sutures'?	Very true	55	61	.000
	Don't know	33	71	
	Not true	23	8	
Your perception about 'lasers causing increased pain 4-7 days	Somewhat true	43	29	.000
postoperatively'?	Very true	32	39	.000
	Don't know	49	88	
	Not true	1	1	
Your perception about 'lasers being very expensive and need training'?	Somewhat true	44	34	.000
Tour perception about tasers being very expensive and need training.	Very true	71	35	.000
	Don't know	31	94	
	Argon	55	21	
Which laser is indicated for soft tissue procedures?	Diode	64	54	.000
	Nd:YAG, Ho: YAG	16	87	
	Er, Cr: YSGG, ER: YAG	12	2	
	Argon	12	1	
Which laser is indicated for hard-tissue procedures?	Diode	47	40	.000
•	Nd:YAG, Ho: YAG	70	36	
D	Er, Cr: YSGG, ER: YAG	18	87	000
Do you think you require more k2wledge about lasers in oral	Yes	84	77	.099

5 7 maxillofacial surgery procedures? No May be 56 82

		Quali	fication	P- value
Questions		General dentist	Specialist/ consultant	
	Male	137	10	
Gender	Female	142	22	.055
	1-10 years	161	22	
Work experience	10+ years	118	10	.156
	Poor	98	3	
How do you rate your current level of knowledge	Average	97	16	.013
regarding lasers overall?	Good	84	13	
	1910s	59	10	
	1930s	44	7	
When were the lasers invented?	1950s	25	7	.010
	Don't Know	151	8	
T	Never	113	7	
How often do you use lasers in your	Often	161	23	.048
Practice?	Sometimes	5	2	
	Not useful	3	19	
	Somewhat useful	95	10	
Can lasers be useful in performing biopsy procedures?	Very useful	74	2	.000
	Don't know	107	1	
	Not useful	31	8	
Can lasers be useful for surgical	Somewhat useful	63	2	004
Extraction procedures?	Very useful	63	21	.00
Entraction procedures	Don't know	122	1	
	Not useful	7	0	
	Somewhat useful	70	10	00
Can lasers be useful for apicoectomy procedure?	Very useful	67	18	.000
	Don't know	135	4	
	Not useful	12	1	
	Somewhat useful	90	12	004
Can lasers be useful for implantology?	Very useful	37	19	.000
	Don't know	140	0	
	Not useful	1	0	
	Somewhat useful	72	15	00
Can lasers be useful for cosmetic surgery?	Very useful	110	17	.00
	Don't know	96	0	
	Not true	18	0	
Your perception about 'Lasers incise tissue more	Somewhat true	83	23	00
efficiently than a scalpel'	Very true	78	9	.00
•	Don't know	100	0	
	Not true	1	0	
Your perception about 'histologically, wound shows less	Somewhat true	59	7	07
wound contracture and scarring'?	Very true	73	15	.07
	Don't know	146	10	
	Not true	8	9	
our perception about 'lasers provides reduced need for	Somewhat true	65	9	00
sutures'?	Very true	103	13	.00
	Don't know	103	1	
	Not true	48	19	
7	Somewhat true	92	1	00
Your perception about 'lasers causing delayed healing'?	Very true	10	4	.00
	Don't know	129	8	
Your perception about 'lasers causing health hazard if	Not true	10	1	004
heams are scattered or reflected!?	Somewhat true	88	8	.000

Somewhat true

beams are scattered or reflected'?

88

Very true	65	21	
Don't know	116	2	
Argon	95	13	
Diode	69	6	.000
Nd:YAG, Ho: YAG	98	3	.000
Er, Cr: YSGG, ER: YAG	17	10	
Argon	13	0	
Diode	60	27	.000
Nd:YAG, Ho: YAG	102	4	
Er, Cr: YSGG, ER: YAG	104	1	
Yes	151	10	
No	11	1	.037
May be	117	21	
	Don't know Argon Diode Nd:YAG, Ho: YAG Er, Cr: YSGG, ER: YAG Argon Diode Nd:YAG, Ho: YAG Er, Cr: YSGG, ER: YAG No	Don't know 116 Argon 95 Diode 69 Nd:YAG, Ho: YAG 98 Er, Cr: YSGG, ER: YAG 17 Argon 13 Diode 60 Nd:YAG, Ho: YAG 102 Er, Cr: YSGG, ER: YAG 104 Yes 151 No 11	Don't know 116 2 Argon 95 13 Diode 69 6 Nd:YAG, Ho: YAG 98 3 Er, Cr: YSGG, ER: YAG 17 10 Argon 13 0 Diode 60 27 Nd:YAG, Ho: YAG 102 4 Er, Cr: YSGG, ER: YAG 104 1 Yes 151 10 No 11 1

