

CASE REPORT

A unique malocclusion

Abstract: A case report of an adult with a traumatic malocclusion has been presented. Orthodontics has much to offer these patients.

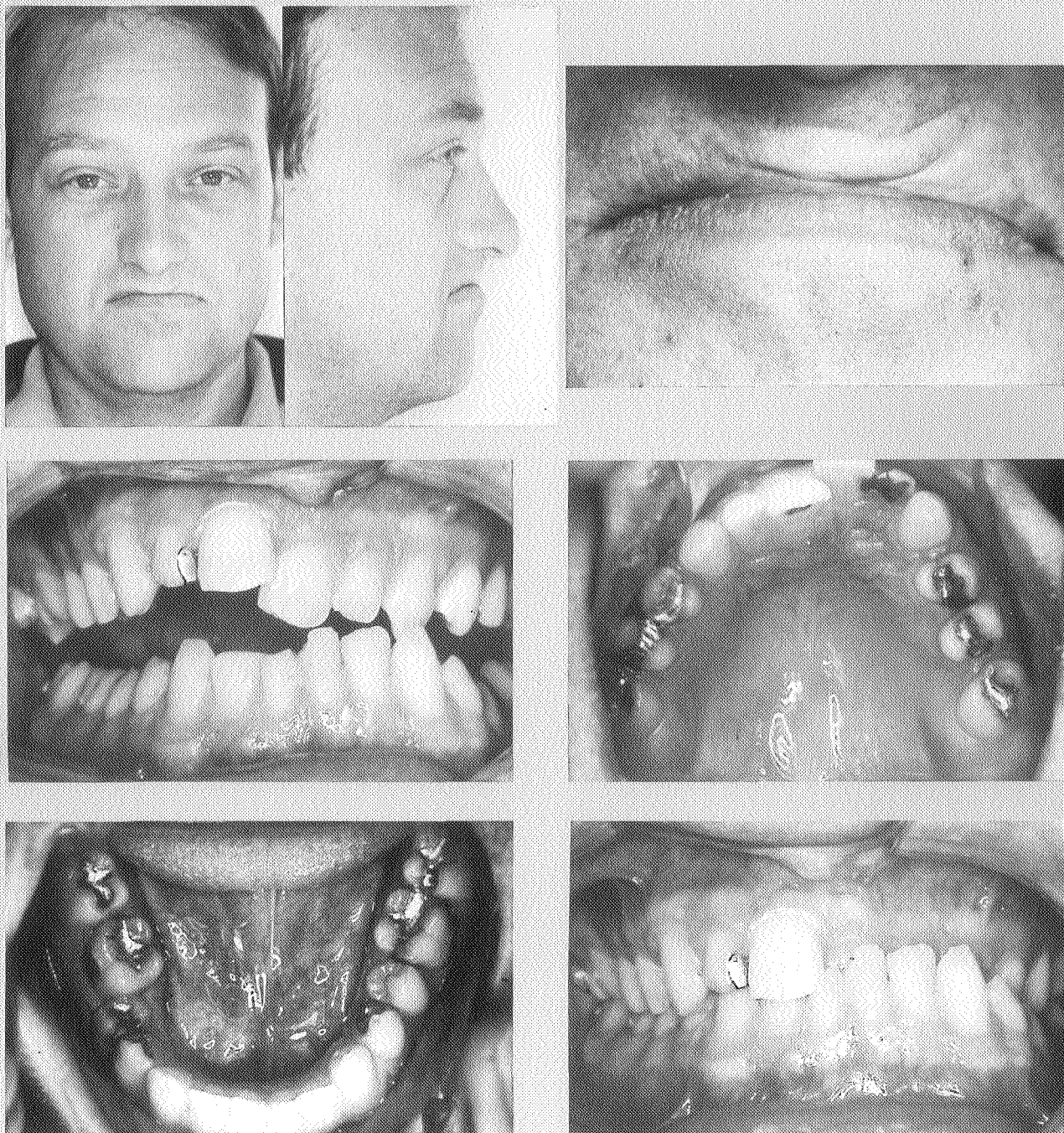


Figure 1. Pre-treatment intra-oral views showing the anterior crossbite after initial contact on the upper left canine and front and profile view of the upper lip

A male patient aged 34 years was first examined in May 1982. Intra-oral photographs (*Figure 1*) show that 21, 22, 23, are in an extremely severe lingual crossbite and marked over-eruption of 31, 32, 33. There was scarring of the upper lip and it exhibited great tenseness as well as reduced labial sulcus depth on the left hand side.

