



ÖNLEYİCİ ORTODONTİK TEDAVİ

Prof. Dr. Hatice Gökalp

Önleyici ortodontik tedavi ?

- İskeletsel, kassal ve dentoalveolar anomalilerin daimi dişler henüz sürmeden önce, karma dişlenme döneminde bertaraf edilmesi

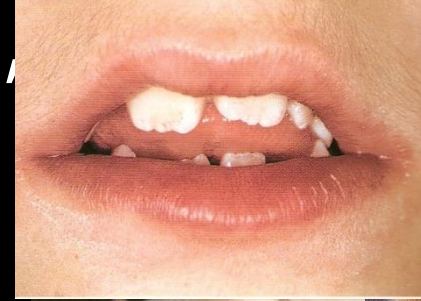
Erken ortodontik tedavide yüz,
ortodontistin standartlarına;

geç ortodontik tedavide ise ortodontist
yüzün standartlarına uydurmak
zorundadır

Gugino

Önleyici Ortodontik Tedavi

- normal büyümeyi olumsuz etkileyecek olan transversal, vertikal, sagittal yöndeki interferensler giderilir
- ağız solunumu,
- atipik yutkunma,
- postural problemler,
- dudak ve parmak emme alışkanlıklarından olumsuz etkilenen fonksiyonel üniteler tedavi edilir



amaç

- Erken ortodontik tedavinin amacı daimi dişlenme döneminde yapılacak tedaviyi basitleştirmek veya tümüyle ortadan kaldırmaktır

klirik gereksinime göre

- Miyofonksiyonel tedavi
- Ortopedik tedavi
- Basit hareketli veya sabit ortodontik aparey tedavisi



Ne zaman ?

- Malokluzyon türüne göre önleyici ortodontik tedavi zamanı da deęişir

Clas I malokluzyonda

- Sorun genellikle diř boyutu ile ark boyutu arasındaki uyumsuzluktur.
- Bu sorun genellikle 8-9 yaşlarında ortaya çıkar
- Bu dönemde üst ve alt 4 keser diř sürmüştür

Clas I malokluzyonda

- Anteriordaki sorun santral kesici dişler arasındaki diestema olabilir
- Diestema sürme sırasında oluşmuş ise lateral diş sürmeye başladığı zaman ortadan kalkar



- Ancak labial frenum nedeniyle oluştuysa lateral dişleri sürdükten sonra da devam eder.
- Diastemanın labial frenum kaynaklı olduğunu anlamak için klinik test yapılır

Blanche Test



Blanche Test



Blanche Test



Blanche Test



Blanche Test

TEDAVİ

Daimi kanin diřin sürmesi beklenir

İlk önce diastema kapatılır

Daha sonra frenektomi yapılır



Clas I malokluzyonda

- Posterior bölgede problem çapraşıklıkadır. **ARK BOYU UYUMSUZLUĞU**, mevcut ark boyu uzunluğu ile tüm daimi dişlerin mezio-distal boyutu toplamı arasındaki uyumsuzluk

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- Karma dişlenme döneminde **birincil** ve **ikincil çapraşıklık** dan söz edilir

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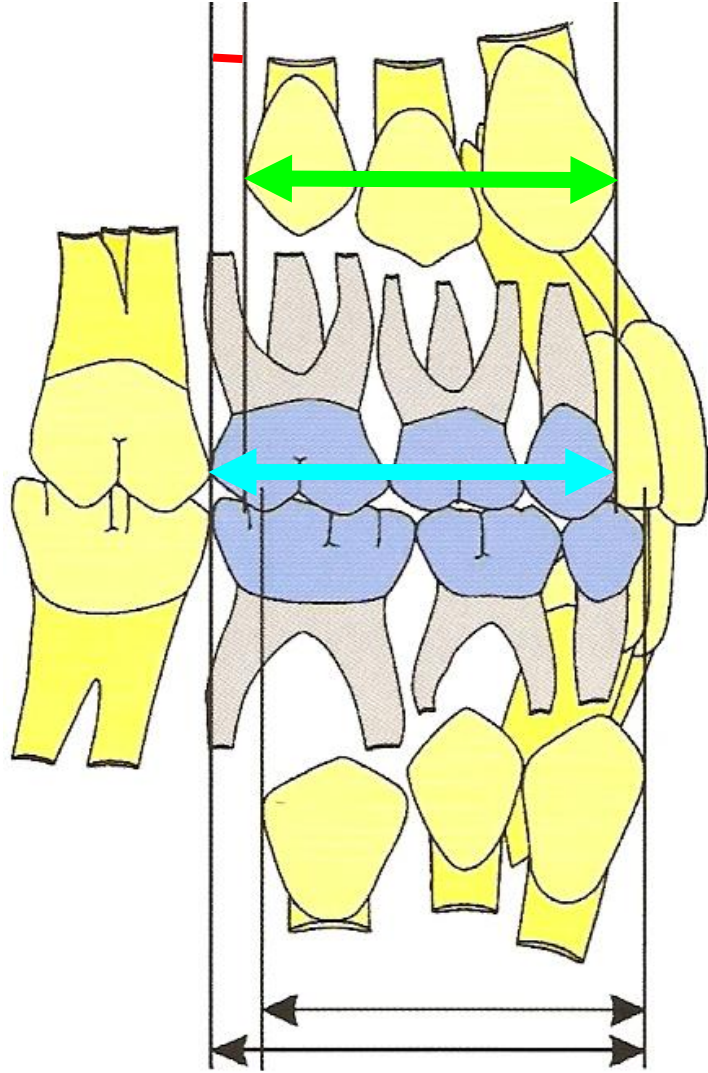
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- **İkincil çapraşıklık**, fonksiyonel kökenlidir (Parmak veya dudak emme), süt dişlerinin çürük nedeniyle erken kaybına bağlı olarak oluşabilir

- Süt diřleri daimi diřlerin yer tutucusudur
- Süt diřleri zamanından önce yerini terk etmemelidir
- Pedodontik yaklaşım ortodontinin koruyucu hekimliđidir



**Süt diřlenme dönemi neden
önemlidir?**





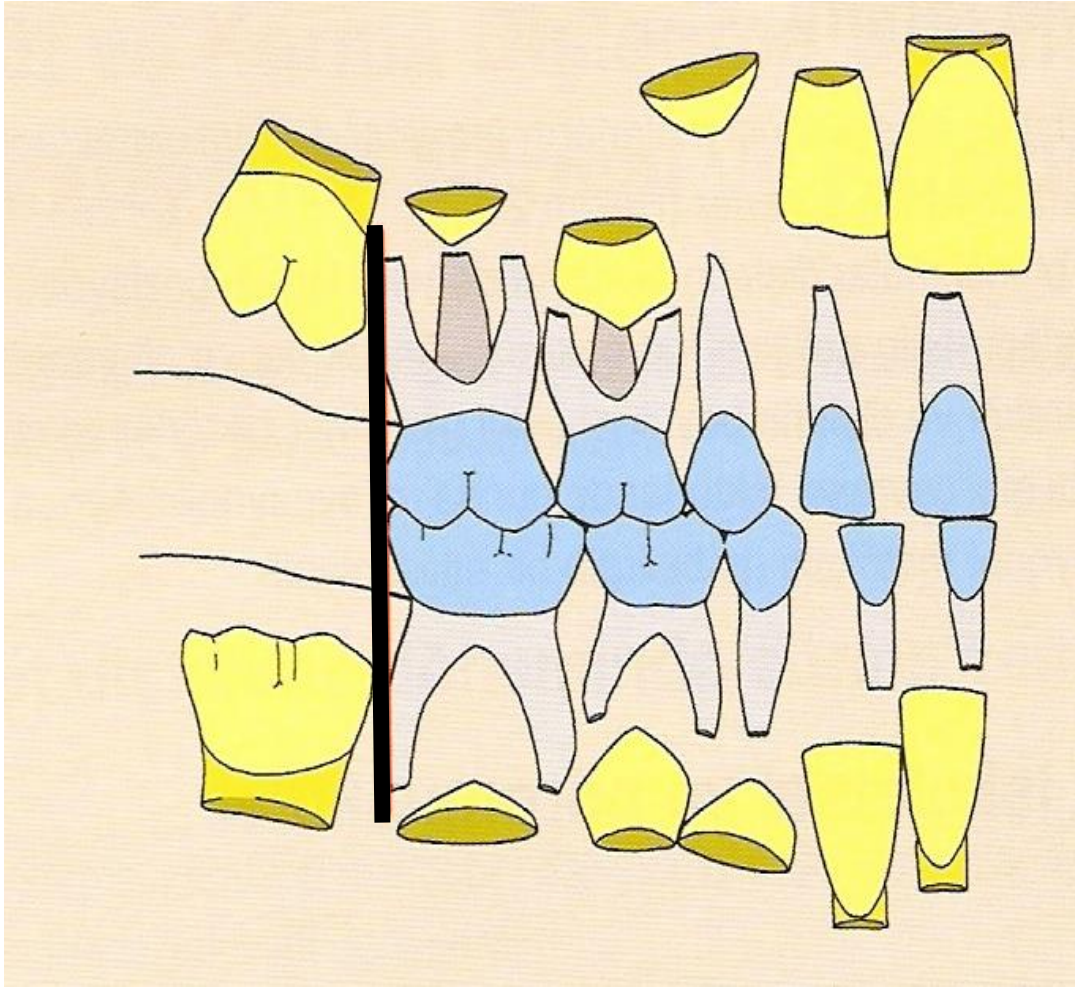
Süt molar ve kanin dişlerin
M-D boyutlarının toplamı,
alttan gelen üç daimi dişin
M-D boyut toplamından fazladır.
Bu fazla yere **LEE WAY ARALIĞI** denir

Nance

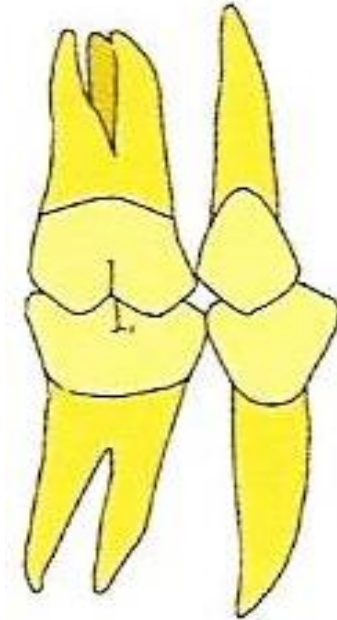
Lee Way Aralığının Önemi ?

