

CELEBRATION DENTAL GROUP
ORTHODONTICS
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INTRODUCTION TO ORTHODONTIC TREATMENT

Orthodontics is different from medicine or general dentistry. The orthodontist cannot do all the work for the patient. The success of the treatment depends on a partnership between the patient, his or her family, the orthodontist, and his staff. The orthodontist and staff determines the problem, recommends the treatment, makes a plan of action and carries out the plan step by step. They teach the proper diet, efficient hygiene techniques, treatment objectives, and how the patient must help. The patient needs to brush after eating anything and floss once each day, needs to avoid hard and sticky foods and minimize sugar in the diet, needs to wear elastics and other appliances, and must keep all appointments and arrive on time. Parents are supportive, understanding, and help coach the patient. The orthodontist can do a technically perfect job, but unless the patient is working hard the final result will not be ideal.

PARTS OF BRACES

An orthodontic appliance is a very precise, carefully engineered tooth-moving device made of sets of tiny parts. The orthodontist will guide the teeth into a correct position by adjusting the braces. To help understand what is happening during treatment, you should learn about the parts of the braces.

Band: A stainless steel ring that fits around each tooth. Each band has a bracket or tube attached to it. The bands are glued to the teeth with a special adhesive.

Bracket: The part that holds the arch wire against each tooth. The arch wire fits into a slot in the bracket. Brackets may be attached directly to each tooth or to a band.

Ligature: The arch wire must be held tightly into each bracket slot. A fine wire or a plastic tie that holds the arch wire is the ligature.

Arch wire: Teeth move from the pressure that is applied by the braces. That pressure comes from the arch wire, which guides the direction of the movement. The arch wire is connected to all of the teeth within each dental arch.

Appliances: A general term used for braces or retainers.

Elastics: Small rubber bands that hook between two places in the mouth, helping the teeth move.

BRUSHING

Permanent stains, cavities and gum disease are all caused by bacteria that live on the teeth in a colorless sticky substance called plaque. Plaque must be removed every day. Braces make it harder to remove plaque. Brackets, bands, and arch wires create nooks and crannies that are hard to reach, therefore the brushing technique is different.

The brush should be placed against the teeth at an angle. The bristles should be used under the wire and between the teeth. The brush should then be vibrated and moved in small circles in each area of the mouth.

This should be done from above and below the arch wire. Scrub all over the braces, teeth and gum in a circular motion and do not forget the tongue side and the chewing surfaces. When brushing is finished the braces and the teeth should be free of food particles and plaque. The braces should be shiny; the gum margin should be firm and light pink color.

A careful brushing should take three minutes and should be done within ten minutes after eating. Always brush before bedtime. A few minutes each day is a small price to pay for fresh breath, and clean healthy teeth and gums.

FLOSSING

Flossing during orthodontic treatment is tricky and time consuming, but with practice it can become an easy routine. Flossing with braces is more important than flossing without them, because plaque collects around the appliances. Plaque is the major cause of gum disease and must be removed daily. Only floss can reach between the teeth to remove plaque.

DENTAL CARE

See your family dentist at six months intervals for check-ups, cleaning and fluoride.

APPOINTMENTS

Promptness is essential. After every visit, we will schedule your next appointment and give you a card. If for any reason you can't keep an appointment, please notify the office as soon as possible. It will be necessary to make some appointments during school hours.

DIET: The following should be eliminated from your diet while wearing braces:

All Types of Gum	Caramels	Taffy	Ice Cubes
Hard Candies	All Granola Bars	Popcorn	Frozen Candy Bars
Types of Nuts	Jaw Licorice	Hard-Crusted Bread	Pretzels
Breakers	Taco's	Tortilla Chips	
Avoid Bones	When Eating Meats		
Don't Chew on Pencils or Pens			

These foods should be broken or cut into small pieces before eating.

Raw Celery	Apples
Raw Carrots	Corn On the Cob

EMERGENCIES

Sharp Wire: A loose wire is poking the inside of the cheek. Cover the wire with soft wax or cotton. Warm salt-water rinses twice a day will help control the discomfort. Phone the office for a special appointment.

Sore Teeth: This is a natural sensation after an adjustment visit. Aspirin or an aspirin substitute will help and the soreness should go away in a few days.

Loose Band or Bracket: Phone the office for advice. Usually it doesn't have to be cemented until your next visit.

Gum Swelling or Abscess: This could be serious. Phone the office for an appointment immediately. **Missing**

Ligature: It may not be important, but call the office.

Bent Wire: It could be on the braces, headgear or retainer. It may need to be fixed. Phone the office for advice.

Loose or Broken Retainer or Headgear: It may need a replacement. Phone for an appointment.

Joint Pain or Headaches: Tell the orthodontist. It may or may not be related to the teeth but it needs attention.

If there are reasons the retainer, headgear, or elastics cannot be worn, please phone the office and explain the problem.

RUBBER BANDS

Orthodontists ask their patients to wear elastics of various configurations attached to the braces. It is an essential part of the treatment and success depends entirely on patient cooperation. They add an extra force to the braces to help move the teeth. For examples, if the upper teeth are too far forward and the lower teeth are too far back, rubber bands maybe stretched from the tipper front teeth to the lower back teeth. They are worn usually at all times except when eating or brushing. Part time wear may be recommended; the orthodontist will determine a schedule. It is important to be consistent; the elastics will not work as well if they are not in place each day. Elastics are replaced at least once each day or they will lose their snap. Be sure to pick up plenty at the office. There are many sizes; each designed for a specific purpose. Wear only the size provided.

The teeth may become sore when elastics are first used. This soreness will be gone in a few days. The teeth may become loose; that is a normal reaction to the elastic force. They have to be worn if the treatment is to be successful.

RETAINERS

Retainers hold the teeth in their new position until they are stable. The upper retainer looks like a pink turtle. The plastic shell fits against the roof of the mouth and a wire rim fits around the front of the teeth. There may be other wires to help hold it in place. The lower retainer is shaped like a horseshoe to make space for the tongue, and is made of plastic and wire. Usually retainers are worn all the time except when the patient is eating, cleaning it or brushing the teeth. It is best to brush it at least three times daily. Rinse it off if a brush is not available. Do not remove it and leave it where pets can find it. Always put it in the case provided when it is not being worn. Usually retainers are worn about the same length of time as the braces or longer.

It is important to wear retainers as recommended.

RETENTION:

Retention begins on delivery of your retainers and continues for 1 year.

If any retainer is lost or destroyed there is a replacement fee.

After the year of retention the doctor will be available on an as needed basis and there may be a fee for a return visit.

WISDOM TEETH

Mankind's ancestors had large, heavy jaw structures that easily accommodated thirty-two teeth. During evolution the jaw structure became reduced, but the size and number of teeth remained the same.

The last permanent teeth that erupt between the ages of 18 and 25 are the third molars or wisdom teeth. They are supposed to erupt behind the second (twelve) year molars at the very back of the mouth. For many, the trend toward a smaller jaw structure creates a space problem for the wisdom teeth. When there is not adequate space for teeth to grow into their correct position they remain beneath the surface of the gum tissue, imbedded in the jawbone. This condition is called impactions and can damage adjacent teeth. Unfortunately, there is no way of knowing whether the wisdom teeth will cause these problems. If impacted wisdom teeth are detected, the orthodontist will probably recommend that they be extracted.

The least difficult time to remove wisdom teeth is in the teen years.