

**DEPARTMENT OF ORTHODONTICS AND DENTOFACIAL ORTHOPAEDICS**

**E-Teaching/Learning sessions for  
FINAL YEARS (27.04.2020 - 02.05.2020)**

**Clinical discussions**

<b>S.No</b>	<b>Date</b>	<b>Clinical discussion topic</b>	<b>Faculty</b>	<b>No of students participated</b>
1	27.04.2020	CASE DISCUSSION	Dr. Prema	19
2	28.04.2020	CASE DISCUSSION	Dr. Annamalai	15
3	29.04.2020	CASE DISCUSSION	Dr. Saravanakumar	11
4	30.04.2020	CASE DISCUSSION	Dr. Yamini	12
5	02.04.2020	CASE DISCUSSION	Dr. Sushmitha	15





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1	27.04.2020	CASE DISCUSSION	Dr. PREMA	19



27.04.2020






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Close




Participants (30)




Search




 Madhu Bala Sermarajan (me)  




 Maha srinithi Selvaraj (host)  




 Chandhni's iPhone  




 Dharunya  




 Meghana Jayadev  

 Munira Begam  

 Prema Anbarasu  

 Annamalai Orthodontist  

 Anurekha Azhaguvel  

 Ateeq Ahamed  

Close	Participants (30)	
a	Ateeq Ahamed	
	Balan Edward	
	Deepika R M	
GS	Gayathri S	
JG	Joanna gracy	
KR	Kadambari Ramaswamy	
KM	Kanchana Mala	
	Kavya Karunanidhi	
	Kishan Kumar	
KR	Kudiarasi Rajendran	
	Lakshika Sree	




























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Close		Participants (30)
LC	Lalitha Choudhary	  >
L	lavanya	  >
	Logesh Ram	  >
M	M.Lakshmipriya	  >
MJ	Meghana Jayadev	  >
NC	NIVASHINI C	  >
	Nivethitha Bhaskar	  >
S	Saravanan's iPhone	  >
S	SUSHMITHA	  >
	Vishnu Kumar	  >
YJ	Yamini Jeyaraj	  >