- Lee way farkı üst çenede 1,8 mm
- alt çenede ise 3,4 mm
- Bu fark Class I molar ilişkiyi sağlar

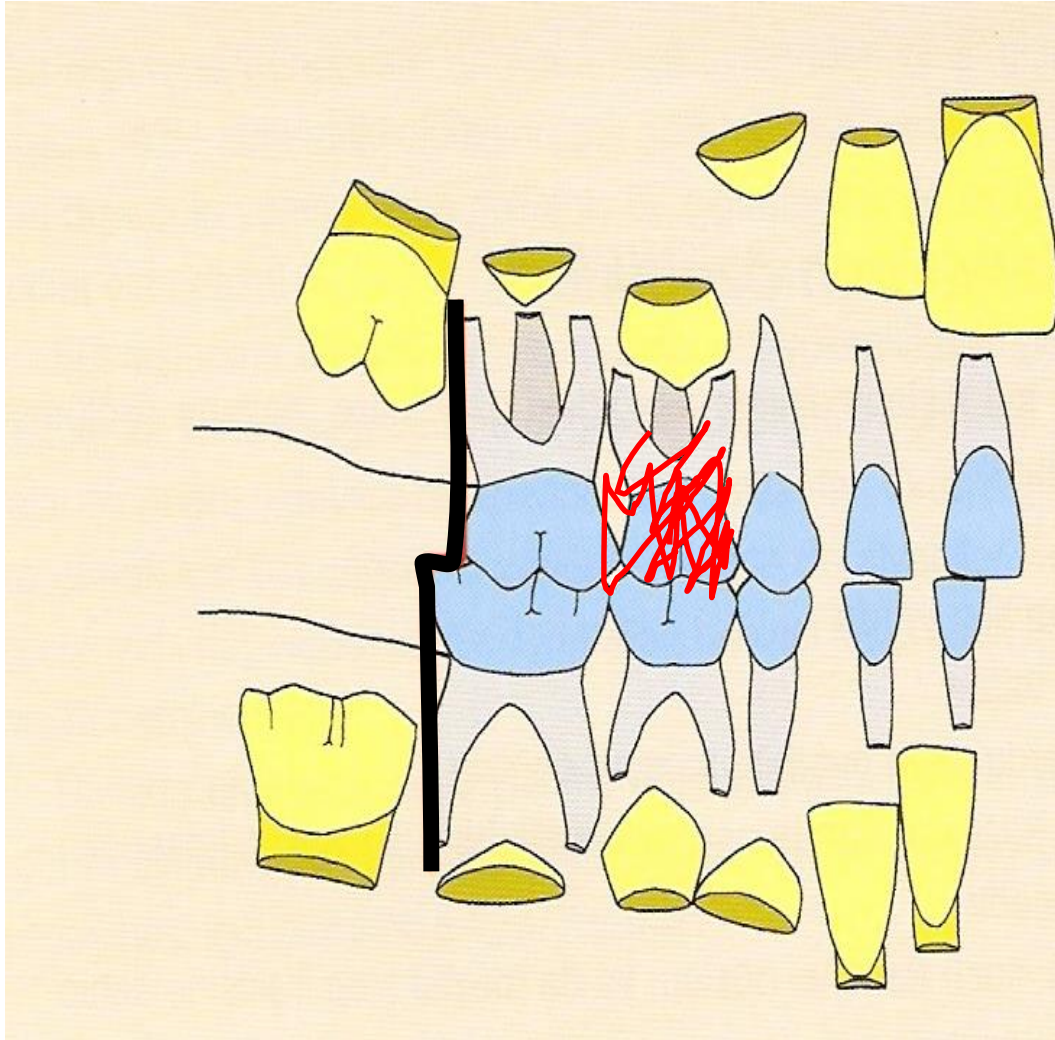
Flaş terminal düzlem



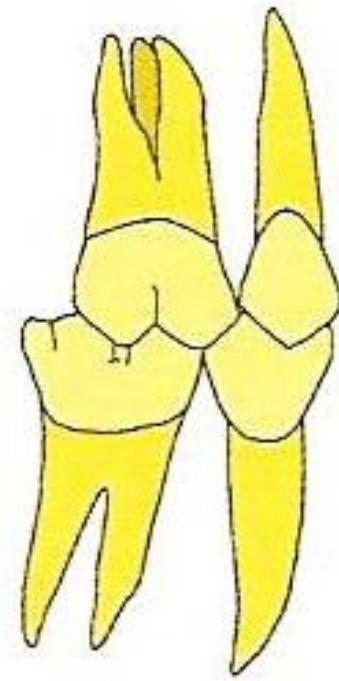
**Erken süt dişi kaybı
flaş terminal'i bozar**



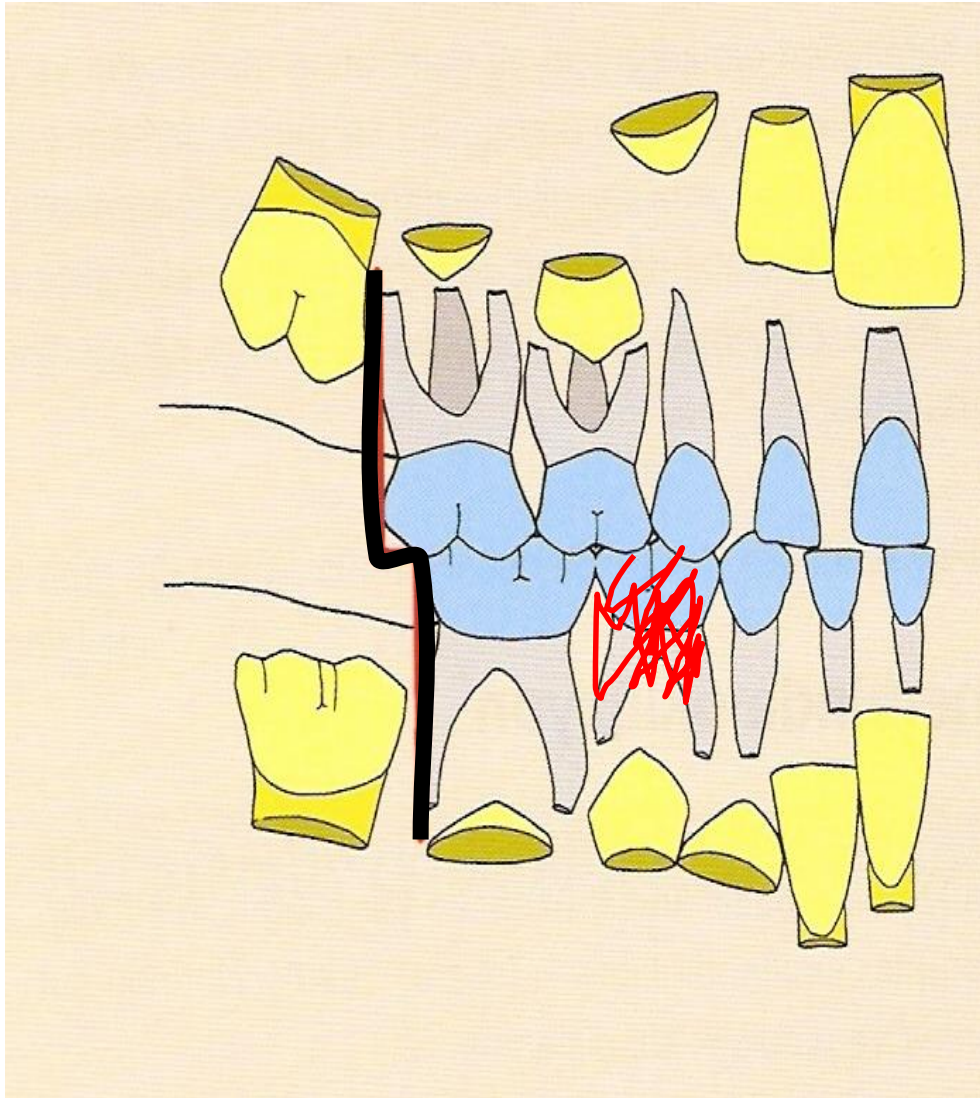
Distal step



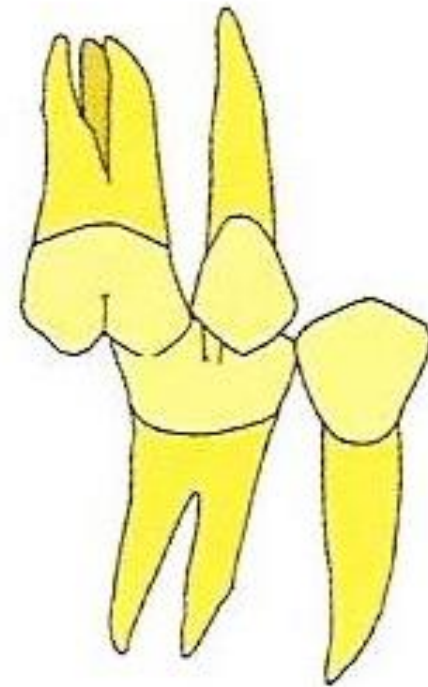
Class II molar ilişki



Mesial step



Class III molar ilişki



Yer kaybedildiyse ne yapılır?

