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Orthodontic extrusions of impacted incisors from unacceptable to acceptable smiles

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Over-retained deciduous teeth, supernumerary teeth or ectopic eruption and crowding are the most common etiological factors for impacted central incisors. The prevalence of maxillary central incisor impaction ranges from 0.06% to 0.2%. Diagnosis of impacted incisors are made based on the chief complaint of missing tooth from the child/parent. Its clinical examination involves intra-oral examination: Important clinical signs such as over-retention of the corresponding primary teeth while the contra lateral permanent tooth has already erupted. Pathognomonic sign which indicate impaction of a central incisor is the presence on the arch of the homolateral lateral incisor, as these points to an anomaly in the central incisor eruption process. Deviation from normal sequence of eruption, e.g. lateral incisors erupt prior to the central incisor. Radiographic examination: SLOB, CBCT, Occlusal Radiograph, Panoramic Radiograph and Lateral Cephalogram. Treatment Options: Conservative management would be the extraction of any obstruction, the creation of space and the observation for spontaneous eruption. 70% of teeth have been reported to erupt spontaneously after removal of obstruction. In the case of a supernumerary tooth, it is often possible to remove the supernumerary tooth avoiding damage to the underlying incisor and allow the incisor to erupt on its own. In some instances of the impacted central incisors, elimination of causative factors such as removal supernumerary tooth might not be sufficient for its emergence in the oral cavity. Customized treatment plan with surgical exposure/orthodontic extrusion will be mandatory. The customized treatment plan is crucial as the impacted central incisor inclination, position or location of the tooth re not same. If horizontally impacted with proximity to nasal floor or high in labial sulcus, surgical exposure and orthodontic exposure technique may not be similar. In this presentation variations in surgical exposure and orthodontic extrusion will be discussed.

Biography

B M Shanthala is the Head of the Department of Paedodontics and Preventive Dentistry, Coorg Institute of Dental Sciences, India, with the education qualification of MDS- Paedodontics and Preventive Dentistry, Mangalore University, having teaching experience of 23 years. She has published papers in many national and international journals of dentistry and book publications of original research in the Lambert publishers. She is actively involved in pre-clinical trials of plant-based products, natural products and its potential antibacterial activity against cariogenic micro-organisms.

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