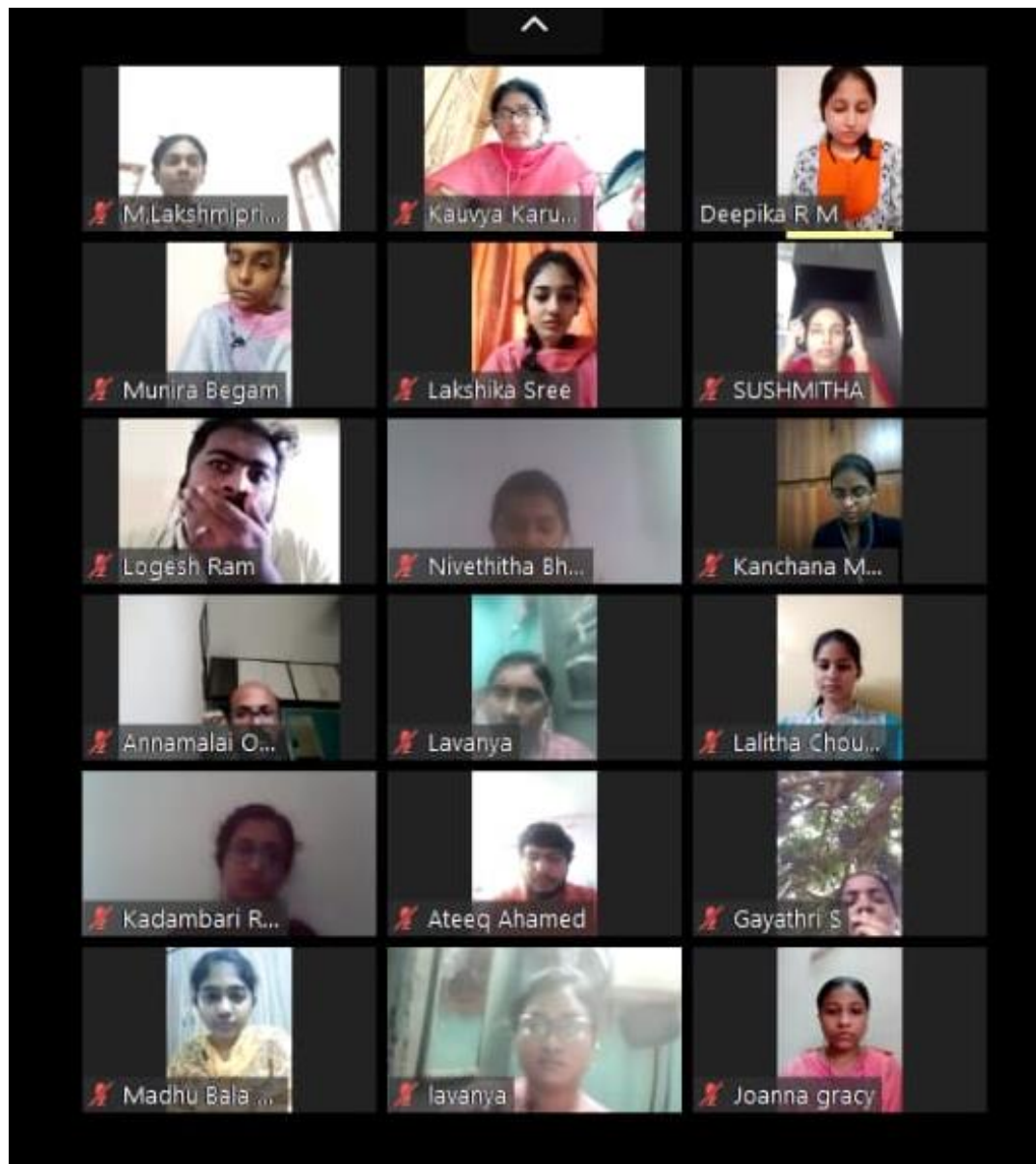


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