HappySmile

GABINET STOMATOLOGII I MEDYCYNY ESTETYCZNEJ

RECOMMENDATIONS FOR ORTHODONTIC PATIENTS

Recommendations for orthodontic patients (fixed braces)

Hygiene recommendations

After getting fixed braces, pay special attention to oral hygiene! ORP (oscillating-rotating-pulsating) or manual toothbrush with V-shaped bristles, e.g., GUM Ortho, or with a notch, e.g., Curaprox Ultra Soft CS5460 Ortho
Fluoride toothpaste at least twice a day, e.g., GUM Ortho
Rinse once a day – e.g., Listerine Clean&Fresh or Eludril Ortho
For cleaning interdental spaces – dental floss, e.g., Oral-B SuperFloss, interdental brushes, e.g., Curaprox Prime Start
Additionally, a single-tuft toothbrush, e.g., Curaprox CS 1006, and an irrigator
Poor oral hygiene can lead to tooth decay, gingivitis, and enamel demineralization around the braces, visible as white, chalky spots that will remain after braces are removed!

Dietary Restrictions

Do not eat: chewing gum, sticky candies, caramels, honey, toast, raw carrots, hard apples, nuts, sunflower seeds, and other hard foods.
You should also limit your intake of sweets and foods that promote tooth decay, such as carbonated drinks.

Emergency Conditions

If the oral mucosa is irritated by the components of your braces, use orthodontic wax and a soothing gel, such as Sachol (to make the wax last longer, soften it between your fingers and dry the braces, e.g., with a cotton pad).
If a component of your braces becomes detached or the archwire slips out, schedule an emergency appointment as soon as possible.

Check-ups

Regularly return for orthodontic check-ups!

Avoiding appointments prolongs treatment time and can cause uncontrolled tooth movement.
Follow-up appointments with standard fixed braces are every 4 weeks, and with self-ligating braces, every 7-8 weeks.
After braces are fitted and after activation appointments, teeth may be tender when eating and brushing. If the pain is bothersome, take painkillers such as paracetamol or ibuprofen. Cold foods and drinks also provide relief.

Active Treatment

Treatment time depends on many factors, including the severity of the defect, the patient's growth potential, age, and cooperation. The duration of active orthodontic treatment may be extended due to the individual varying susceptibility of the patient's tissues (bone and soft tissue) to the applied orthodontic forces. A significant extension of treatment time occurs in the event of a lack of patient cooperation, such as late appointments, bracket detachment, and other mechanical damage to the appliance. During orthodontic treatment, additional measures may be necessary:

Tooth stripping - reducing the cross-sectional dimensions of the teeth to within 0.5 mm per tooth using an abrasive strip, disc, or special drill

Intermaxillary elastics - elastic bands placed by the patient on the components of the appliance between the upper and lower jaw; they should be worn 24 hours a day and removed for eating

Extractions - the removal of one or more teeth to create adequate space for the remaining teeth

Temporary orthodontic mini-screws - inserted into the bone under local anesthesia

Retention

After the period of active treatment, a retention period (often lasting several years) is required.
After removing the appliance, the same period is maintained. During this visit, a fixed retainer is fitted, consisting of a metal wire bonded to the inside of the upper and lower teeth. An impression is also taken for the upper retainer splint – a transparent overlay that prevents recurrence of the defect.
The retainer splint should be worn 24 hours a day for the first 8 weeks after the braces are removed. After this time, it should be worn mainly at night.
Fixed retainers are covered by a 6-month warranty from the date of their installation.

Risk of Complications

As with any treatment, there is a risk of complications, such as root resorption, gum irritation, difficulty adjusting to the brace, and the possibility of recurrence of the defect. If you experience any problems, please contact your orthodontist immediately.