

EARLY ORTHODONTIC TREATMENT

Orthodontic treatment is primarily used to prevent and correct “bite” irregularities. Several factors may contribute to such irregularities, including genetic factors, the early loss of primary (baby) teeth, and damaging oral habits (such as thumb sucking and developmental problems).

Orthodontic irregularities may be present at birth or develop during toddlerhood or early childhood. Crooked teeth hamper self-esteem and make good oral homecare difficult, whereas straight teeth help minimize the risk of tooth decay and childhood periodontal disease.

During biannual preventative visits, the pediatric dentist is able to utilize many diagnostic tools to monitor orthodontic irregularities and, if necessary, implement early intervention strategies. Children should have an initial orthodontic evaluation before the age of eight.

Why does early orthodontic treatment make sense?

Some children display early signs of minor orthodontic irregularities. In such cases, the pediatric dentist may choose to monitor the situation over time without providing intervention. However, for children who display severe orthodontic irregularities, early orthodontic treatment can provide many benefits, including:

- Enhanced self-confidence and esthetic appearance.
- Increased likelihood of proper jaw growth.
- Increased likelihood of properly aligned and spaced adult teeth.
- Reduced risk of bruxing (grinding of teeth).
- Reduced risk of childhood cavities, periodontal disease, and tooth decay.
- Reduced risk of impacted adult teeth.
- Reduced risk of protracted orthodontic treatments in later years.
- Reduced risk of speech problems.
- Reduced risk of tooth, gum, and jawbone injury.

When can my child begin early orthodontic treatment?

Pediatric dentists recognize three age-related stages of orthodontic treatment. These stages are described in detail below.

Stage 1: Early treatment (2-6 years old)

Early orthodontic treatment aims to guide and regulate the width of both dental arches. The main goal of early treatment is to provide enough space for the permanent teeth to erupt correctly. Good candidates for early treatment include: children who have difficulty biting properly, children who lose baby teeth early, children whose jaws click or grind during movement, bruxers, and children who use the mouth (as opposed to the nose AND mouth) to breathe.

During the early treatment phase, the pediatric dentist works with parents and children to eliminate orthodontically harmful habits, like excessive pacifier use and thumb sucking. The dentist may also provide one of a variety of dental appliances to promote jaw growth, hold space for adult teeth (space maintainers), or to prevent the teeth from “shifting” into undesired areas.

Stage 2: Middle dentition (6-12 years old)

The goals of middle dentition treatments are to realign wayward jaws, to start to correct crossbites, and to begin the process of gently straightening misaligned permanent teeth. Middle dentition marks a developmental period when the soft and hard tissues are extremely pliable. In some ways therefore, it marks an optimal time to begin to correct a severe malocclusion.

Again, the dentist may provide the child with a dental appliance. Some appliances (like braces) are fixed and others are removable. Regardless of the appliance, the child will still be able to speak, eat, and chew in a normal fashion. However, children who are fitted with fixed dental appliances should take extra care to clean the entire oral region each day in order to reduce the risk of staining, decay, and later cosmetic damage.

Stage 3: Adolescent dentition (13+ years old)

Adolescent dentition is what springs to most parents’ minds when they think of orthodontic treatment. Some of the main goals of adolescent dentition include straightening the permanent teeth, and improving the esthetic appearance of the smile.

Most commonly during this period, the dentist will provide fixed or removable “braces” to gradually straighten the teeth. Upon completion of the orthodontic treatment, the adolescent may be required to wear a retainer in order to prevent the regression of the teeth to their original alignment.

If you have questions or concerns about orthodontic treatment, please contact your pediatric dentist.