

any clinician. A few of the reasons for this are the anatomy of the defect post surgery or trauma, retention of the prosthesis, the psychological condition of the patient, lack of trained technicians, patient's and relatives expectations. A lot of understanding of the procedures involved is required to reach a stage of rehabilitation which is satisfactory both to the patient and the clinician. Thinking out of the box may be required as per the patient's needs. It is important to try and perceive the final prosthesis before the treatment is started. The retentive elements are one of the most important features to take care of. . The prostheses used to rehabilitate the defects of the eyes are of two types; namely an ocular prosthesis and an orbital prosthesis. An ocular prosthesis is a prosthesis that replaces an absent natural eye following an enucleation or evisceration. The prosthesis usually fits over an orbital implant and is under the eyelids. An orbital prosthesis is a prosthesis that artificially restores the eye, eyelids, and surrounding bone and skin lost as a result of trauma or surgery. . In this case report, however, it was necessary to fabricate an orbital prosthesis instead of an ocular prosthesis, even though the patient had undergone only enucleation of the natural eye, and the surrounding tissues or the eyelids were not excised.

DOI: 10.4103/0972-4052.246574

2. Esthetic rehabilitation of an ocular defect with an orbital prosthesis

Amit D Hindocha

Sinhgad Dental College and Hospital

The rehabilitation of patients with extra-oral maxillofacial prosthesis sometimes tends to be one of the most challenging and complicated treatment procedures to be carried out by