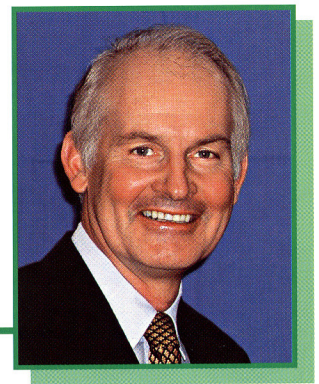


AESTHETIC Update



Compiled by Geoffrey M. Knight

Auto orthodontics

There are many adult patients who reluctantly tolerate crowded lower incisors.

These patients have usually accepted this situation as they don't want to undergo orthodontic treatment and prefer the crowding to the inevitable space that extracting an incisor would incur.

The versatility and adhesiveness of resin modified glass ionomer cements are such that they can be applied in clinical situations where normal adhesive dentistry would surely fail.

The extraction of a crowded lower incisor followed by the application of resin modified glass ionomer cement spacers on the proximals of the adjacent incisors sufficiently closes the space caused by the extraction to an aesthetically acceptable result. The combined orthodontic effects of the lips and tongue working on the remaining incisors will close the small space remaining. Subsequent visits to remove increments of the resin modified glass ionomer cement spacers can be scheduled until the space between the lower incisors have closed and an even arch form has been achieved.

CLINICAL CASE

A middle aged patient presented for a cosmetic improvement of his dentition. Direct laminates were applied to his upper incisors, canines and first bicuspids.

There was a substantial degree of lower crowding that prevented achieving an acceptable realignment of his lower arch with direct laminates. The options including orthodontic treatment; extraction and an interim denture prior to placing an implant; or extraction followed by placement of aesthetic spacers on the proximal surfaces of adjacent incisors and waiting for space closure to occur were

all explored. The patient decided, after due consideration, to have an incisor extracted and wait for the space to close.

Figure 1 shows the clinical situation prior to extraction. The lower left central incisor was the tooth furthest out of the arch and the most suitable for extraction.

Following extraction of the incisor, resin modified glass ionomer cement spacers were placed on the distal surface of the lower right central incisor and the mesial surface of the lower left second incisor leaving a small gap between the two teeth (Fig 2).

The patient attended the surgery at approximately two monthly intervals to have small increments of the spacers removed as the incisors moved together.

Nine months after the initial extraction there is a much improved lower arch form and minimal remaining crowding (Fig 3). Further increments of resin modified glass ionomer cement were removed and the patient to be recalled at a future date for possibly the complete removal of the spacers and a well aligned lower arch (Fig 4).



Fig 1. Patient presented with crowded lower incisor teeth.

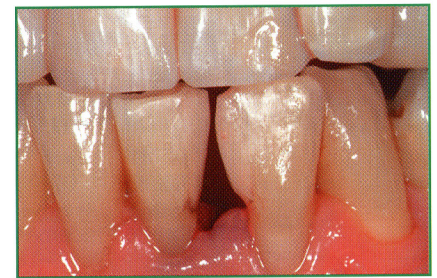


Fig 2. After extraction of the lower left central incisor, resin modified spacers were placed on the proximal surfaces of the adjacent teeth, leaving a small space for closure.



Fig 3. Nine months after extraction lower arch form almost aligned.



Fig 4. Further removal of proximal resin modified glass ionomer cement spacers to enable improved arch form.