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REPAIR OF ALVEOLAR CLEFTS WITH RECOMBINANT HUMAN BONE MORPHOGENETIC PROTEIN (RHBMP-2)

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A cleft lip/palate is a condition characterized by the presence of anatomical defects with variable extensions involving lip, alveolar process and palate. The rehabilitation process involves surgical procedures since early childhood and some patients may even require orthognathic surgery at the end of facial growth. The alveolar bone grafting is part of the set of techniques used in the rehabilitation of the cleft alveolar and aims to stabilize the maxillary segments, providing improved periodontal aesthetics and of nasal base, shutdown oroantral communication, facilitate orthodontic movement, spontaneous eruption and prosthetic rehabilitation. Because it's performed ideally at the end of the mixed dentition is not able to interfere with the growth and development of the maxilla. **OBJECTIVE:** This work aims to illustrate the repair of alveolar clefts with recombinant human bone morphogenetic protein and discuss relevant aspects of this procedure. CASE **REPORT:** Patient with unilateral cleft lip and palate was followed up in HRAC from birth to adolescence, moment that was underwent previous orthodontic treatment and was planned surgery procedure under general anesthesia to perform the alveolar cleft defect closure with rhBMP-2 (Infuse) and collagen matrix. The surgery was done and there was no complication in terms of pain, infection, exposure of graft, rejection of graft, and wound dehiscence at the recipient site. In the follow-up visits we observed full healing of de cleft region. CONCLUSIONS: The secondary bone grafting with rhBMP-2 is an excellent treatment modality for rehabilitation of patients with alveolar clefts. However, is required long-term follow-up to achieve maximum advantage of this technique.