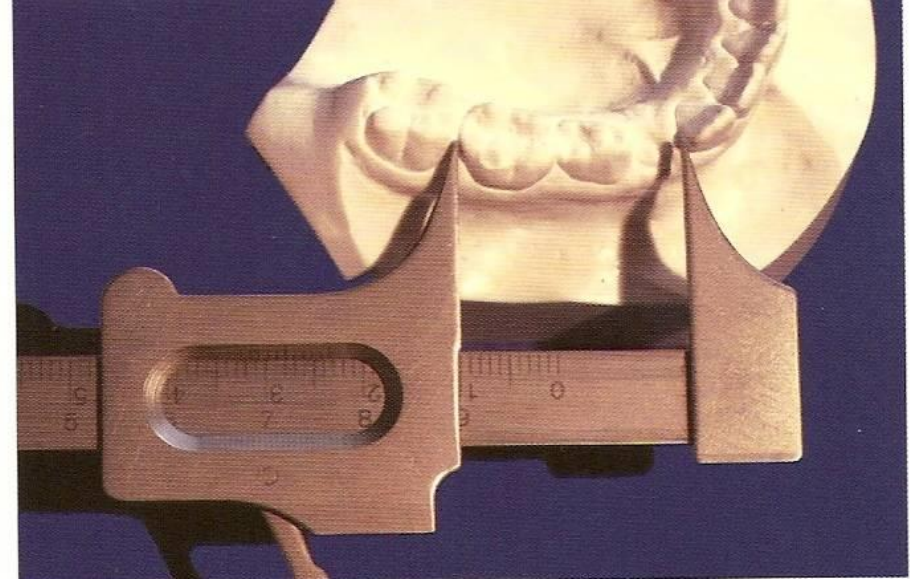
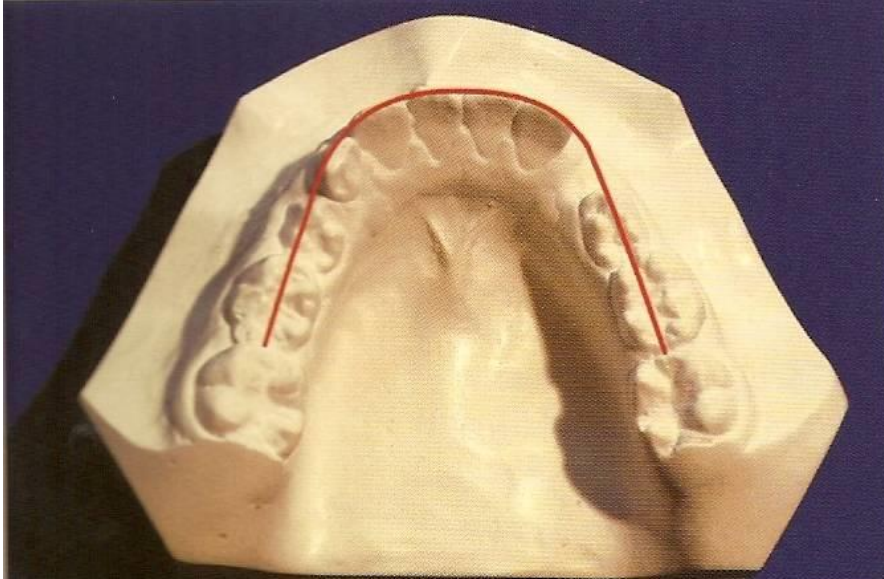
YER TUTUCU





**Dental ark üzerinde yer analizi
nasıl yapılır?**

Yer darlığı analizi



Yer darlığı analizi

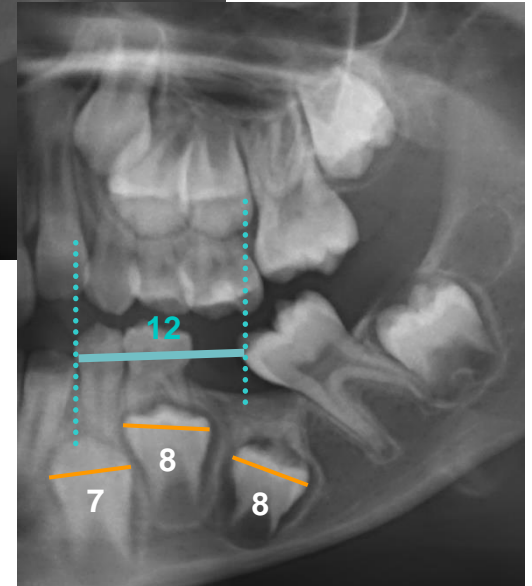
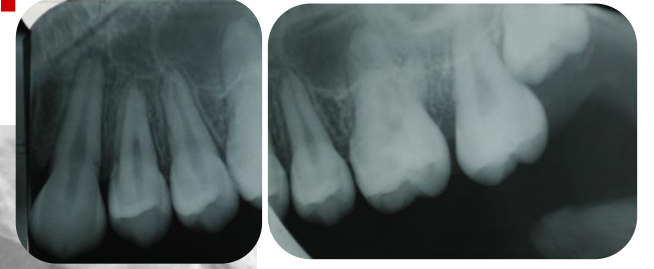
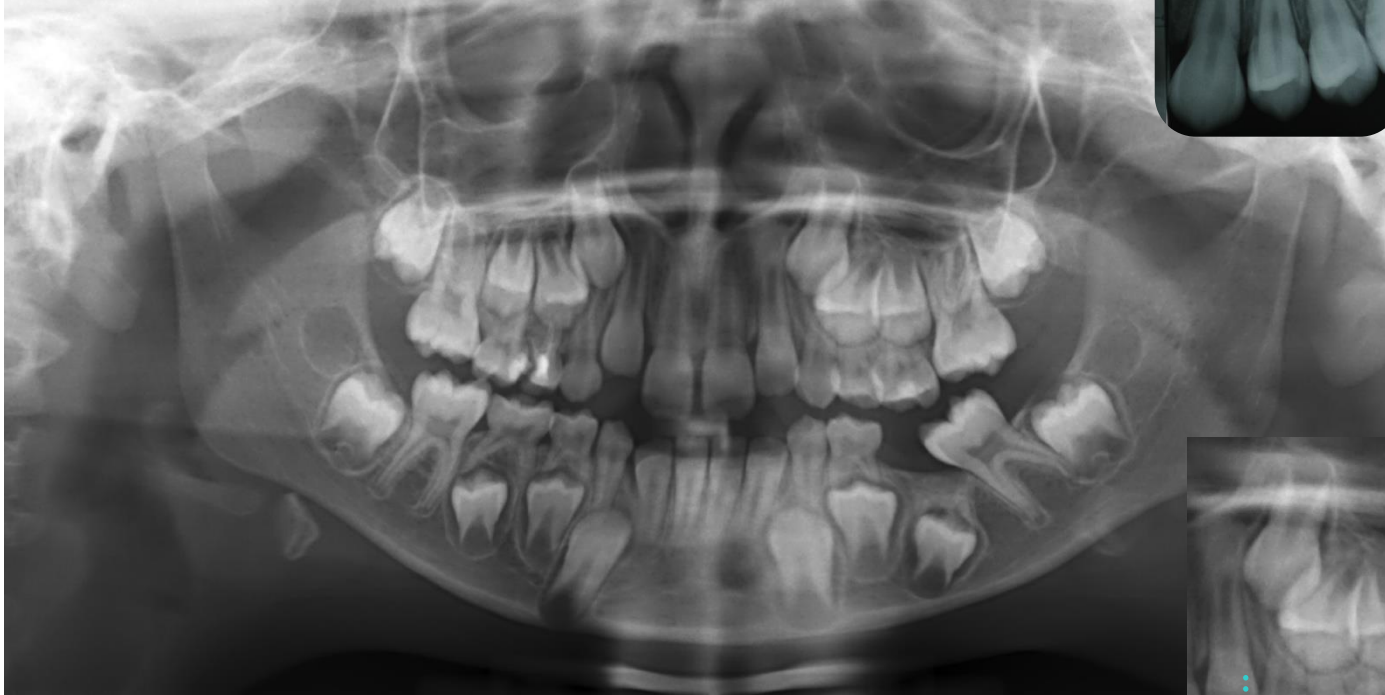
-Miks Dentisyon Dönemi-

1.Röntgen Yöntemi ile

2.Kesici M-D boyutuna göre

Röntgen yöntemi

-Periapikal film-



•**Kanin ve pm larların M-D boyutu**

Kesici M-D boyutuna göre

1. Carey (Alt kesici tutarına göre posterior bölge yer analizi)

Toplam 21-12	Toplam alt - 345
20 mm	18,50 mm
21	18,50
21	19,75
22	20,66
23	21,81
24	22,25
25	22,75
26	23,65
27	24.00

Kesici M-D boyutuna göre

2. Moyers Analizi

0 3 0 0 t 0 0

	19.5	20.0	20.5	21.0	21.5	22.0	22.5	23.0	23.5	24.0	24.5	25.0
% 95	21.6	21.8	22.1	22.4	22.7	22.9	23.2	23.5	23.8	24.0	24.3	24.6
% 85	21.0	21.3	21.5	21.8	22.1	22.4	22.6	22.9	23.2	23.5	23.7	24.0
% 75	20.6	20.9	21.2	21.5	21.8	22.0	22.3	22.6	22.9	23.1	23.4	23.7
% 65	20.4	20.6	20.9	21.2	21.5	21.8	22.0	22.3	22.6	22.8	23.1	23.4
% 50	20.0	20.3	20.6	20.8	21.1	21.4	21.7	21.9	22.2	22.5	22.8	23.0
% 35	19.6	19.9	20.2	20.5	20.8	21.0	21.3	21.6	21.9	22.1	22.4	22.7
% 25	19.4	19.7	19.9	20.2	20.5	20.8	21.0	21.3	21.6	21.9	22.1	22.4
% 15	19.0	19.3	19.6	19.9	20.2	20.4	20.7	21.0	21.5	21.5	21.8	22.1
% 5	18.5	18.8	19.0	19.3	19.6	19.9	20.1	20.4	20.7	21.0	21.2	21.5

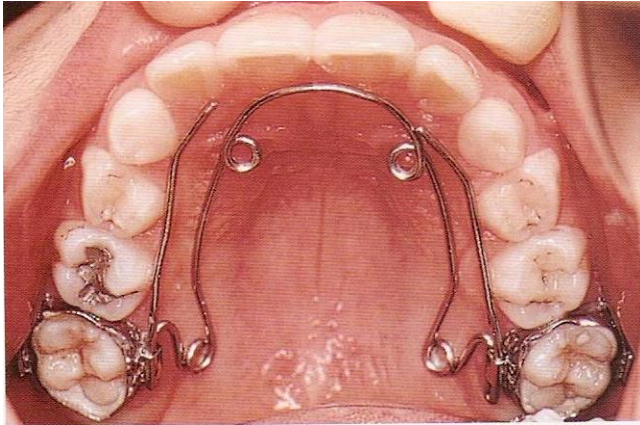
0 3 0 0 t 0 0

	19.5	20.0	20.5	21.0	21.5	22.0	22.5	23.0	23.5	24.0	24.5	25.0
% 95	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8	24.1	24.4
% 85	20.5	20.8	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8
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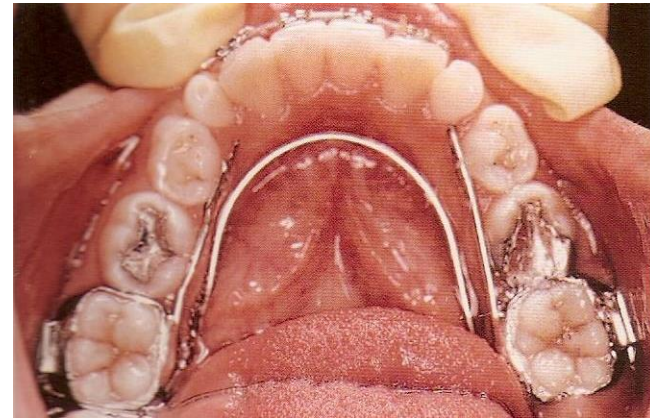
Karma diřlenme Döneminde Çaprařıklık tedavisi

