Many orthodontists continue to avoid early intervention because they believe the condition is caused by overgrowth of the mandible, and they do not believe it is possible to control mandibular growth. The orthodontic care of a patient in skeletal Class III malocclusion often presents a dilemma to an orthodontist: whether to treat or to follow the facial growth pattern until adulthood, when orthognathic surgery can be done.

This presentation by the Double Facebow Appliance demonstrates very successful management of severe Class III malocclusions, which were considered extremely difficult by either conventional extraoral appliances or edgewise appliances, or both. The purpose of this presentation is to show a treatment approach that permits a rapid resolution of certain Class III malocclusions, the design and construction of a Double Facebow Appliance(D.F.A.), and the results of it’s use on some patients.

Intentional ankylosis와 Distraction osteogenesis를 동등한 상악 전방 간인술

Bilingual arch, RME(rapid maxillary expansion)등 전인장치의 구강내 부착을 위한 다양한 구내 보강장치가 소개되었으나 정형력이 치아를 통하여 전달되므로, 숏자가 원하는 상악의 전방 이동보다는 원하지 않은 치아치조성 이동이 발생될 수 있다.

본고에서는 이와같은 부작용을 감소시키는 방법으로 상악 유연성을 의도적으로 유착시키(intentional or therapeutic ankylosis) 상악 치열공의 고정을 보강하는 입상슬을 소개함과 동시에, 정형외과 영역에서 bone lengthening을 위해 1950년 Ilizarov에 의해 소개된 이래 최근 치과 영역에서는 주로 하악 후퇴증(mandibular hypoplasia)의 치료에 이용된 distraction osteogenesis슬을 상악을 열형상 치료에 융용하는 방법을 소개하기로 한다.

Orthodontic Considerations in Maxillary Distraction Osteogenesis using RED System

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Patients with repaired oro-facial clefts can have impairment of maxillary growth resulting in secondary deformities of the jaws and malocclusion. In such patients, orthognathic surgery with or without bone graft is the procedure of choice for reestablishing facial balance and occlusion. The maxilla in these patients is often difficult to mobilize and retain because of scar tissues resulting from previous operations. The possibility of