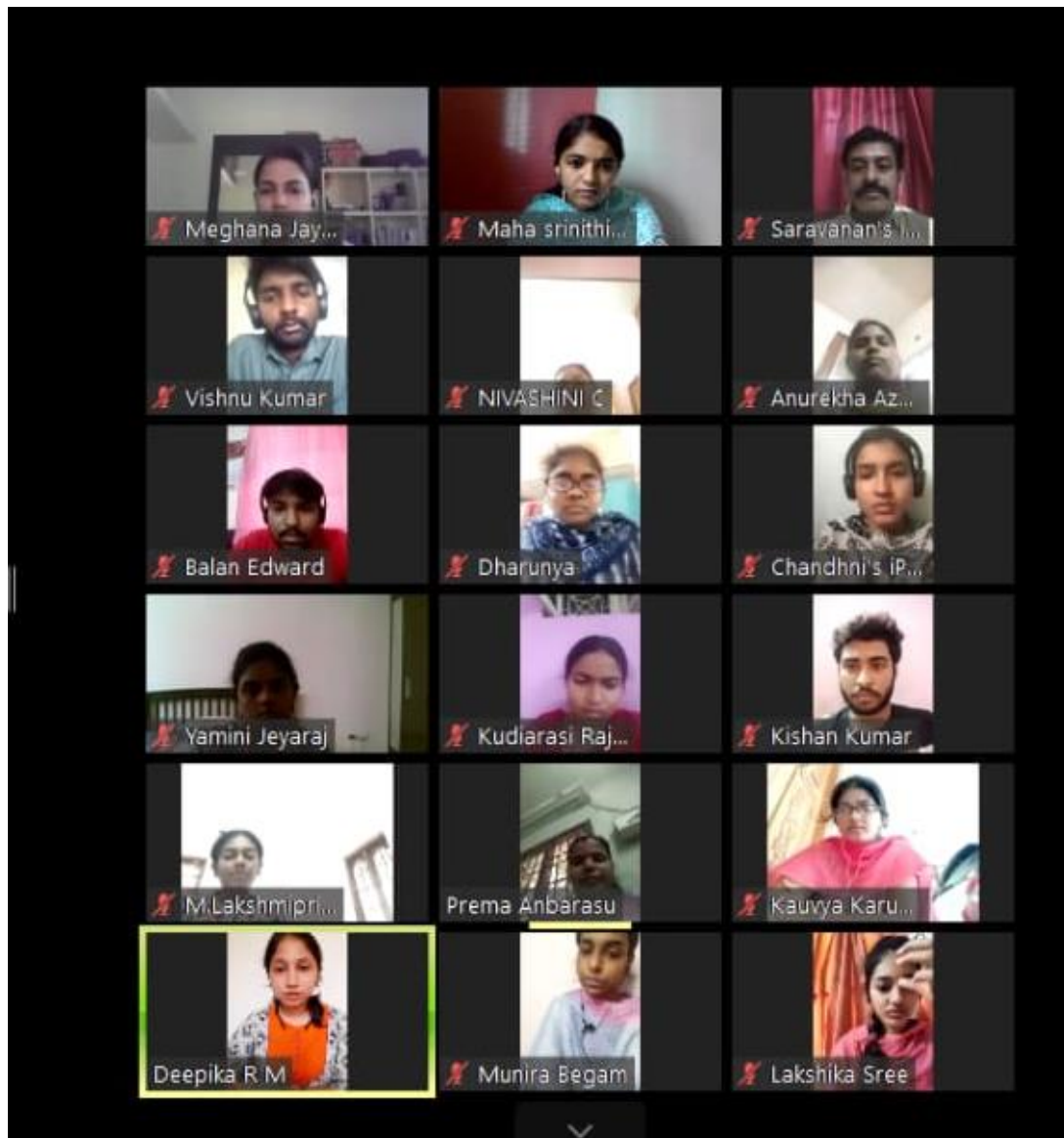