- Expansiyon
- İnterproksimal redüksiyon (Süt diřine striping)
- Seri Çekim

Expansiyon

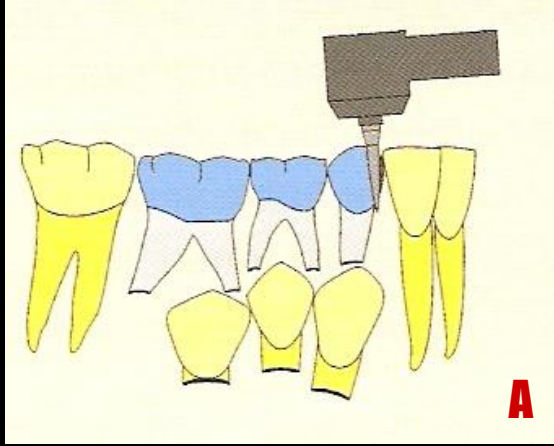


Quad helix apareyi



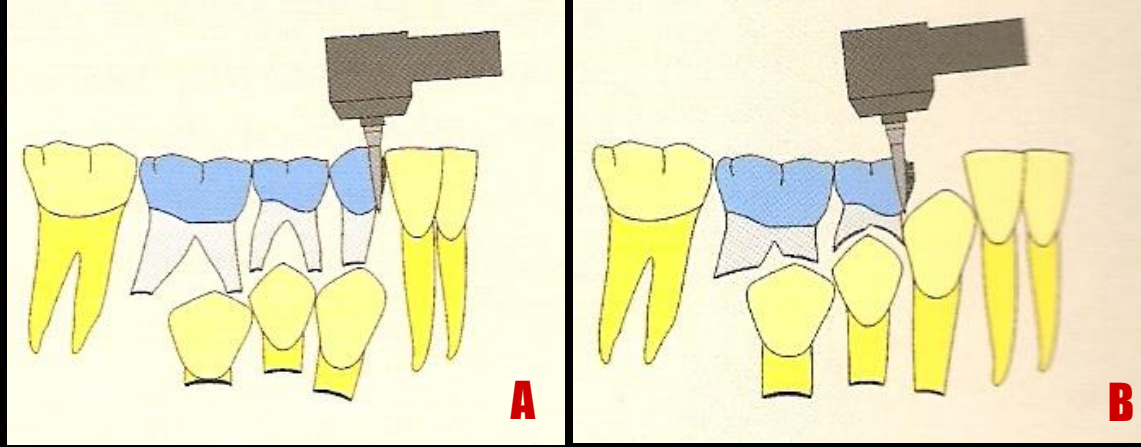
Helix li lingual ark

İnterproksimal Redüksiyon



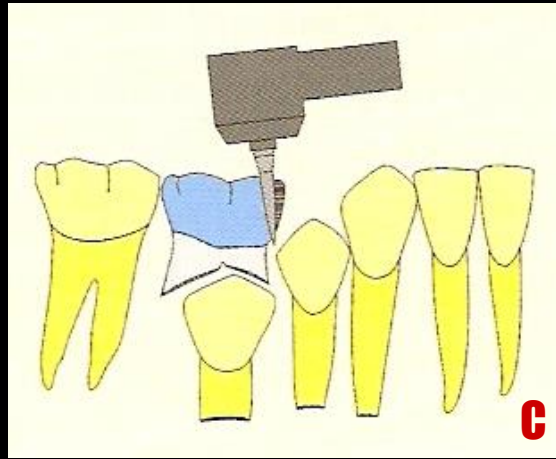
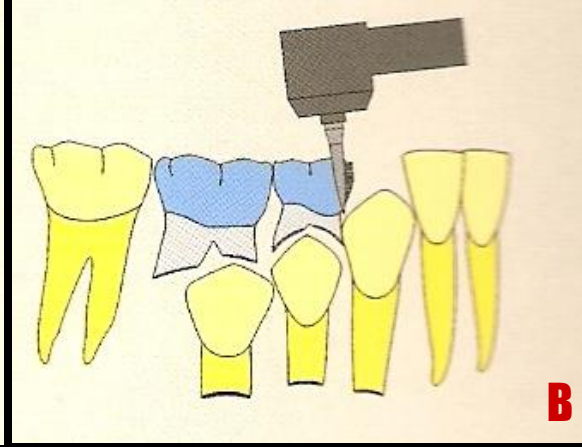
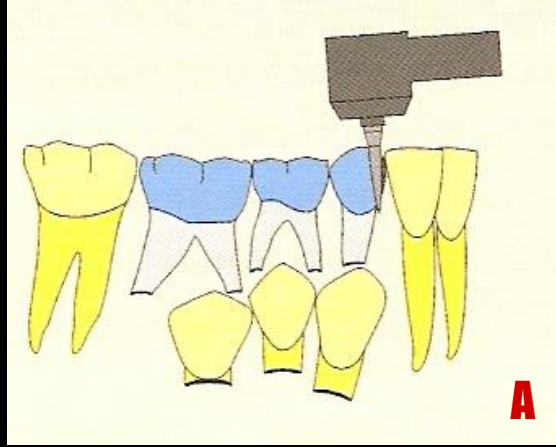
- 4 mm çapraşıklık olduğunda süt dişlerinin mesialinden aşındırılır

İnterproksimal Redüksiyon



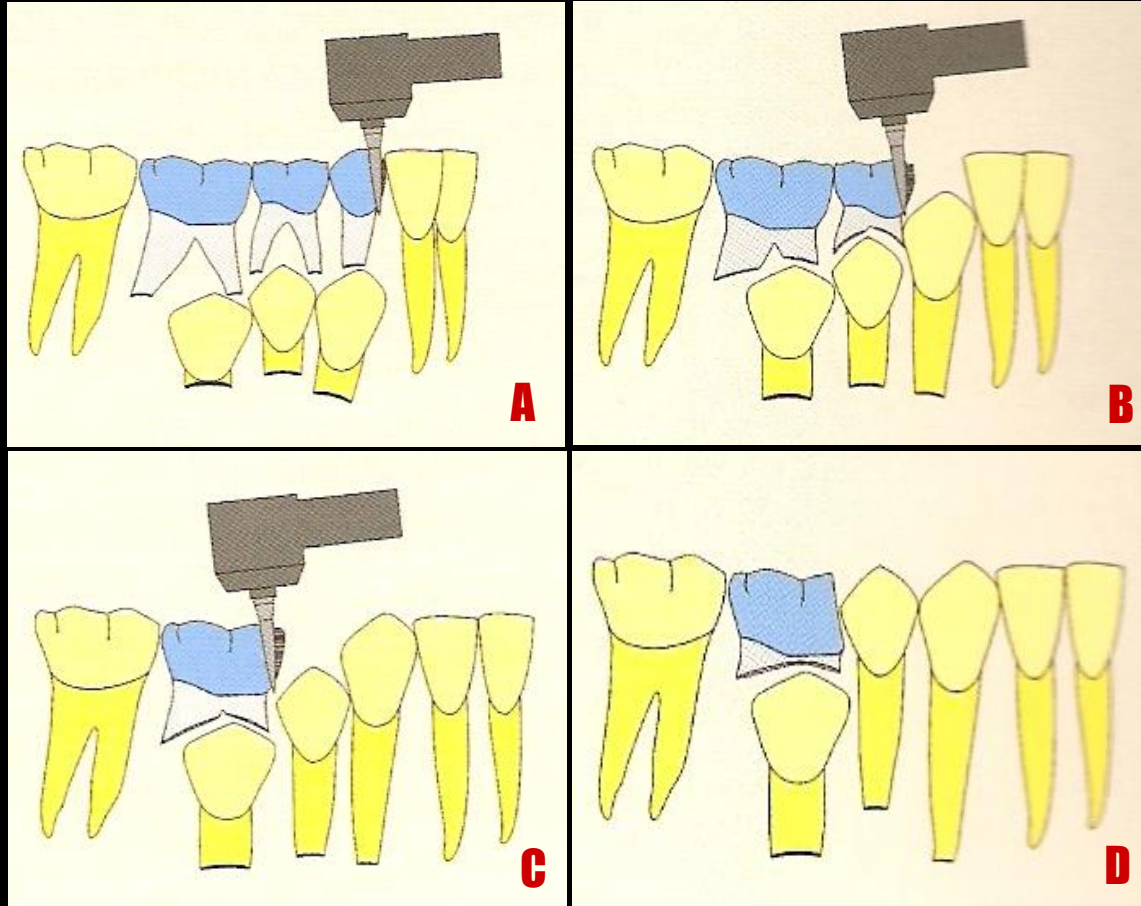
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İnterproksimal Redüksiyon



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İnterproksimal Redüksiyon



- 4 mm çapraşıklık olduğunda süt dişlerinin mesialinden aşındırılır

Süt diřleri neden önemlidir?

