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**SEMESTER 4<sup>TH</sup>**

**PAPER HISTOLOGY**

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**24/06/20**

NO: 1

## FIBROUS CAPSULE :-

- => Above to the anterior edge of the pterglenoid plane.
- => Posteriorly to the Squamo tympanic fissures, between these to the edges of the articular fossa.
- => Below to the periphery of the neck of mandible.

## => ARTICULAR DISC :-

- => Fibro cartilaginous disc dividing joint cavity upper and lower components.
- => Shape is oval.
- => its make articular surface.

Qno: 2

## Clinical Consideration Of Salivary Glands :-

⇒ careful examination of a patient's medical history and people can lead clues to dysfunction of the salivary glands, because they are often associated with other systemic disorders such as hormonal imbalances, diabetes mellitus, atherosclerosis and neurological disorders.

For example :-

xerostomia (dry mouth) sialoshea (increase salivary flow) both could result from dysfunction of the mandibular salivary centre, autonomic innervations to the glands, damage to the glands itself or imbalances in fluid and electrolyte.

## Clinical Considerations :-

Following some of the important considerations.

⇒ Radiations Caries :-

Radiation caries is a rampant form of dental decay that may occur in individuals who receive a course of radiotherapy that include exposure of salivary glands.

⇒ Etiology :-

Corious lesions are produced due to the exposures of salivary glands and reduced flow of saliva, decreased pH.

⇒ Signs :-

Superficial lesions, attack the buccal occlusal, incisal, and lingual surfaces. It include cementum and dentin in cervical lesions.

Q no: 3

## Factors That Play Role In Shedding

=> These are two factors :-

① :- Odontoclast.

② :- Pressures.

=> ① Odontoclast :-

When root resorption is almost complete, these odontoclast degenerate and mononuclear cells emerge from pulpal vessels and migrate to the predentin surface.

=> Less is known about the resorption of soft tissues as it sheds.

=> Just before exfoliation, resorption ceases as the odontoclast migrate away from dentin surface.

=> ② Pressures :-

The pressure is exerted by the erupting permanent teeth seem to play an important role in resorption of deciduous teeth.

=> The local pressure is responsible for initiation of resorption.

=> In addition to this local pressure, heavy masticatory and muscular forces play a role in resorption.



Q no: 4 :-

## Classification Of Tooth Movement

### ① :- Physiological Tooth Movement :-

=> naturally occurring tooth movements that take place during and after tooth eruptions.

This include :-

=> ① :- Tooth Eruptions

=> ② :- Migration Or drift Of teeth.

=> ③ :- Changes In tooth positions during mastications.

### ② :- Pathologic Tooth Movement :-

=> A tumor is a mass of tissue that's formed by an accumulation of abnormal cells.

=> Tooth eruption is a process in tooth development in which the teeth enter the mouth and become visible.

### ③ :- Orthodontic Tooth Movement :-

=> it is a pathological process from which the tissue recovers.

=> Orthodontic tooth movement brings areas of pressures and tension around the tooth, The histologic changes seen during tooth movement.

Qno: 5

## Functions OF TMJ :-

=> TMJ Performs the following functions.

=> Speech and mastications.

=> Ligaments.

=> and many others.

=> Components OF TMJ :-

=> ① :- FIBROUS Capsule :-

Above to the anterior edge of the pterygoid plane.

=> Posteriorly to the squamo tympanic fissures, between these to edges of articular disc.

=> Below to the periphery of the neck of mandible.

② :- Articular Disc :-

Fibro cartilagenous disc dividing joint cavity upper and lower components.

=> Shape is oval.

=> its make articular surface.

③ :- Lateral Ligaments OF jaw :-

Attached to the above articular tubercle on the

root of zygomatic process of temporal bone

Extend down word up word angle of 45 degree.

④ :- Sphenomandibular Ligaments :-

is an accessory ligaments which lies on a deep plane away from the fibrous capsule.

is attached superiorly to the spine

of sphenoid and inferiorly to the lingual

of mandibular foramen

(b) Stylomandibular Ligaments:-

it represent a thickened part of the deep cervical fascia which separates the parotid and submandibular salivary glands. its attached to the lateral surface of a styloid process.

