

THE INTRUSION OF ANTERIOR TEETH WITH IPANDA: A CASE REPORT AND FINITE ELEMENT ANALYSIS

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INTRODUCTION Non - surgical correction of severe gummy smile through the intrusion of anterior teeth aided by miniscrews has become an important treatment alternative. Recently, the Indirect Palatal Ancho-

rage and Distalization Appliance (iPanda)¹ has been developed to permit maxillary molar anchorage. It is possible to use such molars as indirect anchorage to apply intrusion forces to the maxillary incisors, without undesirable side effects to the molars. Moreover, with indirect anchorage and intrusion force, the use of buccal miniscrews can be eliminated.

Aims of the study

To present an alternative treatment for correcting Gummy smile.

To demonstrate combined use of the iPanda and an intrusion arch in Class II deepbite malocclusion.

To illustrate the pattern of tooth displacement and to define the stress distribution in anterior and first molar teeth using finite element analysis (FEA).

CASE REPORT and DIAGNOS

- A 38-year-old woman presented with a mesofacial pattern with a convex profile. She had had previous orthodontic treatment twice with unsatisfactory results. Intraoral photos:
- Anterior complete deep bite, gummy smile, crowded maxillary and mandibular anterior teeth.
- Class II malocclusion and four missing premolars from previous orthodontic treatment. Diagnosis: Skeletal Class II relationship with vertical maxillary excess and altered passive eruption.



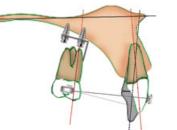
PRETREATMENT

DISCUSSI

Intrusion arch mechanics with iPanda show intrusion movement with labial crown torque produced the same effect as Labial miniscrew



The side effect on molar extrusion was minimised with intrusion mechanics compared to conventional Burstone mechanics³



- No Molar extrusion; Reduced side effect from intrusion arch due to iPanda maximum anchorage
- Intrusion ~ 2.33 mm

TREAMENT PLANNING and MECHANICS

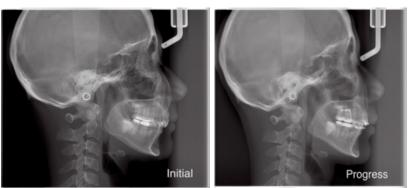
iPanda with intrusion arch was proposed as an alternative treatment because the patient refused labial miniscrews for aesthetic reasons and because of potential discomfort.

- A. Anterior intrusion to correct gummy smile and deep bite with intrusion mechanics and nonsurgical approach.
- B. Intrusion mechanics by using two titanium miniscrews (1.6 x 6mm) in the midpalatal suture
- iPanda: increased anchorage for anterior intrusion
- Main archwire: sectional, on anterior and posterior teeth (0.016 x 0.022 LH)
- Intrusion arch (0.017 x 0.025 NITi): intrusive force applied to canines and between central incisors

INTRUSION MECHANICS With iPanda



TREATMENT PROGRESS



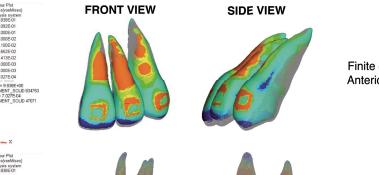
Gummy smile reduction was successfully improved with a nonsurgical approach



The maximum von Mises stress was distributed across the central and lateral incisors and the canine and applied along the labial surfaces of the root area and followed the result of treatment in this patient.

B. From this analysis, the lateral incisor showed the highest stress value and the largest concentrated stress area, due to the lateral incisor having the weakest tooth structure in this area. Therefore, clinicians should be awared of the potential for root resorption when considering force application.

C. Greater stress was distributed in all the molar roots higher than in those of the anterior teeth. However movement was constrained by the iPanda device



Finite element analysis: Anterior teeth

Finite element analysis

Initial and Progress Lateral Cephalogram, Superimposition





Molar

CONCLUSIONS The iPanda with an intrusion arch is an

intrusion arch is an

alternative to effectively intrude anterior teeth without the need of additional mini-screws. Moreover, intrusion mechanics can reduce the risk of maxillary molar extrusion.

REFERENCES

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(2) Kaku M, Kojima S, Sumi H, et al. Gummy smile and facial profile correction using miniscrew anchorage. Angle Orthod 2012;82(1):170-7.

(3) Burstone CJ. The mechanics of the segmented arch techniques. Angle Orthod 1966;36(2):99-120.

Measurement	Norm ± SD	Before	After
SNA (°)	85±3.5	88.6	88.6
SNB (*)	81.2 ± 2.8	81.6	81.6
ANB (°)	3.8 ± 1.8	7.1	7.1
U1-PP (mm)	28 ± 3	29.5	27.2
U6-PP (mm)	23 ± 2	22.6	22.4
Interincisal angle (*)	121.3 ± 7.1	168.3	155.9

Table I. Cephalometric analysis



Improvement of Interincisal angle, as well as, Patient's soft tissue profile related to E-line