SERİ ÇEKİM

SERİ ÇEKİM

-endikasyon-

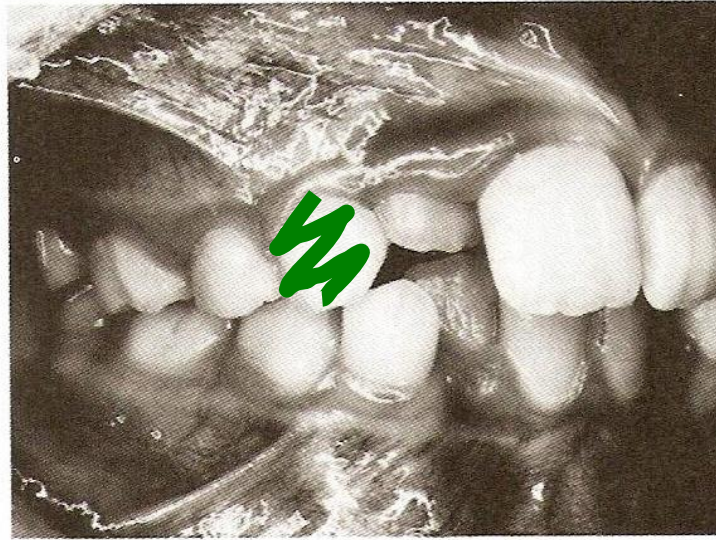
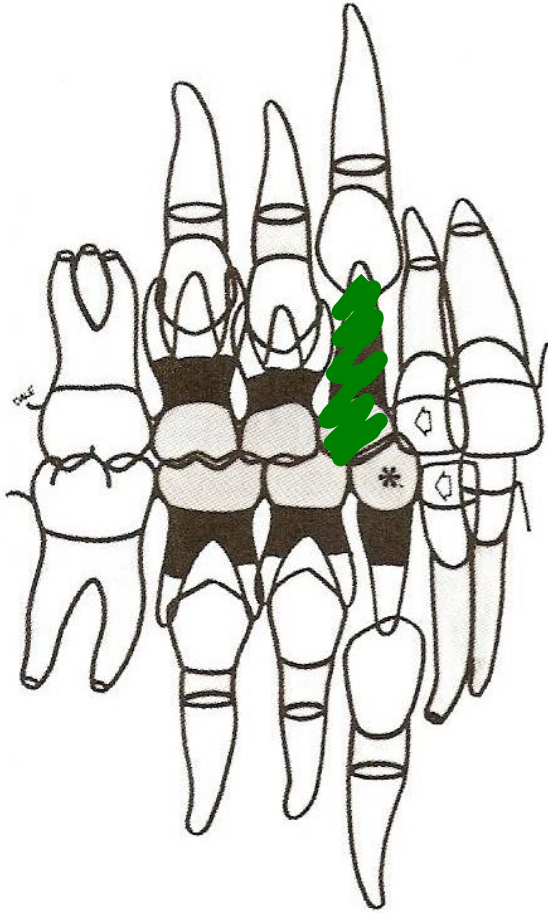
- Class I malokluzyon
- Karışık dişlenme dönemi
- Normal overbite
- Hiperdiverjan
- Normodiverjan
- 7 mm den fazla çapraşıklık

SERİ ÇEKİM

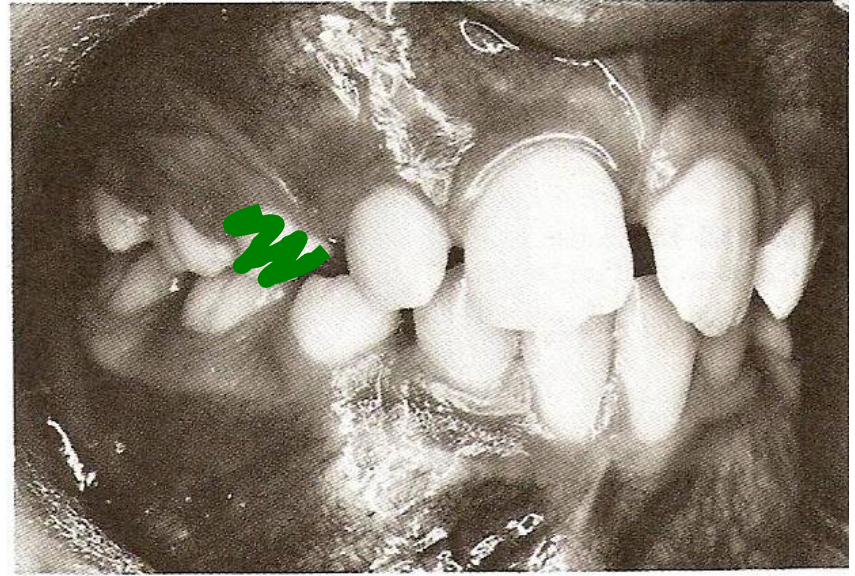
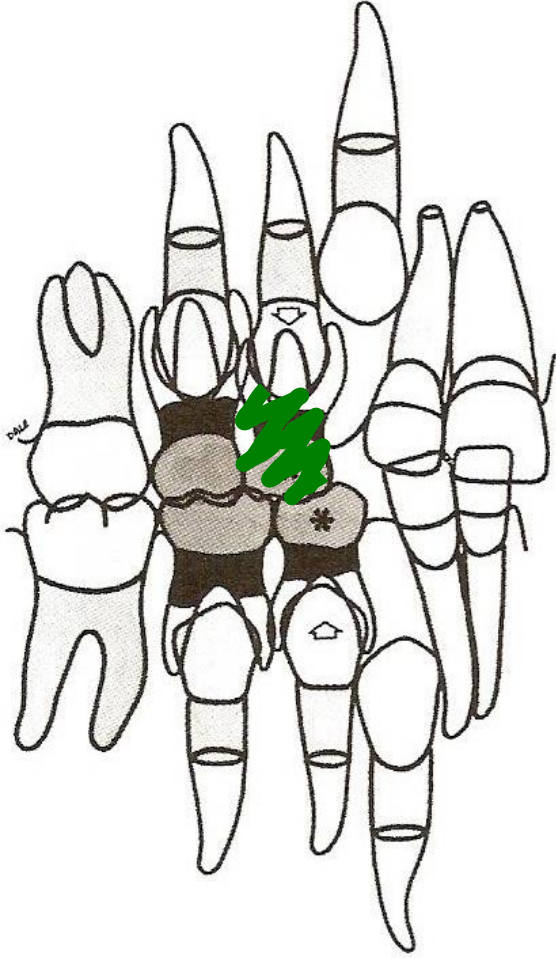
-kontrendikasyon-

