

The Orthodontic Conundrum

An informed consumer – and parent – Kerry Dunphy weighs up the debate around orthodontic treatment options for your child

It goes without saying that we want the best for our children, and will give them every opportunity possible for them to succeed and excel in life. As the mum of three boys, aged between eight and 12, one of the things I am bestowing on my children is the life-long gift of straight teeth, courtesy of orthodontic treatment. It is a gift my parents kindly gave me, and even after 30 years, I am still grateful for their foresight.

My choice of how to proceed with my oldest should have been easy, given my management role at Lumino The Dentists, but even I was confused. In our group, we have specialist orthodontists, general dentists who exclusively practise orthodontics, another handful who offer 'invisible braces', and an emerging group of dentists who are learning about new orthodontic systems that claim to straighten teeth quickly.

I now feel I can speak to the confusion that many parents feel about the conflicting advice they have been given. I'd like to address some common misconceptions about orthodontics:

Myth #1: It's best to start your child on orthodontics by the age of nine.

There seems to be a growing trend of nine and 10-year-olds starting orthodontic treatment, usually with a 'plate' or retainer. This trend is probably exacerbated by a combination of overzealous but well-meaning parents, and some orthodontic practices encouraging parents to start treatment early. "In most cases, you're better off waiting until all the permanent teeth have come in first before treatment is started," says one of our specialist orthodontists. "Our position is to get them checked by the age of nine or 10 if you have concerns, but 90 per cent of these children do not need treatment to start until they are approximately 12".

Myth #2: Using a lower plate will help lengthen your child's lower jaw.

Many years of study have shown that either the treatment leads to no increase in lower jaw length, or results in such a small increase that it's not significant and does not change the extent of treatment still needed later.

Myth #3: Removal of permanent teeth as part of orthodontic treatment should be avoided at all cost.

Our natural instinct as parents is to want to save every precious tooth in our children's mouths. Until recently, I believed that any orthodontic clinician worth his salt would tout their 'no extraction' policy as a badge of honour. How wrong I was. Having recently spent time learning more about this issue, I now feel in certain cases that it is irresponsible *not* to remove teeth, if non-extraction would lead to protrusive teeth (ones sticking out in front of the supporting bone). Long-term, this

can lead to loss of gum, and even bone. Tooth removal is only recommended in around 20 per cent of the cases our Auckland specialists treat. If it is recommended, they will clearly explain why this is the optimal long term outcome for your child.

Myth Number #4: Most general dentists today can offer your child orthodontic treatment.

This is a tricky topic, so I will tread carefully. It is within the scope of a general dentist to carry out orthodontics. Many general dentists have been offering orthodontics for many

years, and practise almost exclusively in this field with great success, whilst other dentists dabble in orthodontics and may have a small number of orthodontic cases that they are treating at any given time. I recommend that you make a fully informed decision about the clinician who will be treating your child. Ask questions about the number of cases they have treated, and what additional recognised qualifications they have. It's also reasonable to ask them to show the treatment results of patients with similar problems to your child's.

Myth #5: It is less expensive to get orthodontic treatment from a dentist than an orthodontist.

We regularly mystery shop our competitors to assess their level

of service, including pricing. From our experience, there is minimal price difference between the providers, regardless of whether they are a general dentist or a specialist orthodontic practice.

Myth #6: There are new faster, cheaper, orthodontic systems now available that may be a good option for your child.

There is a very high demand for these new products by consumers – after all, who wouldn't want their teeth straightened at half the cost and time? Under no circumstances would Lumino recommend these be used to treat anyone under 18. Even for adults, it must be considered with extreme caution. Lumino is now considering its position on these systems, due to the risks associated with them, such as the high level of relapse once the treatment is complete. This causes us great concern, as we want our patients to remain happy with their treatment long term.

Kerry Dunphy is Marketing Manager of Lumino The Dentists, with 93 dental and orthodontic practices across New Zealand.

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