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PATIENTS PREFER YOUNG ORTHODONTISTS WHO WEAR WHITE ATTIRE

There is a famous quote that says, “*the first impression is the one that stays*”, this denotes the importance of image for personal and professional success. The first contact between people is crucial when it comes to professional life, because it will determine the image people will get from one. One may wonder “*And what does this have to do with orthodontics?*”, but I can state with conviction that there is a relationship. This statement is not random, but rather based on the results of a recent study¹ published by a group of Brazilian researchers that evaluated the influence of age, gender and attire of orthodontists. To accomplish this, images of orthodontists of different ages, sex and wearing different attire (Fig 1) were used. The results obtained with this study revealed that patients of all ages considered appearance to be an important factor in the choice of the orthodontist. Most of the participants preferred young professionals who wore white attire, since this type of clothing was considered clean and hygienic.

SPACE CLOSURE IS MORE DESIRABLE IN CASES OF MISSING MAXILLARY LATERAL INCISORS

Missing maxillary lateral incisors are a common condition in daily orthodontic practice. The etiology of missing maxillary lateral incisors is multifactorial, including genetic predisposition, local infection or inflammation, usually related to heredity and evolution. In the face of such a clinical situation, we always face the dilemma of closing or opening the orthodontic space. We, orthodontists, tend to closure treatment, however, is this approach considered the best from the patient’s perspective and in our clinical evaluation? With the proposal of answering these questions, Swedish researchers developed a clinical study² that evaluated patients submitted to space closure or space opening in cases of missing maxillary lateral incisors. The patients also answered a questionnaire regarding their satisfaction with the final aesthetic result. The conclusions obtained with this study revealed that both treatment options are valid, however, space closure is preferable.

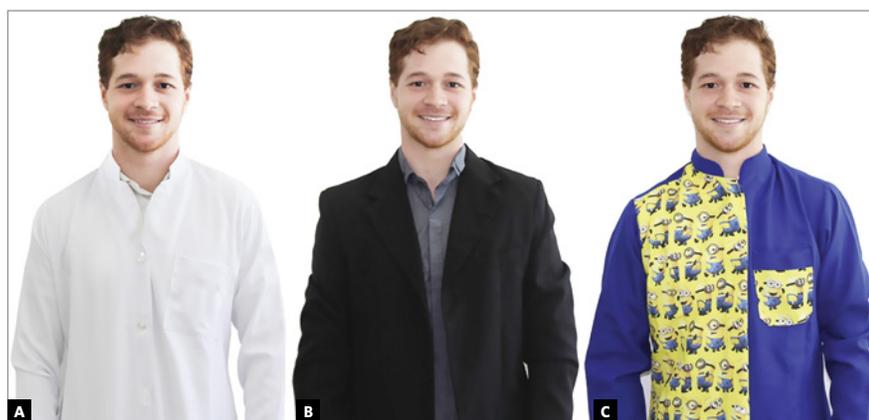


Figure 1 - Image of the orthodontists with different attire: **A)** White attire with white coat; **B)** Dark shirt with dark suit; and **C)** Colorful pediatric dentist’s attire.

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OMEGA-3 DECELERATES ORTHODONTIC TOOTH MOVEMENT

Based on epidemiological studies in Greenland Eskimos, whose diet is rich in fish polyunsaturated fatty acids, omega-3 fatty acids have been considered anti-inflammatory lipids. The prevalence of inflammatory diseases — such as acute myocardial infarction, diabetes mellitus, multiple sclerosis, asthma and thyrotoxicosis — is lower in this population group. If inflammation is harmful when dealing with these pathologies, in orthodontics, when controlled, it is always useful, since we already know that the tooth only moves in the presence of a controlled inflammatory process. In this binomial a question arises, will the orthodontic movement in the presence of systemic omega-3 be processed normally? In the search for a response to this question, Turkish researchers developed a study³ using animal models with rats that received omega-3 diets and underwent orthodontic tooth movement. Biochemical, histological, immunohistochemical and gene expression parameters were evaluated. The authors concluded that systemic administrations of omega-3 fatty acids reduced pro-inflammatory cytokines and showed anti-inflammatory effects. Therefore, the application of omega-3 fatty acids decelerates orthodontic tooth movement, decreasing the number of osteoclasts. The authors further emphasize that during the orthodontic treatment of patients who consume omega-3-rich diets, the consultation intervals can be wider and the orthodontic force activations less frequent.

