



INTERDISCIPLINARY APPROACH IN THE MANAGEMENT OF MISSING ANTERIOR TEETH- A CASE REPORT

Dentistry

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ABSTRACT

Interdisciplinary approaches for missing anterior teeth, which are frequently presented to the orthodontist, Treatment planning for missing maxillary central or lateral incisors poses a challenge to the clinicians as it creates an esthetic problem with specific orthodontic and prosthetic considerations.

KEYWORDS

interdisciplinary approach, missing anterior teeth

INTRODUCTION

Interdisciplinary approaches for missing anterior teeth, which are frequently presented to the orthodontist, Treatment planning for missing maxillary central or lateral incisors poses a challenge to the clinicians as it creates an esthetic problem with specific orthodontic and prosthetic considerations.

The orthodontist should do thorough diagnosis and treatment planning and understand critical parameters of root alignment and symmetrical distribution of edentulous spaces. Diagnostic wax-ups at the end of the orthodontic treatment procedure can be decisive in determining the final tooth position. Further orthodontic treatment may be necessary to move the roots apart in order to create adequate space for replacement of missing teeth.

CASE REPORT:

A 13-year-old female patient reported with the chief complaint of forwardly placed upper front teeth and spacing in upper front teeth region. she has a history nail biting and tongue thrusting. On extraoral examination she presented with a brachycephalic head and europrosopic face with a slightly concave profile with non-competent lips. She exhibits a horizontal growth pattern.

On intraoral examination, [fig 1] **Molar:** Class I on right side & left side **Canine:** Class II on right side & class I on left side **Overjet:** 3 mm **Overbite:** 2 mm. tongue thrusting habit present



Figure 1: INTRAORAL photographs

On cephalometric examination
SNA-84°, SNB-88°, ANB--4°, FMA-9°[low angle] IMPA-101°, U1-NA-50° Proclined upper incisor, L1-NB-27° Proclined lower incisor, Nasolabial angle-73°, S-line-protrusive upper and lower lips, E-line-average.

Problem list of the patient includes Proclined upper and lower anteriors Spacing in upper and lower anterior, Missing 22, Protrusive lower lip

Treatment plan:

0.22 MBT prescription was used. [fig 2]



Figure -2

tongue crib was attached to the upper molar band for habit breaking. Open coil spring was placed on the missing tooth space to create sufficient space for the prosthetic replacement. A acrylic tooth was bonded and ligated to the main arch wire in the missing lateral incisor space for better esthetics during the course of the treatment. residual spaces in the dentition are closed. 19*25 ss wire was placed for better torque expression of anterior teeth.

Retention : upper and lower essix retainer was placed .

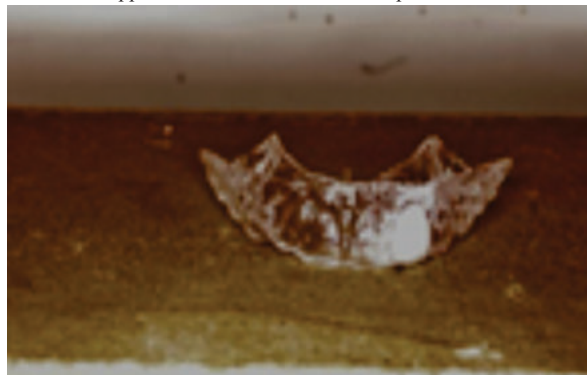


Figure -3

Acrylic tooth was fixed during the process of making essix retainer for better esthetics [fig 3]. after three months of retention period. Fixed partial denture was placed in the region of missing lateral incisor [FIG 4].

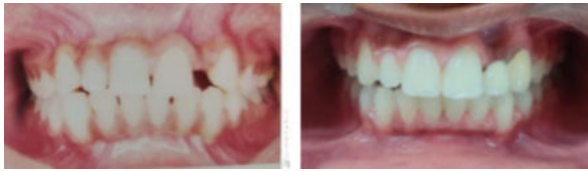


Fig 4: Pre And Post Treatment

CONCLUSION:

interdisciplinary approach in the management of missing anterior teeth challenges orthodontic treatment. Maintaining aesthetics during orthodontic treatment and during the retention period gives good esthetics satisfaction to the patient and gives a positive attitude towards treatment.

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