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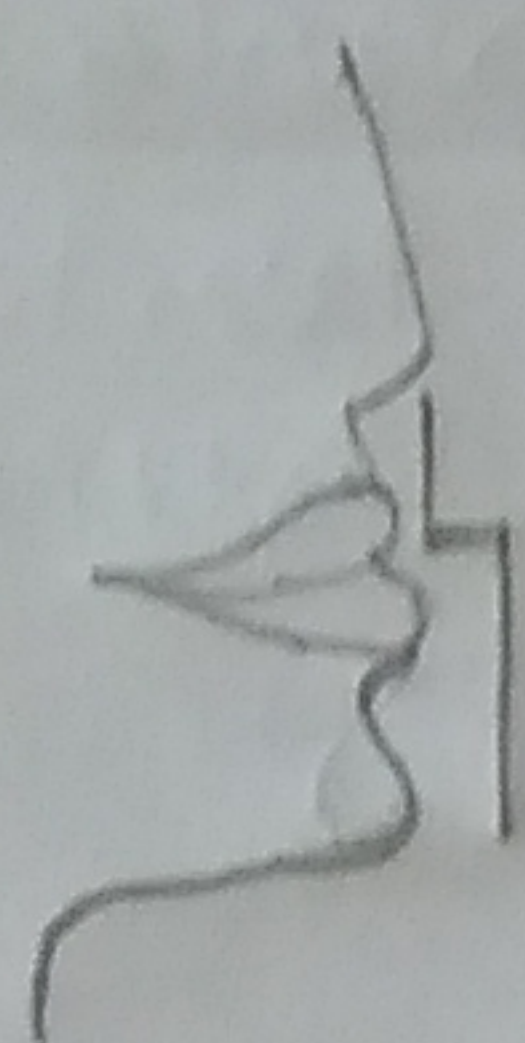


