

ORTHODONTIC TREATMENT TIMING

THE QUESTION

When is the best time to begin orthodontic treatment? This is a question that is often asked by parents, especially as they see other young children in orthodontic appliances.

THE ANSWER

All orthodontists are trained to treat problems occurring in children, teen-agers, and adults. The goal of orthodontic therapy is to complete treatment of each patient with a full set of permanent teeth, which is not present until age 12-14. If braces are placed when a child is 7 or 8, either the patient will have braces for many years, or the braces will be removed and placed a second time.

Many different schools of thought exist as to the best time to begin treatment, but the research contained in the orthodontic literature is becoming very clear. Whether treatment is done early, in 2 distinct phases, or in a single phase in the more traditional early teen years, the final result is the same. Combining this information with new wire and appliance technology, it is best to delay treatment until most, if not all of the permanent teeth are in for the vast majority of patients.

THE REASONS

Five major advantages and benefits of waiting are:

- 1 Decreased time in braces and fewer appointments, resulting in
 - Less chance of enamel decalcification and root shortening
 - Less time absent from school or work
 - Less opportunity for broken braces
- 2 Bone growth is occurring more rapidly during the adolescent years, increasing the treatment effectiveness
- 3 Understanding and cooperation are better when a patient is more mature
- Completing treatment in one phase is less expensive than a 2-phase program
- No need for ongoing retainers between phases

The most optimal time to realize these benefits will vary somewhat with the individual child, but for most children it is between the ages of 12 and 14. Orthodontic treatment begun during this window of opportunity will usually result in braces for 18 to 24 months instead of 3 to 4 years or more.

EXCEPTIONS

There are a few orthodontic conditions that do warrant a brief period of early treatment either because the same correction is not possible later, or additional damage will occur while waiting. These include:

- Cross bites (especially those causing the lower jaw to shift)
- Severe jaw growth imbalances (such as an upper jaw that is too far back)
- Protruding upper front teeth that are at risk for injury
- Space maintenance for early loss of primary (baby) teeth
- Excessive crowding or deep bites causing damage to teeth and/or gums

Additionally, if a young patient is suffering psychologically or socially from crooked upper front teeth, a brief period of partial braces can improve both the smile and self-image dramatically. Braces will typically still be needed later when all of the permanent teeth erupt.

PARTING WORDS

Needless to say, the timing of orthodontic treatment is an important issue that can make orthodontics either a rewarding and enjoyable experience or one that is prolonged and tedious. I hope that you can see that waiting is often the "best treatment". Most orthodontists prefer to examine children at age 7 or 8 to make sure the patient does not fall into the above exceptions, then re-evaluate yearly to continue to evaluate for the most efficient and effective time to begin treatment.

If you have additional questions about this or other topics related to orthodontic treatment, please feel free to contact our office:

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