



 *IQRA NATIONAL UNIVERSITY*

 *DEPARTMENT OF ALLIED HEALTH SCIENCE*

*SUBMITTED BY ; MUHAMMAD Usama*

*ID; 13622*

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*SUBMITTED TO; Mam,Salma Ishaq*

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***Q,1; Describe the procedure for mandibular and maxilla uses of acrylic in activator?***

***Ans;***

***Definition Of Activator;***

* The activator is a loose fitting appliance which correct retrognathic mandible. The appliance opens the bite, and the mandible is advanced for class II correction.

***Procedure For Mandibular And Maxilla Uses Of Acrylic In Activator;***

* Activator appliance initially started out as one block of acrylic which fit in both maxillary and mandibular arch. The lower arch would see the horseshoe shaped lingual plate acrylic extending from distal of the last erupted molar. In the upper arch, initially the anterior poryion is coverd from canine to canine, but that bwas later modified, as seen with appliances such as bionator.
* Appliance which placed its emphasis on the tongue function.

***Wire;***

* The wire components of activator included a labial bow which was usually placed 1mm away from the front incisors and extended from canine to canine. The bow would be 0.9-0.8mm thick. Additional wire elements were later added to stablize the appliance. The construction bite of activator can consist of two types; Horizontal (H) Activator and vertical (V) Activator.

***Q.2; Illustrate the management of anterior cross bite?***

***Ans;***

 ***Management of Anterior Cross bite;***

* The period of mixed denttion offers the greatest opportunity for occlusal guidance and interception of malocclusion.
* If delayed to a later stages of maturity, treatment may become more complicated.
1. Skeletal;

Choice of treatment depends upon the cause;

Skeletal: Can be controlled during growth by growth modification appliances, such as: protraction facemasks.

Protection facemasks therapy has been advocated in the treatment of class III patients with maxillary deficiency.

If skeletal factors were not managed during the growth period, an orthognathic surgery will need to be the alternative treatment modality.

1. Dental and Functional;

Dental And Habitual Acts;

Bonded resin- composite slopes

Removable acrylic appliances with posterior bite opening platforms and anterior finger springs for labial tipping of maxillary teeth.

Tongue Blade/depressor; The tongue blade can also be an effective method of treatment during the early phase of eruption; however, it requires total cooperation from the patient, which in most cases is difficult to obtain.

Lower acrylic inclined – bite – plane is another effective treatment method; however, it requires a laboratory phase, which increases the price of treatment, and the cement used with this type of appliance may cause gingivitis.

Conventional orthodontics

Screw appliances

Removal of occlusal disrepancies

Extraction of supernumerary teeth.

***Q3; Summarize the division 1 and division 2 of the class II malocclusion ?***

***Ans;***

***Division 1 and Division 2 Class malocclusion;***

***Class II Malocclusion;***

* The mesiobuccal cusp of the lower first permanent molar occludes distal to the class I position.

***Class II Malocclusion Devision I;***

* Condition when class II molar relationship is present with proclined upper central incisors.
* There is an increase in overjet.

***Class II Malocclusion Devision II;***

* Condition when class II molar relationship is present with retroclined upper central incisors, upper lateral incisors may be proclined or normally inclined.
* Overjet is usually minimal or may be increased.

***Q.4; Demonstrate the recent trend modification of oral screening?***

***Ans;***

***Definition Of Oral Screen;***

* ORAL SCREEN Oral screenis a mayofunctional appliance introduced by Newell in 1912. It is a thin sheet of acrylic base material which is fit into the buccal or labial vestibule of the mouth which acts as a screenbetween the teeth & the surrounding musculature. It is also known as vestibular screen.

 ***Modification Of Oral Screening***;

* The oral screening can be fabricated by a metal ring projecting between the upper and the lower lip. this ring can be use to carry out various muscles exercises.
* In patient who has tongue thrust habit an additional screen is placed to the lingual aspect of teeth.
* In case of mouth breather the vestibular screen should be fabricated with a number of hole that are gradually closed in a phased manner.

***Q.5; What is finger spring? Why Z spring is called double cantilever spring?***

Ans;

 ***Finger Spring;***

* Palatal finger springs are often used in removable orthodontic appliances to tip teeth in a mesiodistal direction. The purpose of this report is to establish the magnitude of forces for finger springs made from different types of wires (i.e. those from different manufacturers and of different diameters and lengths

 ***Why Z spring is called double cantilever spring;***

* Z spring The 'z' spring is also called double cantilever spring .
* It is made up of 0.5mm wire .
* The spring consist of two coil of very small internal diameter .
* It should be placed perpendicular to palatal surface of tooth.