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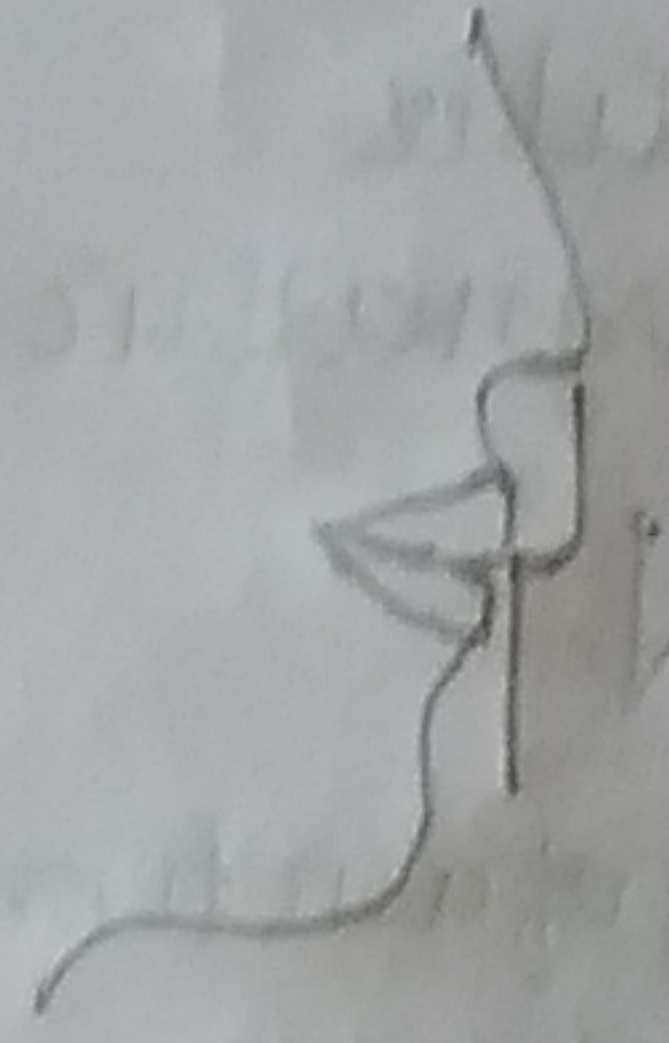
# Orthodontics Assignment

## 1. Lip step :-

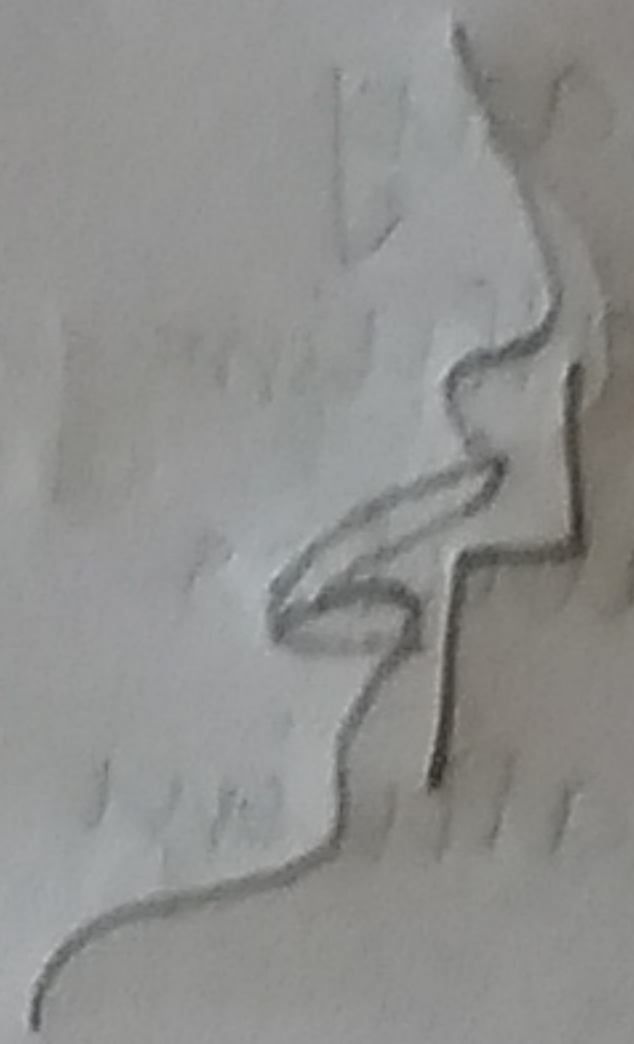
- Relationship of lower lip to upper lip
- Given by Koskhaus
- Positive lip step - Protrusion of lower lip in relation to upper lip
- Negative lip step - Protrusion of upper lip in relation to lower lip
- Normal - slightly negative



Positive lip step  
(Class III)



Slightly Negative lip step  
(Normal)



Marked negative lip step  
(Class II)

## Class III Malocclusion

### 1. Clinical features

1. Class III molar relationship

2. Incisors edge - edge relationship or anterior cross bite

3. Narrow & short - upper arch  
Broad - lower arch

↳ Posterior crossbite

4. Crowded upper teeth - as arch is narrow and short.  
Mandibular arch - spared.

5. Concave  
6. Vertical  
Anterior  
Pseudo class  
resulting  
Exhibit

skeletal

- Short
- Long
- Come

### Etiology

- Class
- str
- En
- Ho
- En

### Treatment

1. Face  
Pro

Indl



5. Concave profile due to prominent chin
6. Vertical growers - increased intermaxillary height  
anterior open bite
7. Pseudo class III - presence of occlusal prematurities  
resulting in forward positioning of mandible  
Exhibit forward path of closure.

