COMPLEX TREATMENT OF MANDIBULAR LATEROGNATHISM AND TRANSVERSAL DEFICIENCY WITH LOCKED BUCCAL NON-OCCCLUSION - CASE REPORT -

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Private office, Paderborn, Germany
94th European Orthodontic Society Congress, Edinburgh, Scotland, June 2018

Aim:
A patient with severe laterognathism and buccal non-occlusion, locked by deep bite, requires different tx-modules beyond standard-procedures.

Material & Methods:
Early or intermediate surgical intervention to adjust the mandible position failed due to insufficient transversal alignment of maxillary and mandibular arches. The patient did not accept standard bite opening. (Nola-Biteplate, …)

Several tx-modules – such as
- debonding upper jaw, fixed and transverse extended splint for bite-opening
- lingual arch, welded by a phaser to molar bands, for arch-expansion
- bilateral corticotomy, autolog-bone application, RAP in the molar region for faster uprighting
- additional micro-osteo-perforation MOP
- asymmetric surgical mandibular advancement
- orthodontic routine procedures

Results
A main problem to solve this case was the patient’s limited compliance and the deep buccal non-occlusion by upper molar overlap. Bands or braces could not be bonded in the left mandibular arch. A fixed upper splint, lingual expansion arch in the mandible and a corticotomy boosted the tx and enabled the surgical mandible advancement.

Conclusion
In some cases there is the need of tx-strategies beyond standard procedures. The implementation of contemporary tools offers a wider range of options in complex tx-demands.

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