

# The evolution of maxillofacial surgery in Slovakia – a legacy of excellence and innovation



Maxillofacial surgery in Slovakia has a rich history spanning over 70 years, rooted in the broader tradition of Czechoslovak maxillofacial surgery established in the 1950s. The foundations of Slovak maxillofacial surgery were laid by Prof. Adolf Mach, who, as a member of the dental clinic at Comenius University in Bratislava (founded in 1919), initiated specialized care for disorders of the oral and maxillofacial region. This pioneering work led to the establishment of the first dedicated maxillofacial surgery department in 1954, under the leadership of Prof. Beseda. The establishment of the Slovak Association for Oral and Maxillofacial Surgery (SAOMFS) in 1998 as a professional branch of the Slovak Medical Association was a significant milestone in the field. Since that time, the SAOMFS has played a pivotal role in fostering collaboration and scientific advancement through annual symposia, often held in partnership with the Czech Society of Maxillofacial Surgery (CSMFS).

Education in maxillofacial surgery in Slovakia is rigorous, emphasizing a multidisciplinary approach. Today, the country boasts a strong infrastructure with eight specialized departments and key training centers located at universities in Bratislava, Martin, and Košice. Over the past three decades, Slovak experts have published more than 15 specialized textbooks, reflecting the nation's commitment to advancing clinical knowledge and excellence.

Slovak maxillofacial surgery has also expanded its expertise into related

fields, including plastic surgery and otorhinolaryngology. Through lectures, specialized workshops, and seminars, surgeons gain practical and theoretical training in areas such as microvascular surgery, orthognathic surgery, head and neck oncology, and transgender surgery. These activities foster interdisciplinary collaboration and innovation, aligning the country's practices with global advancements in head and neck surgery.

In recent years, Slovakia has emerged as a leader in microvascular reconstruction within the head and neck region. This leadership extends beyond clinical practice to education, with thematic courses and seminars providing young and aspiring surgeons the opportunity to master the fundamentals of microvascular surgery. These educational programs are also accessible to professionals from related surgical disciplines, such as plastic surgery and otorhinolaryngology. The publication of *Propeutika mikrovaskulárnej chirurgie* in 2020, one of the few surgery books of its kind in Central Europe, is a testament to this progress, showcasing the nation's dedication to fostering expertise in this field. Emerging trends in surgery, such as transgender procedures, 3D-planned reconstructions, and other advanced techniques, are increasingly becoming integral to the Slovak maxillofacial and head-and-neck surgical landscape.

The development of maxillofacial surgery in Slovakia is a testament to the dedication of its pioneers and the on-

going collaboration within the international medical community. This legacy not only reflects past achievements but also provides a strong foundation for future advancements in the field of maxillofacial surgery.

In the article *Transposition of Stensen's duct in severe salivary duct stenosis – a case report* the authors report a case of a 25-year-old patient diagnosed with chronic parotitis caused by sialolithiasis, leading to subsequent stenosis of Stensen's duct. Following endoscopic removal of the stone, a stricture developed in the distal portion of the duct, resulting in megaduct formation. Treatment involved a transoral transposition of the duct, followed by sialendoscopy and stent placement, which significantly improved the patient's condition and restored functionality of the neostoma. Similar studies underscore the effectiveness of sialendoscopy in managing obstructive salivary gland diseases. This modern, minimally invasive approach represents a progressive advancement in maxillofacial surgery, offering excellent outcomes for patients with ductal strictures.

The article *Reconstruction of head and neck defects using radial forearm free flap – a review* provides evidence that the radial forearm free flap (RFFF) has been a cornerstone in the reconstruction of head and neck defects for decades. Its versatility, reliability, and ease of harvest make it an ideal choice for both novice and experienced surgeons in microvascular reconstruction. With a long vascular pedicle and high success rates,

the RFFF remains the "gold standard" for soft tissue reconstruction in this region. The article discusses key indications, surgical techniques, advantages, and potential complications, emphasizing the flap's critical role in restoring function and esthetics after oncologic resections. For institutions starting a microvascular reconstruction program in

maxillofacial surgery, the RFFF is highly recommended as the foundational flap due to its predictable outcomes and adaptability.

We hope these contributions enrich your knowledge and foster further advancement in maxillofacial surgery. We look forward to your feedback and discussions on these topics.

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