ABSTRACT

Dehiscence of the mucoperiosteal flap from alveolar margin and formation of palatal fistula is a common complications reported after cleft palate surgery. Management of these cases are primarily resuturing and a new flap cover ,it is always very troublesome for the patient as well as surgeon too . Intraoperative use of adhesives can reduce this problem. Although the adhesion system cannot and should not replace surgical technique , it provides valuable assistance in tissue synthesis and in local hemostasis at the time of primary surgery, particularly in cases where conventional suture methods are difficult to apply. In addition to good adhesion and good tissue compatibility, the adhesive is completely absorbed.