Questions		Exper	ience	- P value
Questions		1-10 years	10+ years	- P value
a 1	Male	106	41	000
Gender	Female	77	87	.000
How do you rate your current level of knowledge	Poor	66	35	
	Average	103	10	.000
regarding lasers overall?	Good	14	83	
	1910s	35	34	
	1930s	43	8	.000
When were the lasers invented?	1950s	30	2	.000
	Don't Know	75	84	
How often do you use lasers in your	Never	81	39	
Practice?	Often	97	87	.000
rractice:	Sometimes	5	2	
	Not useful	12	07	
Can lasers be useful for vaporization and ablation	Somewhat useful	55	20	.000
procedures?	Very useful	66	17	.000
	Don't know	50	84	
Can lasers be useful for surgical	Not useful	36	03	
	Somewhat useful	49	16	.000
Extraction procedures?	Very useful	74	10	.000
	Don't know	24	99	
	Not useful	02	02	
Can lasers be useful for pre-prosthetic surgery?	Somewhat useful	68	19	.000
Can fasers be useful for pre-prostnetic surgery:	Very useful	83	25	.000
	Don't know	30	82	
	Not useful	12	01	
Can lasers be useful for implantology?	Somewhat useful	64	38	.000
Can fasers be useful for implantology:	Very useful	49	07	.000
	Don't know	58	82	
	Not true	16	02	
	Somewhat true	87	19	.000
Your perception about 'Lasers incise tissue more	Very true	62	25	.000
efficiently than a scalpel'	Don't know	18	82	
	Not true	00	01	
Your perception about 'histologically, wound shows	Somewhat true	42	24	.000
less wound contracture and scarring'?	Very true	70	18	.000
	Don't know	71	85	
	Not true	59	08	
our perception about 'lasers causing delayed healing'?	Somewhat true	58	35	.000
on perception about lasers causing delayed nearing;	Very true	12	02	.000
	Don't know	54	83	
our perception about 'lasers causing health hazard if	Not true	10	01	
beams are scattered or reflected'?	Somewhat true	75	21	.000
beams are scattered or reflected?	Very true	62	24	

	Don't know	36	82	
	Argon	69	39	
Which laser is indicated for pigmented lesions, vascular	Diode	73	02	.000
anomalies, and plastic surgery?	Nd:YAG, Ho: YAG	15	86	.000
	Er, Cr: YSGG, ER: YAG	26	01	
	Argon	67	09	
Which laser is indicated for soft tissue procedures?	Diode	85	33	.000
	Nd:YAG, Ho: YAG	19	84	
	Er, Cr: YSGG, ER: YAG	12	02	
Do you think you require more knowledge shout leaves	Yes	140	21	
Do you think you require more knowledge about lasers	No	07	05	.000
in oral maxillofacial surgery procedures?	May be	36	102	

The present study was aimed to check the use of LASER in maxillofacial surgery. To analyze, non-parametric measure Chi-square was applied through SPSS. In frequency analysis, 52.7% of the participants were female, and 89.7% were general dentists, with the majority having experience between 1-10 years. They rank their current knowledge regarding laser use overall as average (36.3%) and about its use in OMFS as good (37.3%). 50.2% are not aware of laser's effectiveness in healing compared to scalpel wounds, and 37.3% said it is true that laser provides the need for sutures. 29% think laser's delayed healing is somewhat true, the majority do not know about that increased pain caused by the laser, and laser being expensive and need training. 34.7% consider Argon for pigmented lesions, vascular anomalies, and literature also reports it as a good choice for pigmented lesions [7], 37.9% consider Nd: YAG, Ho: YAG for soft tissue procedures, 34.1% consider it for hard tissues and 51.8% think they need more knowledge about laser in oral maxillofacial surgery procedures.

In the next analysis, gender differences were examined, finding reported significant differences. Both male and female participants were mostly general dentists, and more females have working experience of more than 10 years compared to male dentists. Females marked their knowledge good about laser as compared to males and its use in OMFS. The majority of both genders were not aware of when the laser was invented. Female dentists more often use lasers in their practice as compared to male dentists. Literature also tells that mostly male dentists are aware of different edge points of laser in dentistry. Almost 94.3% of participants know that [8]. Female participants think YAG, Ho: YAG for pigmented lesions. In contrast, male participants think Diode for this but literature reports Argon as a good choice for pigmented lesions, as mentioned in the above paragraph. For soft tissues, females consider YAG again while males consider Diode, and a review article also reports Diode as a good choice for soft tissues [6].

In subsequent analysis, comparison across education was carried out. General dentists have more experience than specialists, and they rate their knowledge about laser overall and its use in OMFS as good. General dentists were more aware of the laser's invention than specialist dentists and more often used laser in their practice. Specialists consider

Argon for pigmented lesions while general dentists consider YAG for this; literature also reports Argon as a good choice for pigmented lesions. For soft tissues, specialists preferred Argon, while general dentists preferred Diode as reported by literature too [6].

In subsequent analysis, differences across clinical experience were tested. Females have greater experience as compared to males. Participants having experience of more than 10 years have good knowledge of laser and its use in OMFS, while those with experience of fewer than 10 years have average knowledge about it. Both groups often use lasers in their practice, while about the usefulness of lasers in different problems, both groups' opinions vary. At the same time, those with less than 10 years of experience agreed, and literature also reports that freshly graduated or those having less experience show interest in learning more about laser, and 69% are interested in getting training about this [8]. A few quantitative studies have been conducted on evaluating dentists' knowledge about laser and its uses, and the present research is a great addition to the existing body of knowledge about the current topic.

Conclusion

Findings revealed significant differences across gender, qualification, and clinical experience. Female participants participated more than males and practicing as general dentists having experience of 1-10 years of experience, have good knowledge of laser, and use it in their practice. General dentists were only aware of the use of laser in cosmetic surgery and consider it useful in different problems.

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