

CASE PRESENTATION

**Provided by a General Dentist
from
Deep River, Ontario**

Class II Division II

Kim: 35 years of age



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Chief Complaint:

- Jaw Pain
- Popping in Right TMJ
- Crowded Dentition

Complicating Issues:

- Patient is a radio news announcer
- Speech considerations

Dental Classification

- Class II Division II
- Very deep bite
- Posteriorly displaced Mx
- Retrusive Upper Incisors
- 3rd Molars Previously
Extracted



Facial/Skeletal Classification



- Class II Profile
- Obtuse Nasial/Labial Angle
- Dished-in face

Lateral Ceph & Panorex



Pre-Treatment Dentition



Approximately -6.4mm
Mx Space Shortage



Treatment Objectives



- Expand the Maxilla 3-Dimensionally
 - Tip the upper incisors labially
 - Increase Vertical
 - Correct A-P
 - Align Arches
 - Retention

Treatment Plan

Phase I:

- Modified Upper 3-screw Sagittal with occlusal coverage

Phase II:

- **Tripod for vertical**
- Fixed Bracket Therapy 2nd molar to 2nd molar
- Very minimal Md Slenderizing if required

Retention:

- Mx Hawley with bite plane
- Md invisible Trutain
- Adult Bionator I

Modification to Phase I:

- Added Butterfly hooks to the 3-Screw Sagittal to prevent laterals from flaring labially.



Fixed Bracket Therapy

- 2nd Molar to 2nd Molar
- Tripoding for Vertical
- Vertical Box
Elastics



Finished Treatment



100% Deep Bite now 10% Over Bite



Before & After - Frontal



Case Treatment Summary

Kim: 35 years of age

Treatment Duration:

- Phase I
 - 4 months
- Phase II
 - 18 months
- Total Treatment
 - 22 months
- Retention
 - Adult Bionator I



Doctor's Comments

Complication During

Treatment:

- Patient was sliding off of the lingual anterior tripoding ramps during sleep.

Resolution:

- Fabricated Bionator

3-Screw Sagittal
can be used as a
TMJD splint.

Patient's Comments



- Noticed TMJD symptoms improve when wearing Sagittal appliance
- Found Bionator to be very comfortable