- Hipodiverjan
- Kongenital pm eksikliği

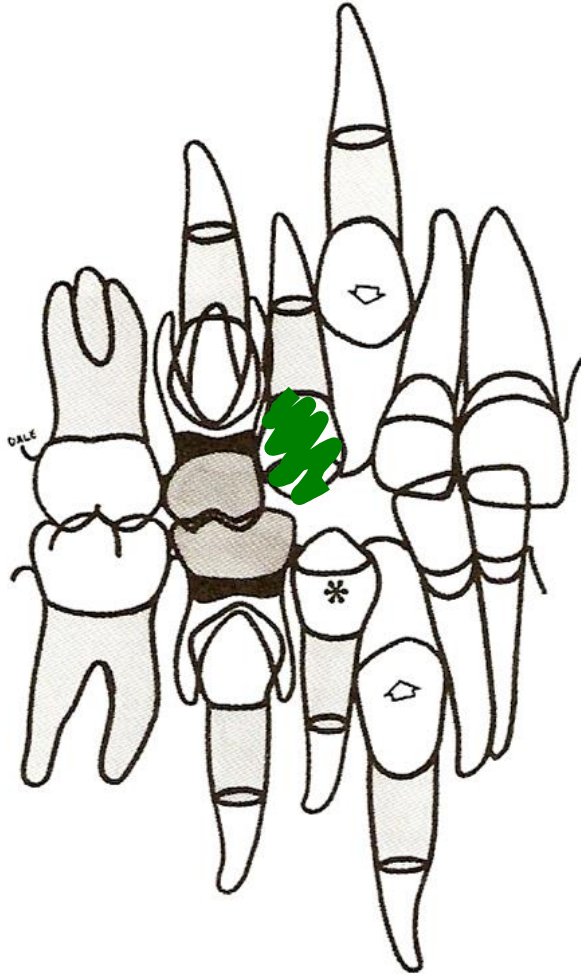
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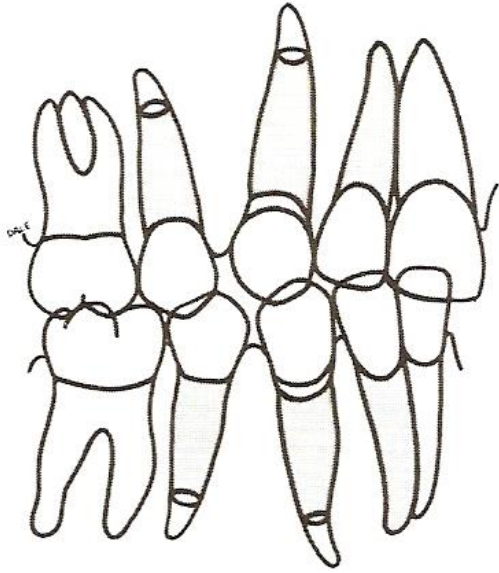
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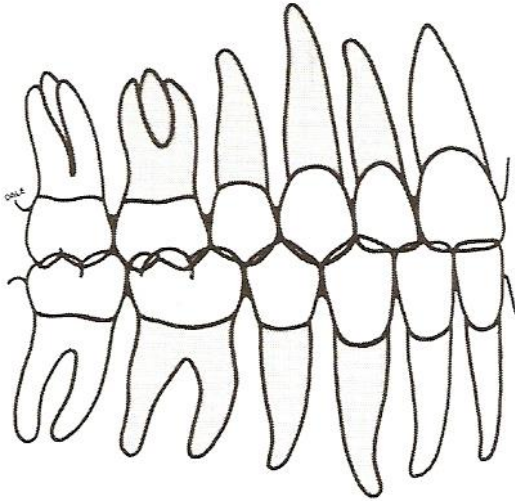
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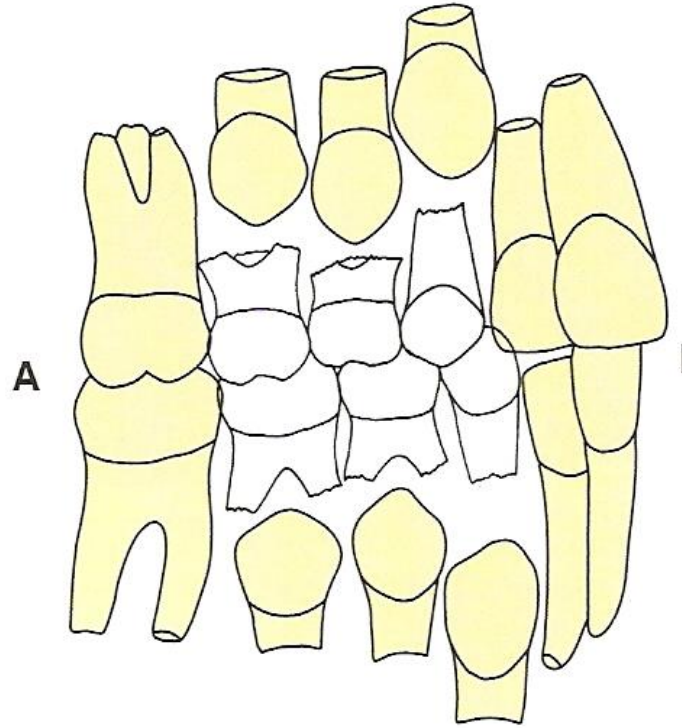
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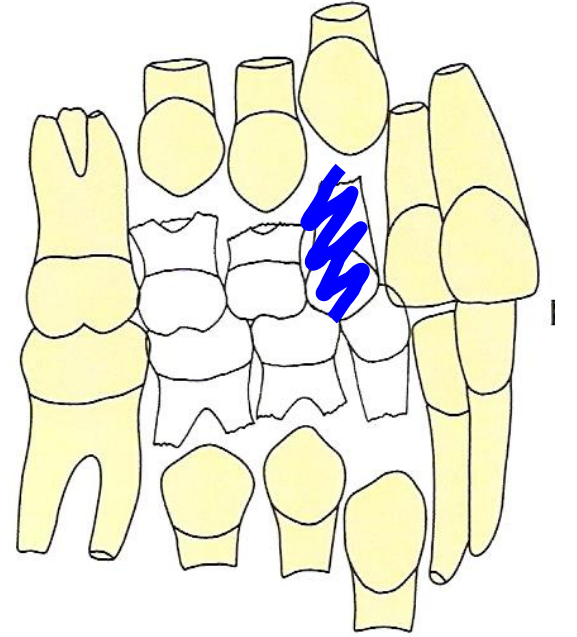
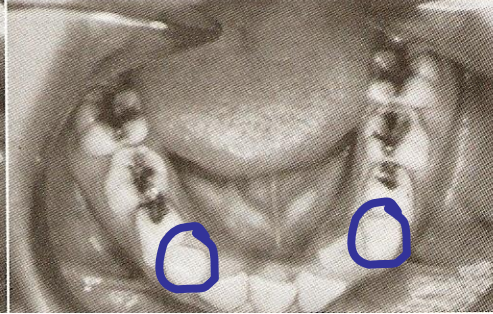
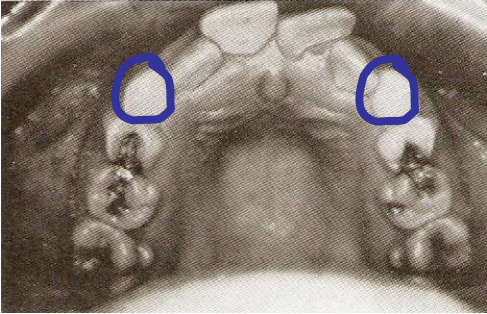
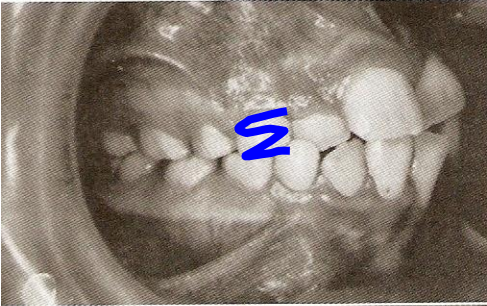
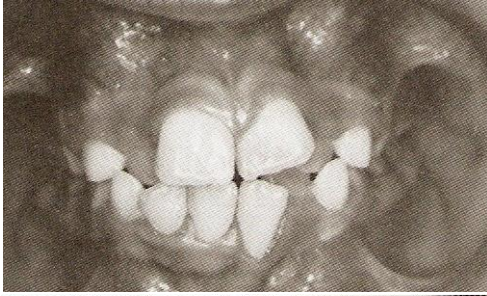
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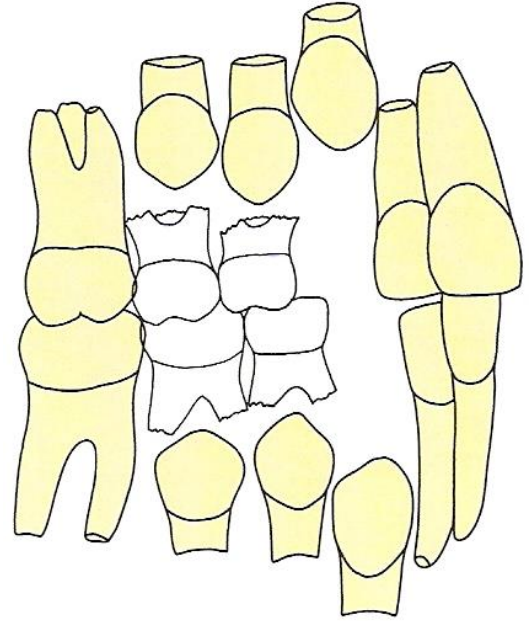
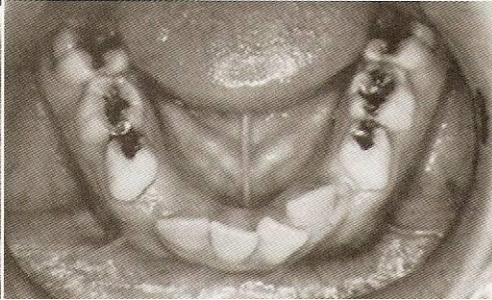
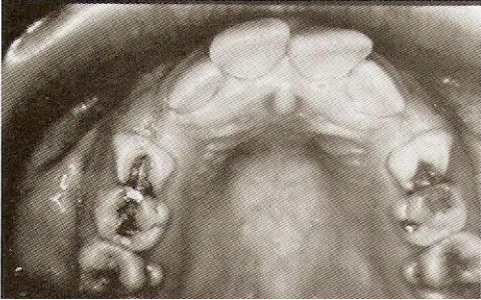
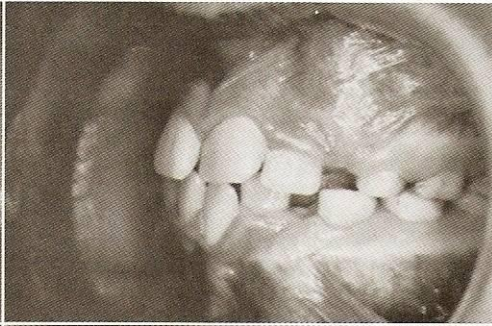
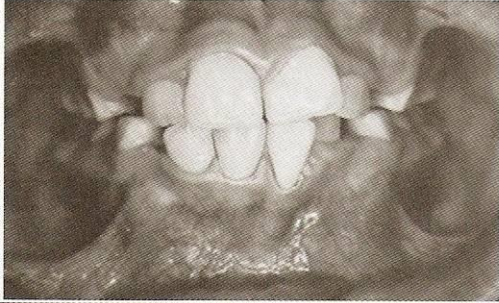
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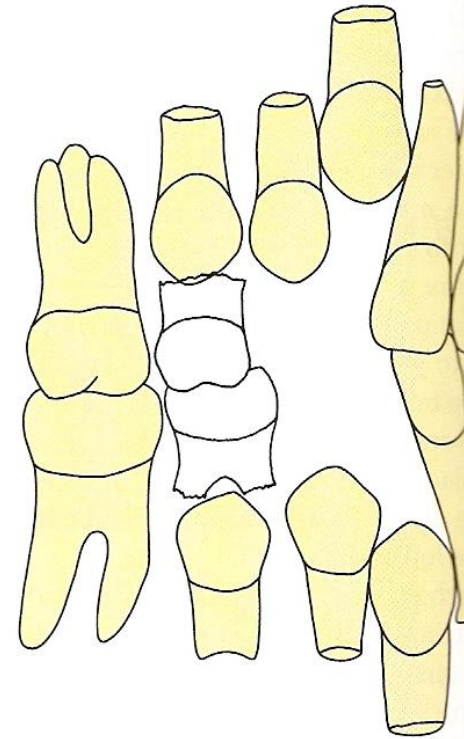
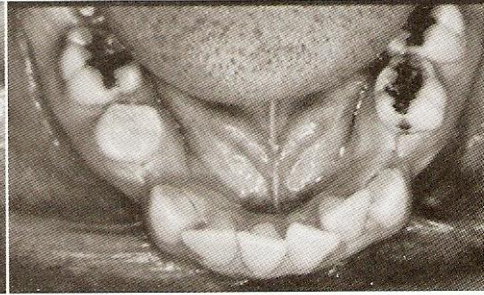
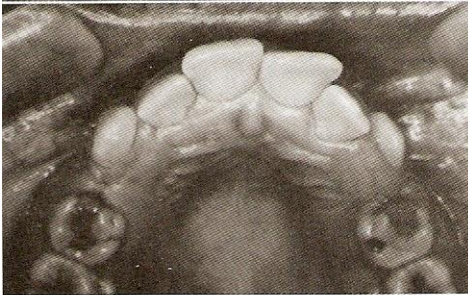
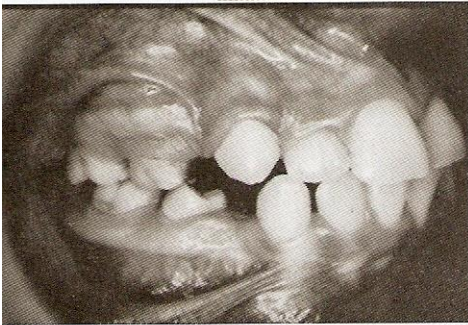
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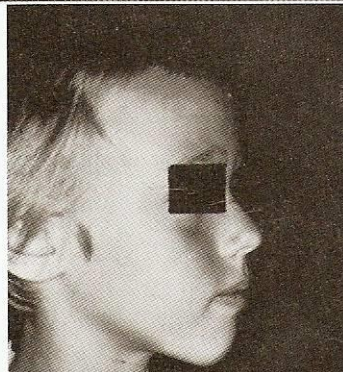
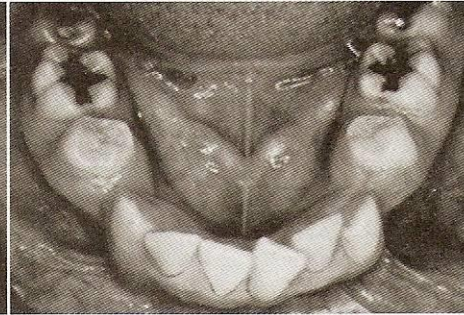
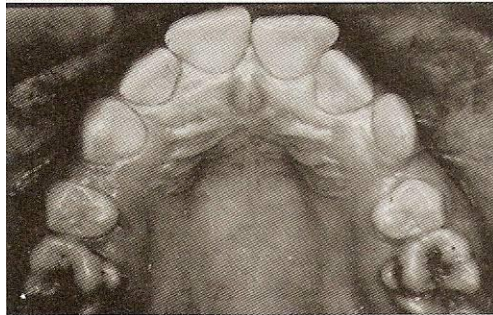
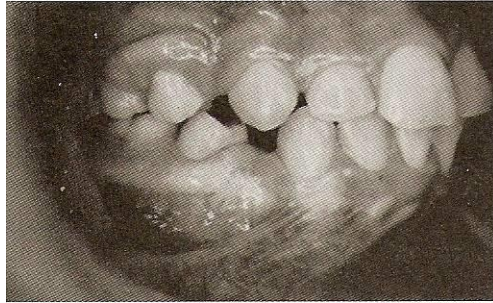
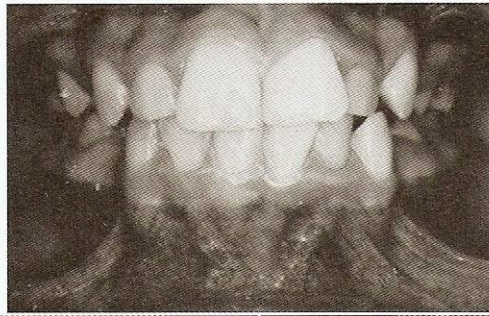