The patient could remember being told that he

was in hospital for some time as a baby. After much searching, the photographs in *Figure 2* were found showing a lymphangioma of the upper lip. Operations were performed in November 1949 at age 19 months, December 1950 at age 2 years and 8 months and again in March 1952 at 3 years and 11 months. The OPG x-ray (*Figure 3*) shows missing upper first molars.

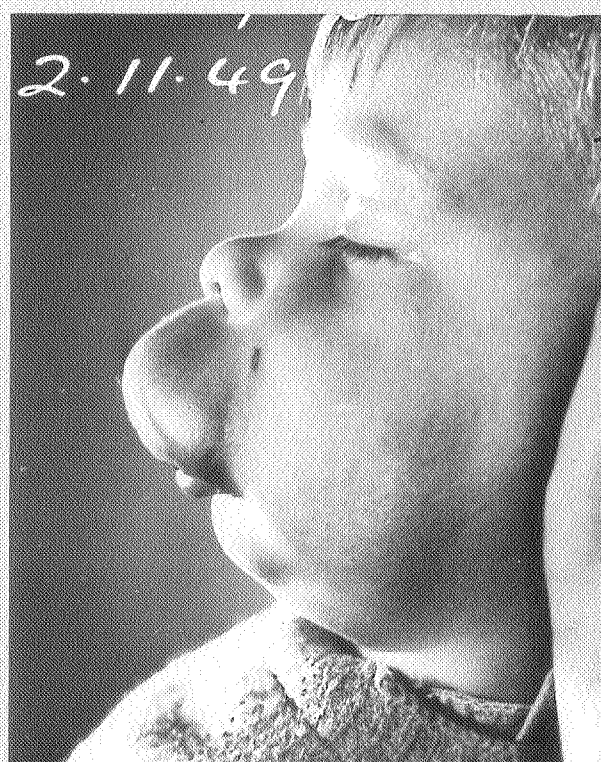


Figure 2. Front and profile views taken at age 19 months

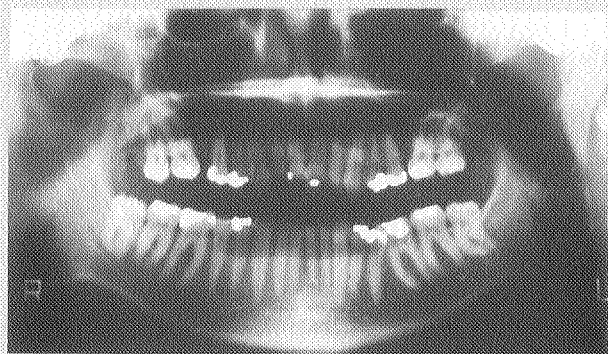


Figure 3. Pre-treatment panoramic x-ray showing missing upper first molar

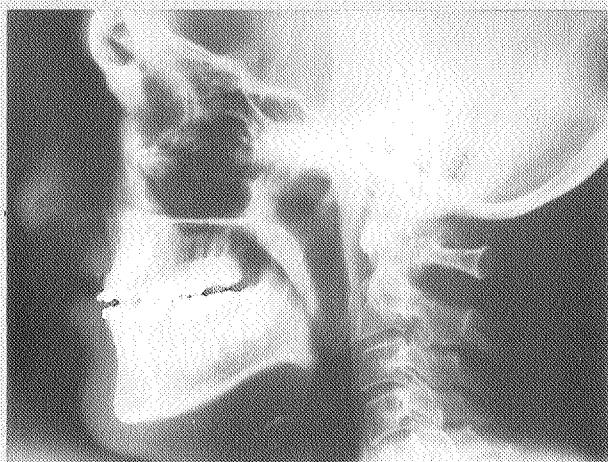


Figure 4. Progress lateral head radiograph - October 1984

Orthodontic treatment was commenced in June 1982. Because of the severity of the problem an upper removable appliance was used for approximately 5 months in order to unlock the occlusion and assess the response of 21,22,23 to labial tooth movement.