#### Skeletal features

- Short / retrognathic maxilla
- Long / prognathic mandible
- Combination of above.

#### Etiology :

- Class III malocclusion - usually inherited
- strong genetic basis
- Environmental factors - postural habits, mouth breathing.
- Habitual forward positioning of mandible
- Enlarged adenoids.

#### Treatment

##### 1. Face mask

Protraction head gear → for anterior protractive force

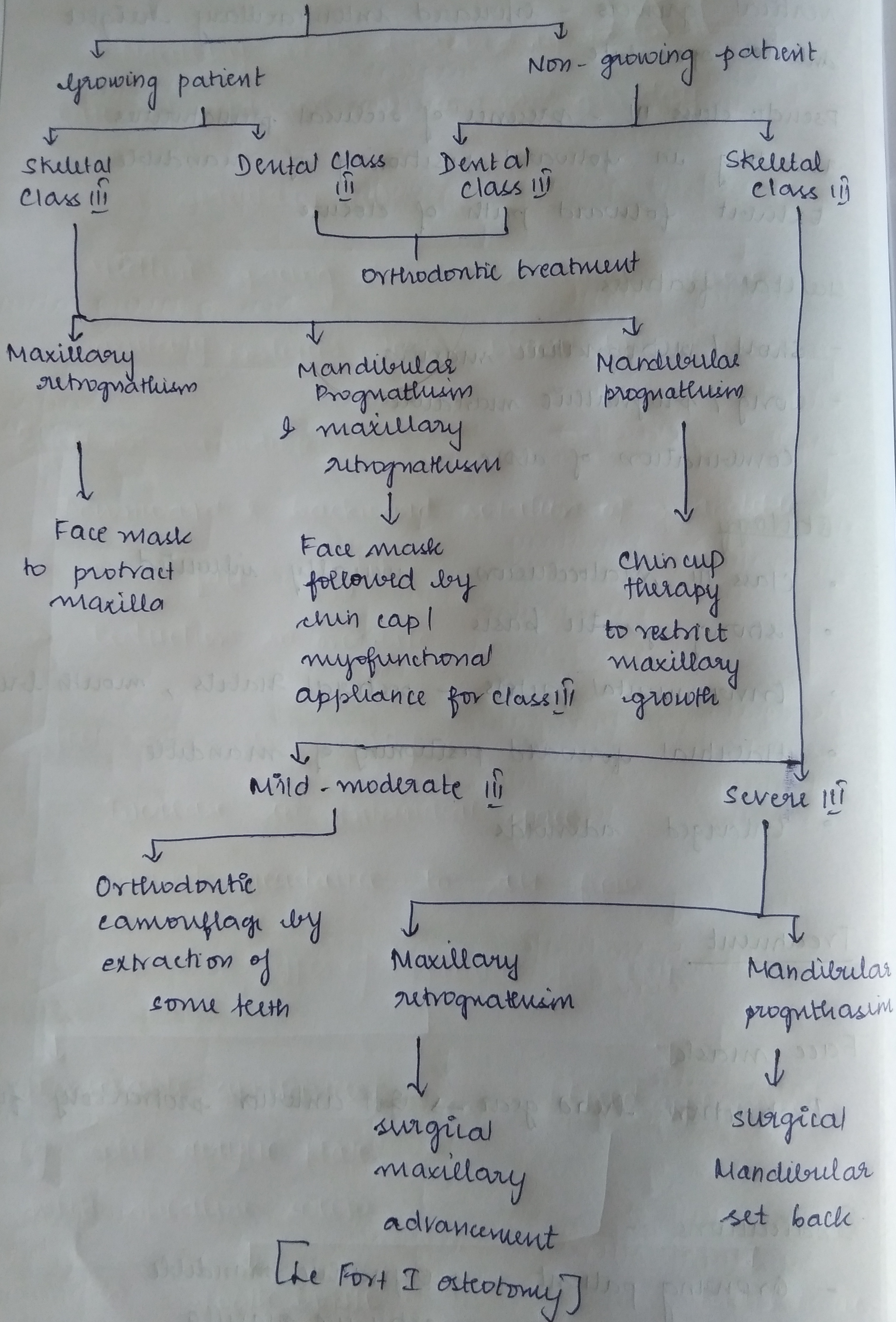
#### Indications :-

- Growing patient - prognathic mandible
- retrusive maxilla

For binding condyles neck - stimulate TMS  
adaptation to posterior displacement of chin.