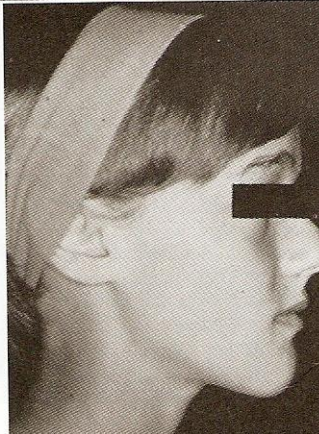
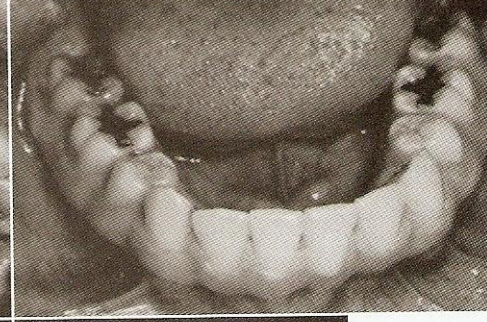
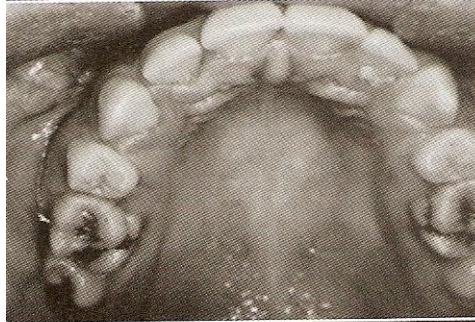
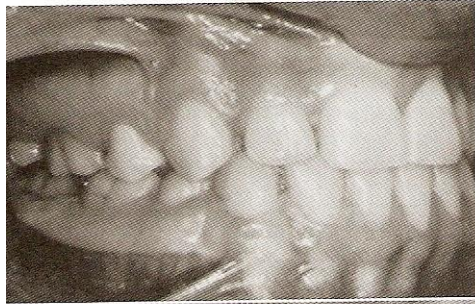
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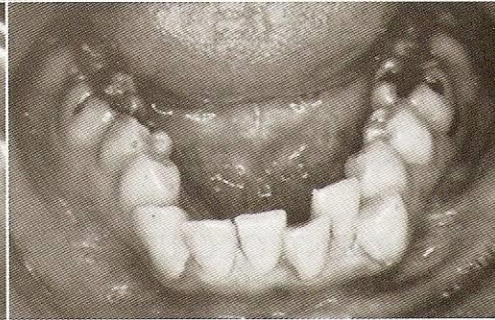
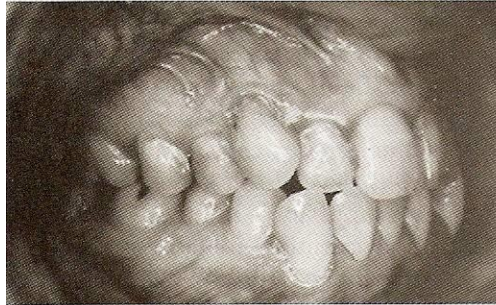
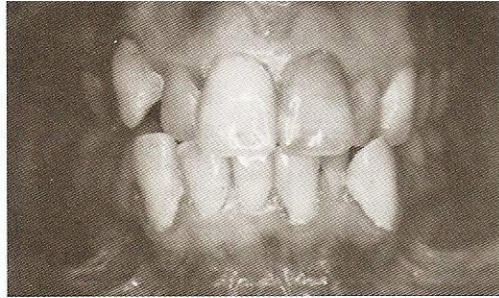


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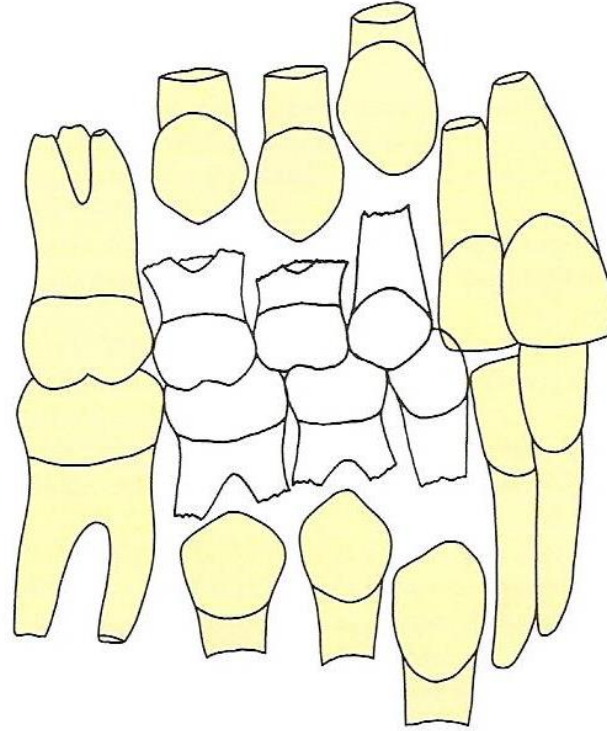




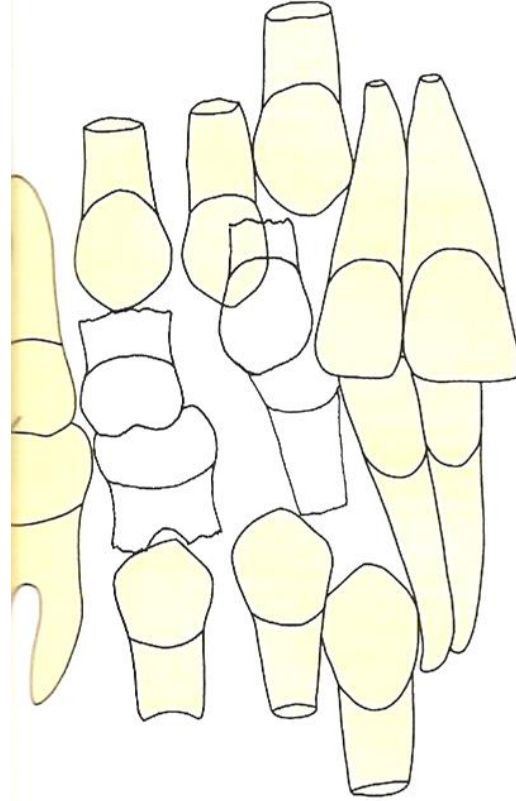
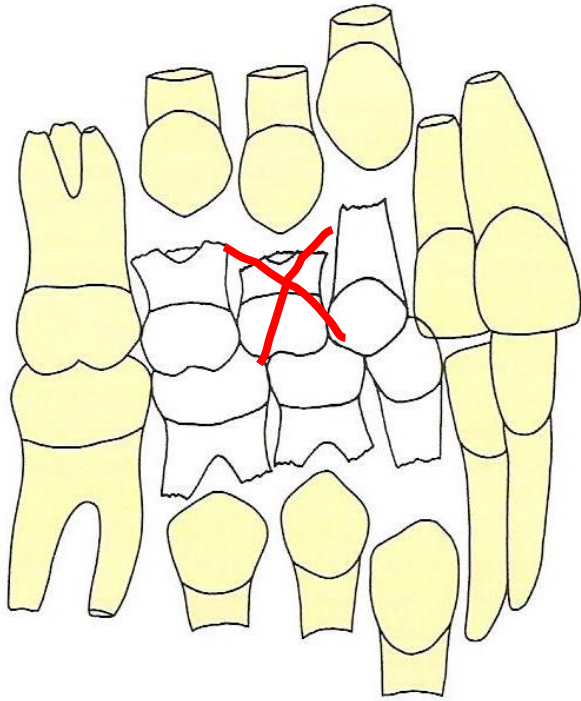




