113th ANNUAL SESSION

AMERICAN ASSOCIATION OF ORTHODONTISTS

TREATMENT AND STABILITY OF ANTERIOR OPEN BITE

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1.- OPEN-BITE TREATMENT IN THE DECIDUOUS AND MIXED DENTITIONS

1.1.- Treatment with tongue crib or tongue spurs\(^{(1, 2)}\)

1.2.- Treatment stability in the deciduous and mixed dentitions

Clinical stability is close to 100\%\(^{(3)}\).

2. OPEN-BITE TREATMENT IN THE PERMANENT DENTITION

2.1- Differential diagnosis

2.2- Open-bite non-extraction treatment

2.2.1- Stability of non-extraction open bite treatment

Clinical stability is of 61.9\%\(^{(4, 5)}\).

2.3- Open bite treatment with extractions

2.3.1- Stability of extraction open bite treatment

Clinical stability is of 74.2.9\%\(^{(4, 6)}\).

2.3.2- Stability of Extraction versus non-extraction open-bite treatment

Extraction treatment is more stable than non-extraction treatment\(^{(7)}\).
2.4. - Open-bite correction with posterior teeth intrusion

2.4.1. - Stability of anterior open-bite treatment by posterior teeth intrusion
Molar intrusion has a relapse rate of 20 to 30%\(^{(8-10)}\).

2.5. - Treatment of open-bite with occlusal adjustment

2.5.1. - Stability of open bite treatment with occlusal adjustment
Clinical stability is of 66.7%\(^{(11, 12)}\).

3. ORTHODONTIC-SURGICAL TREATMENT OF ANTERIOR OPEN BITE

3.1. Stability of orthodontic-surgical anterior open bite correction
Clinical stability is over 75%\(^{(4, 13)}\).
REFERENCES