A fully fixed appliance was fitted in January 1983. Correction of the anterior crossbite was extremely difficult and the Lateral Head radiograph (*Figure 4*) taken in October 1984 confirmed that an extraction in the lower left quadrant would allow the lower labial segment to be moved lingually and allow the establishment of a normal incisal relationship.

Bands were removed in June 1985 and a positioner was inserted to help settle the occlusion. Photographs of the completed dentition are shown in *Figure 5*.

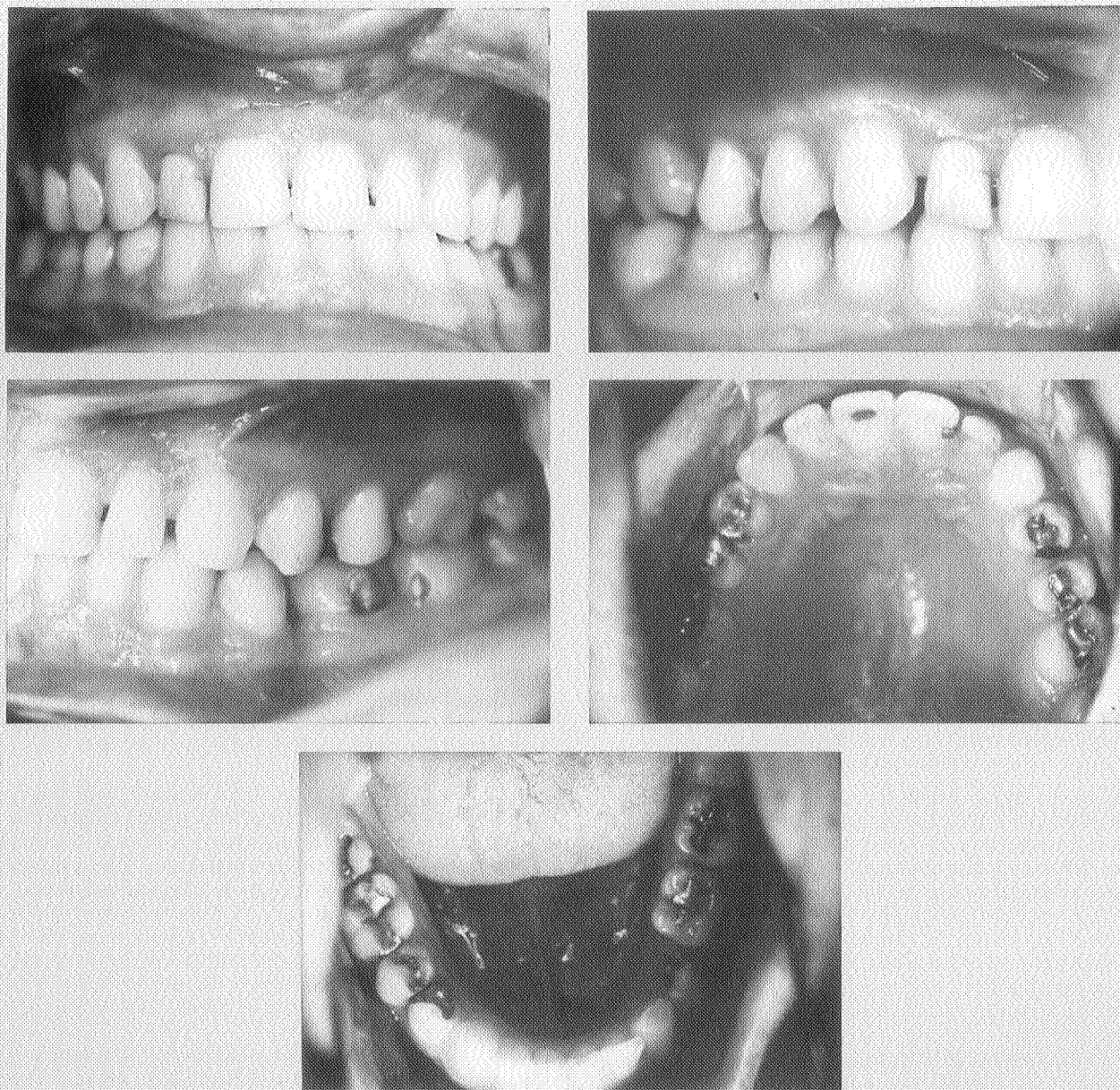


Figure 5. Intra-oral views obtained 3 months after disbanding

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