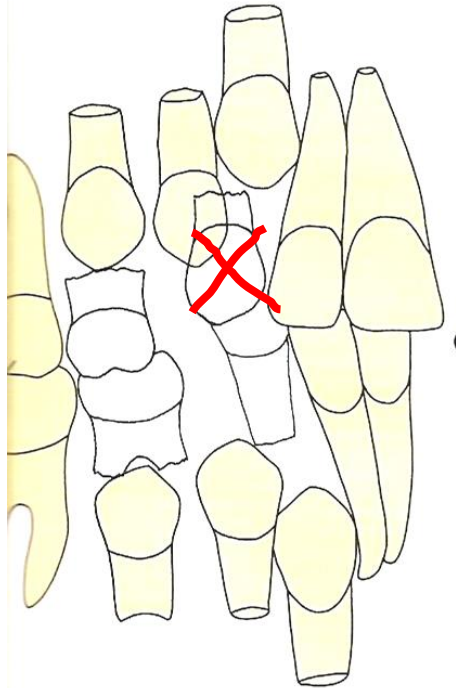
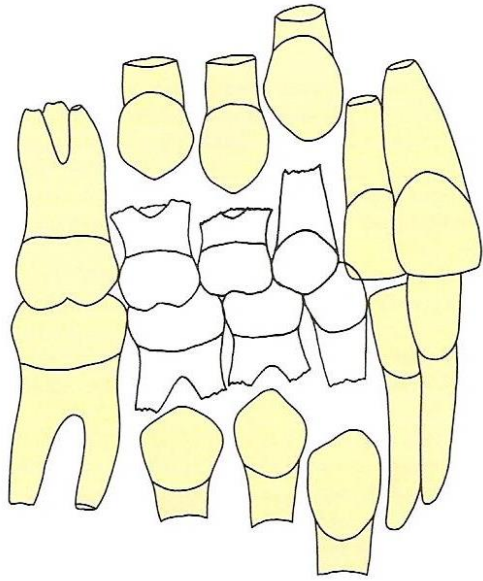
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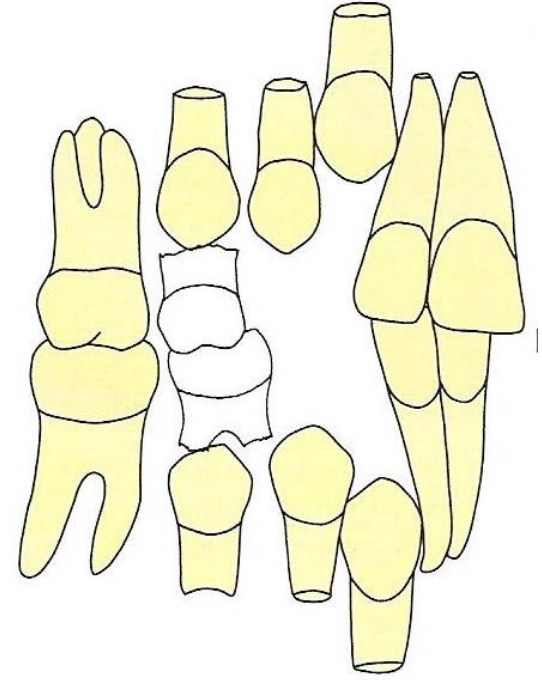
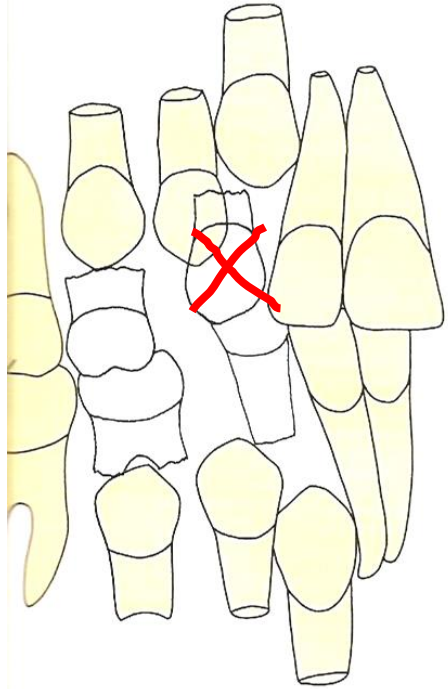
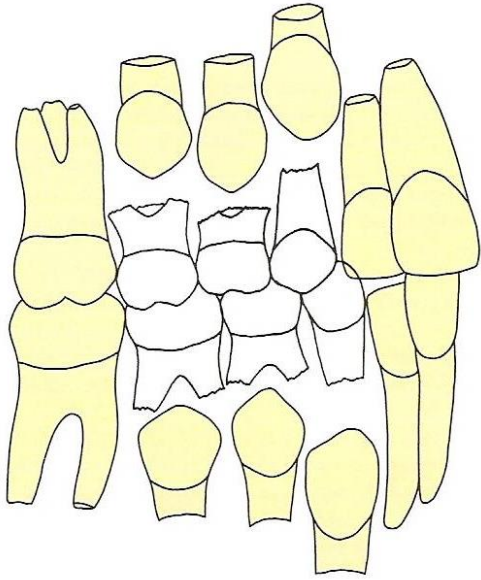
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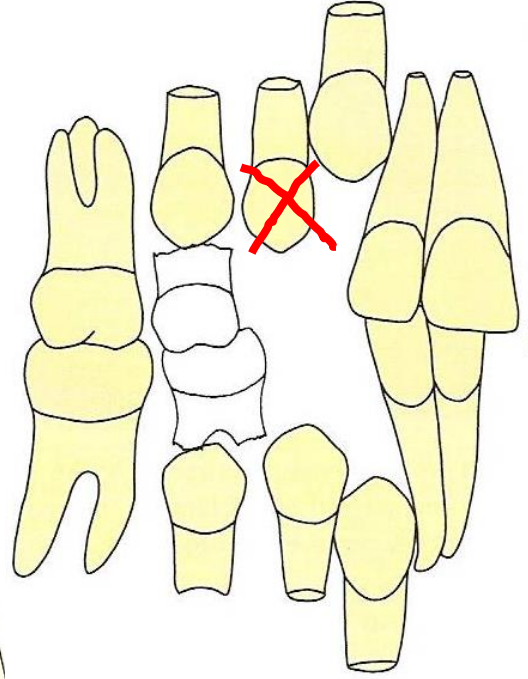
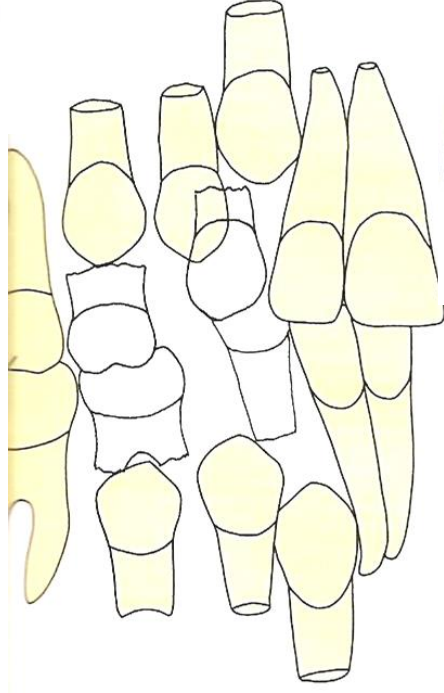
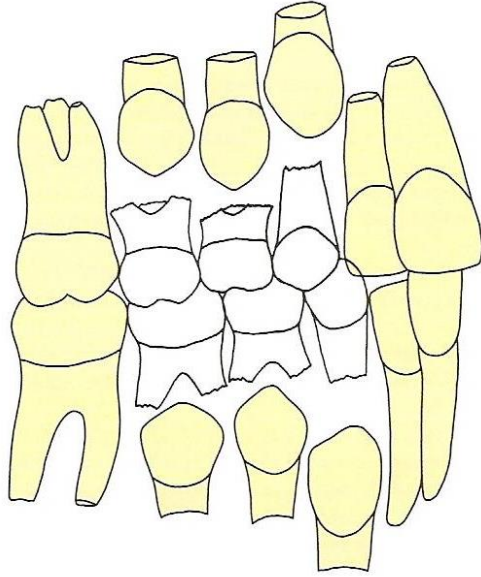
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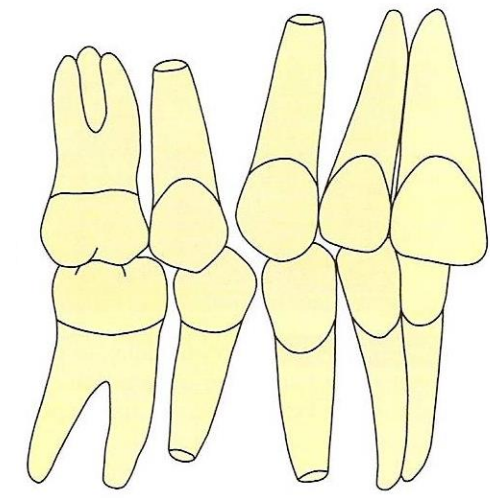
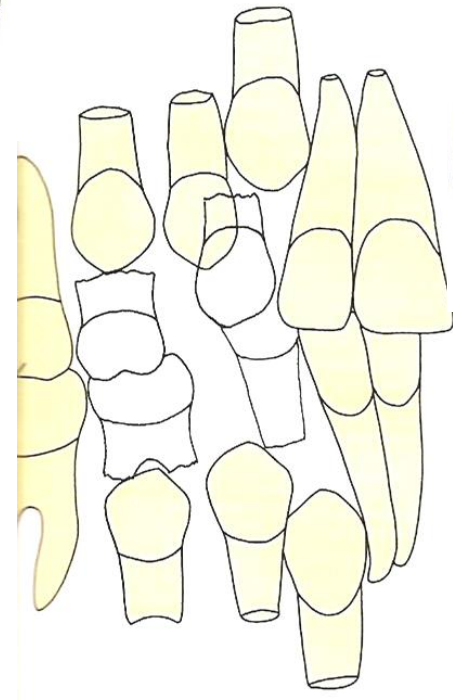
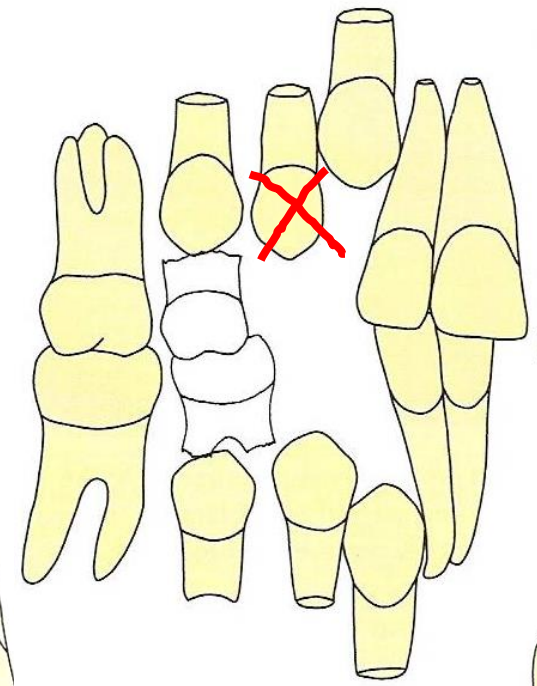
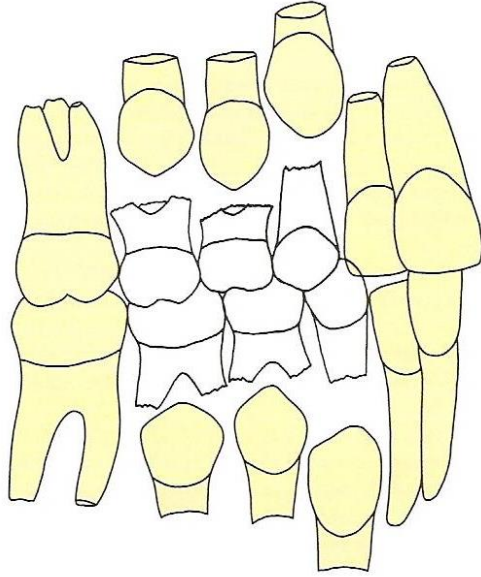
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Mustafa
Kemal
Atatürk

