



DELAIRE FACEMASK THERAPY OF CLASS III MALOCCLUSION

Tina Petrovik¹, Vesna Trpevska², Cena Dimova³, Aneta Mijoska⁴, Jasna Simonoska⁵

¹PHO Dr. Blaga Petrovik, Skopje, North Macedonia

²PHO University Dental Clinical Center „St. Panteleimon“, Department of Orthodontics, Skopje, Republic of North Macedonia, Faculty of Medical Sciences, Goce Delcev University, Stip

³Faculty of Medical Sciences, Goce Delcev University, Stip, North Macedonia

⁴Ss. Cyril and Methodius University, Faculty of Dentistry, PHO University Dental Clinical Center „St. Panteleimon“, Department of Prosthodontics, Skopje, Republic of North Macedonia

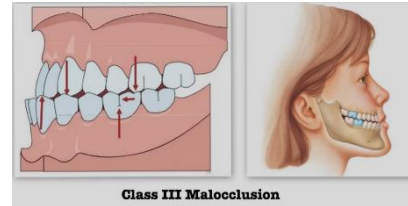
⁵PHO University Dental Clinical Center „St. Panteleimon“, Department for pediatric and preventive dentistry, Skopje, Republic of North Macedonia

29th BaSS
Congress

Belgrade, Serbia
April 24-26, 2025

Introduction

Angle Class III malocclusion has been a challenge and one of the most difficult malocclusions concerning diagnosis, prognosis and treatment. Diagnosis, treatment planning and prognosis depend on patient age, growth potential and severity of malocclusion.



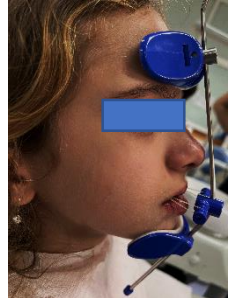
Material and Method

Female patient, age 9 years with skeletal Class III malocclusion was treated with the Facemask as a specialized orthodontic appliance, which applies controlled, continuous forces to the facial structure, aiding and promoting optimal jaw development.



Aim

The aim of this case report was to describe and discuss the treatment of a patient with skeletal Class III malocclusion with Facemask as orthopedic appliance.



Results

The SNA angle had increased while SNB decreased resulting in a normal jaw relationship ($ANB = 2^\circ$), permitting growth redirection, mainly when the maxilla is the primary etiologic factor.



Conclusion

Maxillary intramembranous growth has a better response to orthopedic treatment, based on growth control and redirection, thus contributing for early intervention success. Early intervention, adequate indication of appliances, and patient compliance are key factors for good outcomes.