



Montenegro, Budva

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Avala Resort & Villas



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Oral **Presentation**

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skeletal, dental and esthetic parameters. At the end of the treatment, good teeth alignment and solid, stable occlusion were established.

Conclusion: With proper biomechanics our treatment contributed for mandibular forward displacement, reduction of deep bite, reduction of facial convexity and profile improvement.

Key words: Deep overbite, extrusion, intrusion, biomechanics.

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Extraction vs. Nonextraction in Orthodontic Cases

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Introduction: Orthodontic treatment helps bring teeth in alignment. Extractions in orthodontics remain a relatively controversial area that we face in our daily orthodontic practice.

Objective: The aim of this cases presentation is to elaborate the need of tooth extractions in cases for treating crowding and increased overjet in order to create space in the arches but also to improve facial esthetics and treatment stability compared to non–extraction treatment planning.

Material and Methods: First case was orthodontic treatment of an adult patient with increased overbite, increased overjet, proclined upper incisors, skeletal Class II. We did camouflage treatment with correction of overjet by retracting the teeth in the extraction space. With Class II elastics use we achieved molar extrusion and opening the bite which is indicated in low-angle patients. Second case was non extraction orthodontic treatment of an adult patient with increased overbite, skeletal Class II. We used bracket positioning play and Class II elastics for intermaxillary correction.

Results: After the treatment, we established acceptable, aesthetic and functional occlusion in both patients, based on an accurate diagnosis and treatment plan in conjunction with good patient cooperation, appliance selection and management of the treatment.

Conclusion: While we recommend preserving natural teeth whenever possible, extractions of specific teeth are sometimes required in various presentations of malocclusions.

Keywords: Orthodontic treatment, extractions, Class II malocclusion, facial esthetics, treatment stability.

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Factors associated with maxillary canine impaction and treatment duration

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