

## Intruding anterior teeth in adults

Simple, quick, easy and cost effective treatment for gdp's to explore.

Manny Vasant MBE

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### Indications

- 1 to reverse teeth to more optimal position (for example which have migrated due to historical peiriodontal disease-must not be undertaken with active periodontal disease)
- 2 correction of occlusal plane to achieve the desired occlusal scheme
- 3 improve aesthetics



Ortho elastics are available in various lengths

- 4 reestablish lost papillae (eliminate black triangles)
- 5 alternative to extraction (some of these patients were referred for extraction and implants)

**Brief technique outline: (may need some training or consultation with an orthodontist if you have no experiance)**

- 1 select appropriate anchorage (usually canines to premolars which can be changed if you loose anchorage during rx)
- 2 use appropriate bracket to hold elastics (brackets specified for a tooth and orthodontic elastics can be ordered from The Dental Directory)
- 3 brackets can be cemented with any flowable composite or resin cement.
- 4 use a blob of composite on the tooth being retrolined/intruded more incisal to natural fall of the elastic roughly to equate with the desired movement. This will hold the elastic and create the required active force to intrude tooth.

- 5 elastics (length which determines force. Ranges from ----mm to be changed by the patient every day.

### How long does it take?

Approximately 3 to 5 months

### What about retention?

Recommend permanent fixed retention 3-3 using multilflex wire. Also nightly use of halwleys retainer (long term for several years if possible)

Case studies illustrated below have been done in the last 3-15 years

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### MW Treatment stages



Fixed retainer and Hawleys retainer



### SS Treatment stages



### DK Treatment stages