DAILY ALERT MESSAGES ENABLE PATIENTS TO IMPROVE BRUSHING

The risk of appearance of white spots on the enamel at the end of orthodontic treatment is high. It is not new to anyone how much orthodontic accessories provide buildup of bacterial biofilm. No products have yet been developed to eliminate the need for patients to hygienize their teeth daily, making the patients responsible for their oral hygiene. However, we can help them remember when to perform the cleaning of the teeth. Today, communication has become fast and democratic with text messaging applications.

Taking advantage of the access to this technology, we can use it to our advantage, reminding the patients of the schedule to carry out the cleaning of their teeth. But does such a strategy bring real results? Aiming to answer this question, American researchers developed a study⁴ in which they proposed to evaluate if the messages, sent daily instead of sent weekly, are more effective in improving the oral hygiene of the patients. The results from this study revealed that daily text messages are more effective at improving oral hygiene than weekly messages.

RECTANGULAR LOOPS INTRUDE EXTRUDED SECOND MOLARS WITH LESS INCLINATION

The intrusion movement is undoubtedly the most difficult orthodontic dental movement, due to the need for intense osteoclastic activity throughout the alveolus. Among the teeth that are commonly extruded, we have the maxillary second molars, which

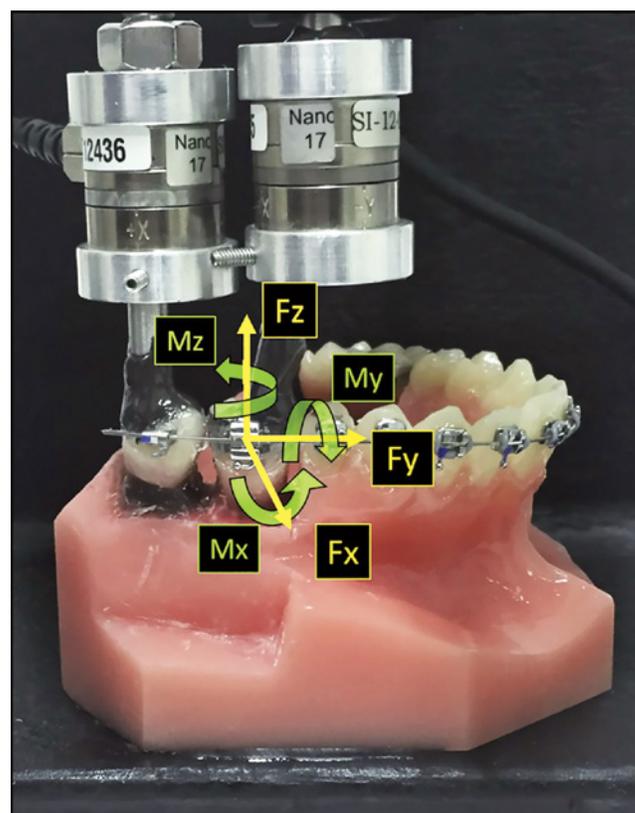


Figure 2 - Device used to test the loop made in rectangular wire and the continuous arch, in the intrusion of maxillary second molars.

can adopt this position for various reasons, such as: tooth loss, ectopic eruption, agenesis, inadequate mechanics and incorrect positioning of the tubes during orthodontic treatment. Extruded second molars hinder orthodontic corrections since they lead to subsequent premature contacts, preventing from obtaining a correct anterior overbite and often leading to functional deviations. True intrusion of second molars is not an easy task, requiring good biomechanical knowledge. Recently, a study⁵ was published by Brazilian researchers that had the proposal of comparing the force systems produced by loops made in rectangular wire and by continuous arches, in the intrusion mechanics of maxillary second molars (Fig 2). The results of this study revealed that both mechanics can intrude the molars, however, rectangular wire loops produce less inclination in the presence of large deflections. The authors further conclude that continuous arches are the best way to intrude when a small intrusion is required.

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