# Class III





## 2) Rapid maxillary expansion

- Rapid palatal expansion or split palate
- separates mid-palatal suture and moves maxillary shelves away from each other
- Emerson C. Angell - Father of RME (1860)
- Walter Coffin (1877) - coffin spring
  - should be initiated prior to ossification of mid-palatal suture
- Transverse growth of mid palatal suture - upto 16 years for girls and upto 18 years for boys - (Melsen)

### Indications

#### Dental :

- Posterior cross bite
- Real maxillary deficiency - undersized/narrow maxilla
- Relative maxillary deficiency - normal maxilla but oversized mandible
- Cleft palate patients - collapsed maxillary arch
- along with reverse pull headgear (Face mask)

#### Medical :-

- Nasal stenosis
- Poor nasal airway
- septal deformities
- allergic rhinitis
- Deviated nasal septum

#### Effects of RME :-

- Maxillary skeletal effect
  - Maxillary posterior teeth - handles to apply transverse reciprocal forces - to open mid-palatal suture.



Amount of expansion achieved

Maxillary width increased up to 10 mm

Rate of expansion 0.2 - 0.5 mm per day

Effect on maxillary teeth

- Midline spacing between 2 central incisors
- Maxillary posterior teeth - buccal tipping & extrusion

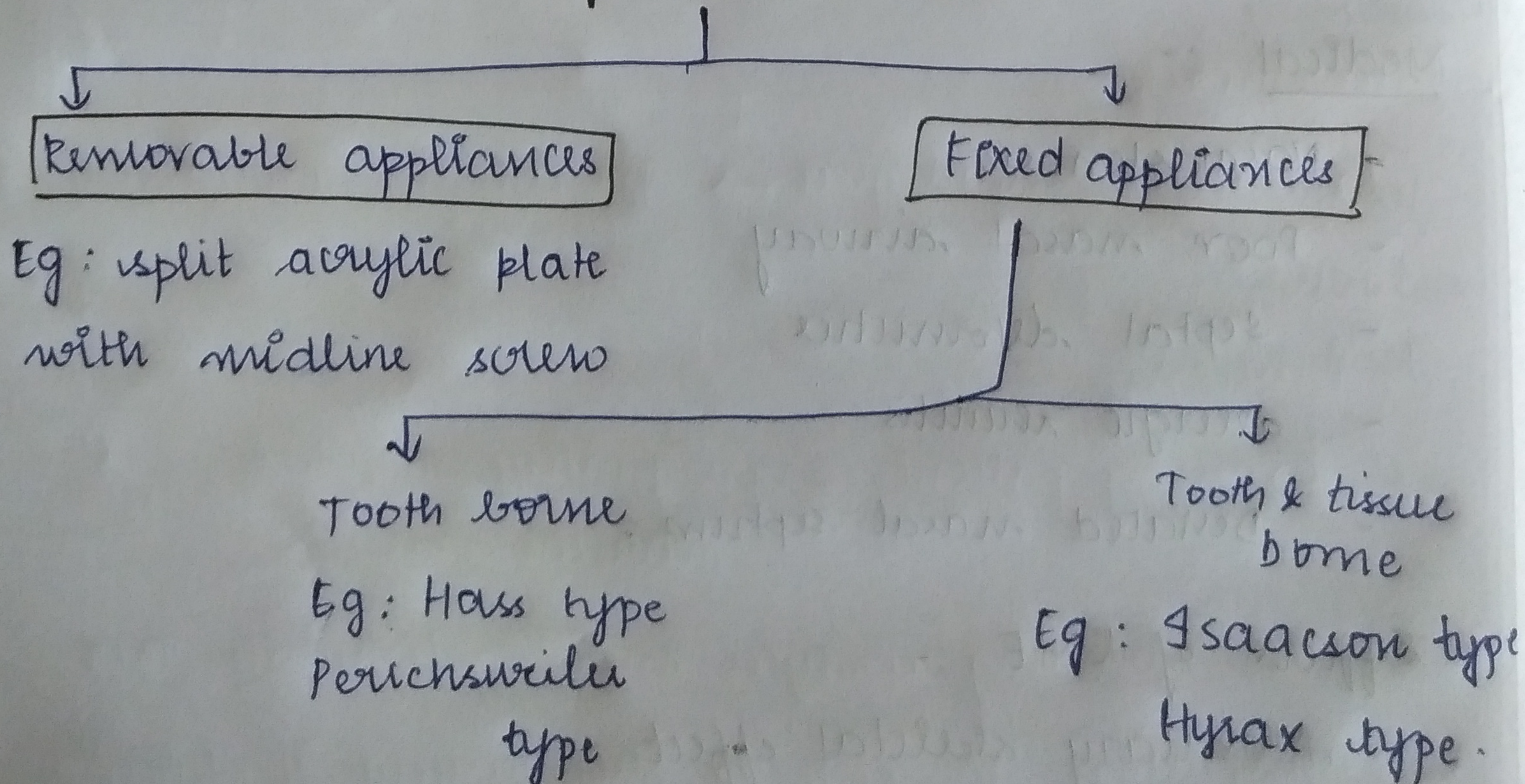
Effect on mandible

- Downward & backward rotation of mandible
- ↑ in face height
- Reduction in overbite.

Effect on nasal cavity

- Increase in internasal space
- Reduced resistance to air flow

Types of appliance for RME

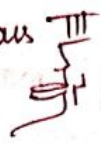




1) Lipstep:

According to Korkhaus:  
Different variations of lip profiles and the lip step are positive lipstep.

