# Braces at age 7 or 75

GUIDELINES OF THE AMERICAN ASSOCIATION OF ORTHODONTICS FOR EARLY ORTHODONTIC TREATMENT

### TOO EARLY FOR ORTHODONTIC

Orthodontists often hear the same question; "Is my child too young for orthodontics?" Most children are seeing their general dentists around age 3. Though an orthodontist can enhance a smile at any age, there is an optimal time to begin treatment. The American Association of Orthodontists recommends that the initial orthodontic evaluation should occur at age 7. In majority of the cases, orthodontic treatment is usually not necessary at this young age, early evaluation provides both timely detection of problems and greater opportunity effective for a more treatment.

The American Association orthodontics have published guidelines for reasons of early orthodontic treatment. When orthodontic intervention is not yet necessary, Dr. Masri will carefully monitor growth and development of your child and begin treatment only when it is ideal. There is, of limit course, no age orthodontic treatment. Both children and adults benefit from treatment. Orthodontic treatment not only improves the health of your teeth and gums but can dramatically improve personal appearance and self-esteem in all ages.

#### Problems to Watch for in Seven Year Olds







POSTERIOR CROSSBITE







As open how it sound when it we send habit

PROTRUSION





COMPLETE CLASS III

Malocclusions, like those illustrated above, may benefit from early diagnosis and referral to an orthodontic specialist for a full evaluation.

#### 1. Cross bite

A crossbite is when the upper teeth are inside the lower teeth. Long term effect of a crossbite could result in abnormal or increase wear of teeth, abnormal growth of the jaw which might lead to the need for jaw surgery to correct it. Even though a crossbite can be corrected successfully in teenage years or in adulthood, early correction can insure a much easier treatment and more stable and lasting results.



### 2. Openbite

An openbite is defined when upper teeth and lower teeth don't meet. This could happen in the front teeth and in a rare occasion, in the back teeth. One of the main reasons for developing an open bite is a finger/digit habit, tongue thrusting and/or mouth breathing. An Openbite is corrected very easily and efficiently at an early age. Delaying treatment could result in the need for removing permanent teeth or surgical jaw correction. Early correction is proved to be effective, efficient and stable.



#### 3. Reversed Bite

A Reversed bite is when the lower front teeth bite in front of the upper front teeth. One of the main contributing factors for developing such a bite is a genetic component of a stronger lower jaw or weaker upper jaw; or a combination of both. Delayed loss of primary teeth can force the new teeth to erupt in a reversed position which might lock the child into an unfavorable bite. Clinical research shows early correction of underbite/class 3 can be very effective and stable if performed at an earlier age (Age 7-8).



### 4. Protruding teeth/overbite

An Overbite or Teeth that "Stick out or Buck teeth" can come from genetic component of a shorter lower jaw or as a result of a digit or thumb habit. Even though research has shown that it is more efficient to address the overbite during the optimum growth spurt time (age 11), but localized protruding upper teeth can be at a risk of getting knocked out or damaged. If above concern is present or if severe overbite is causing social distress to the child, then early treatment is indicated.



## 5. Digit/Tongue habit

A Digit habit can be a natural desire for a newborn and/or younger children. Pediatric dentists and orthodontists encourage parents to work on their children's habits as early as age 4. Clinical studies show that all negative effects of a digit habit can be reversed as long as the child stops before the permanent front teeth erupt (age 6). A Digit habit can have a negative impact on the developing dentition if continues beyond the age of permanent teeth eruption. One of the goals for early orthodontic treatment is to help children cease this habit early through behavioral modification or placing special inhibiting devices.



#### 6. Crowded teeth

Crowded, erupting permanent teeth or early loss of primary teeth can be a sign of severe crowding or an indication for early intervention. Early orthodontic treatment can modify growth of the jaw and modify space available for permanent teeth by early expansion and preserving space of the future teeth. Early orthodontic treatment can enhance the chance of achieving full smiles and avoiding teeth removal.



### 7. Social concern/self esteem

Crooked teeth, spaces or bucked teeth can be reason for social distress and affect self esteem for growing children. Even though straight teeth can be achieved at any stage in life, it seems to be more popular after all permanent teeth erupt (age 11-13). Social research has indicated that poor smiles could be a major factor for kids being bullied at school. Early intervention to enhance a kids smile can help to avoid child years of teasing which might have a serious impact on his/her developing personality and behavior. Early orthodontic treatment is a rewarding service and well worth it for the growing child.





WHEN EXCELLENCE IS AVAILABLE, GOOD IS NOT ENOUGH