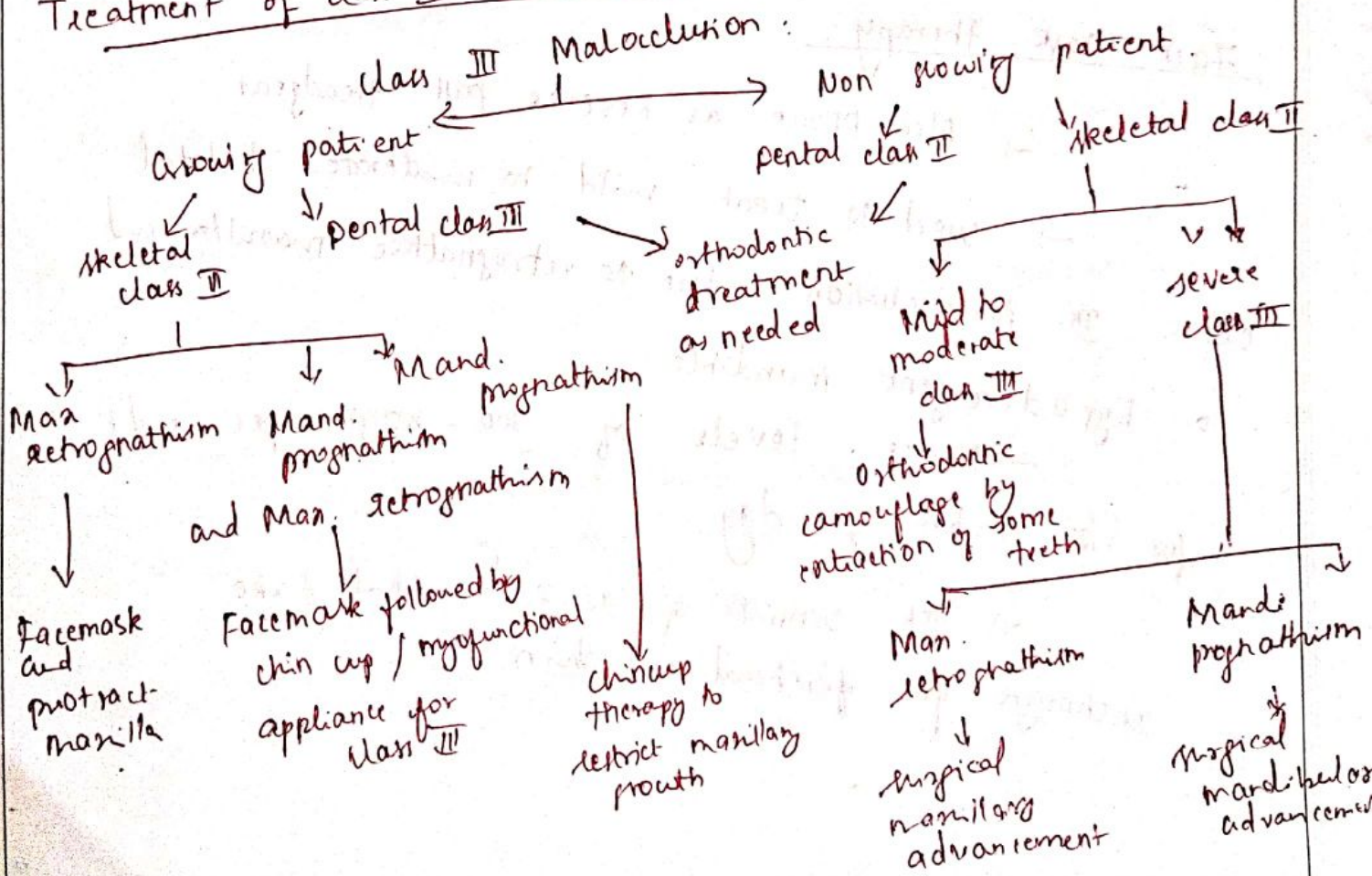
1) A symptom of class III profile



2) Slightly negative lip step seen in normal profile.



3) Marked negative lip step, a symbol of class II profile.

2) Treatment of class III Malocclusion:



## Chin up therapy.

used in the treatment of class III malocclusion.

2 types.

→ Occipital pull chin up.

→ Vertical pull chin up.

effects → Force levels 300-500gms per side for 12-14 hrs. everyday.

\* Backward repositioning of mandible.

\* Redirection of mandibular growth.

\* Remodelling of mandible with closure of the gonial angle.

## Face Mark Therapy.

→ Also known as Reverse pull Headgear.

→ used to treat mild to moderate skeletal class III Malocclusion due to retrognathic maxilla and a hypodivergent mandible.

→ Force levels of 300-500gms per side for 12-14 hrs per day.

→ It consists of a pad that takes anchorage for forehead and chin.



## Treatment using fixed appliances:

In patients with mild to moderate class III skeletal pattern, a combination of retroclination of lower incisor and proclination of upper incisor may be required.

### Rx for Anterior crossbite:

Mild ant. crossbite can be treated using lower anterior inclined planes or removable appliances incorporating screws designed for anterior expansion.

### Rx of posterior crossbite:

→ class III Malocclusion are often accompanied by posterior cross bite.  
→ It can be treated by rapid max. expansion.

### Role of extractions:

Class IV malocclusion characterized by mild mandibular prognathism and lower arch crowding can be treated by extracting lower 1st premolars followed by fixed mechanotherapy.



## Treatment of severe class III Malocclusion:

→ severe class III malocclusion after growth completion is complete is treated by surgical and corrective procedure.

→ class III due to max. deficiency is treated by maxillary advancement procedures such as LeFort I osteotomy.

→ class III malocclusion that are as a result of mandibular prognathism are treated by mandibular set back procedures.

## Treatment of pseudo class III Malocclusion:

pseudo class III Malocclusion that occurs as a result of occlusal prematurity improve on the removal of cause.





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1	28.04.2020	CASE DISCUSSION	Dr. ANNAMALAI	15



28.04.2020



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Close

Participants (26)

Search



Madhu Bala Sermarajan (me)



Meghana Jayadev (host)



Annamalai Orthodontist



Lavanya



Nivethitha Bhaskar



Anurekha Azhaguvel



Dharunya



Gayathri S



Joanna gracy



Kadambari Ramaswamy



Close

Participants (26)



Kadambari Ramaswamy



Kanchana Mala



Kavya Karunanidhi



Kishan Kumar



Kudiarasi Rajendran



Lakshika Sree



Lalitha Choudhary



Logesh Ram



M.Lakshmi priya



Maha srinithi Selvaraj



Munira Begam



NIVASHINI C





28.04.2020




























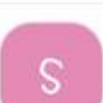
















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Close

## Participants (26)

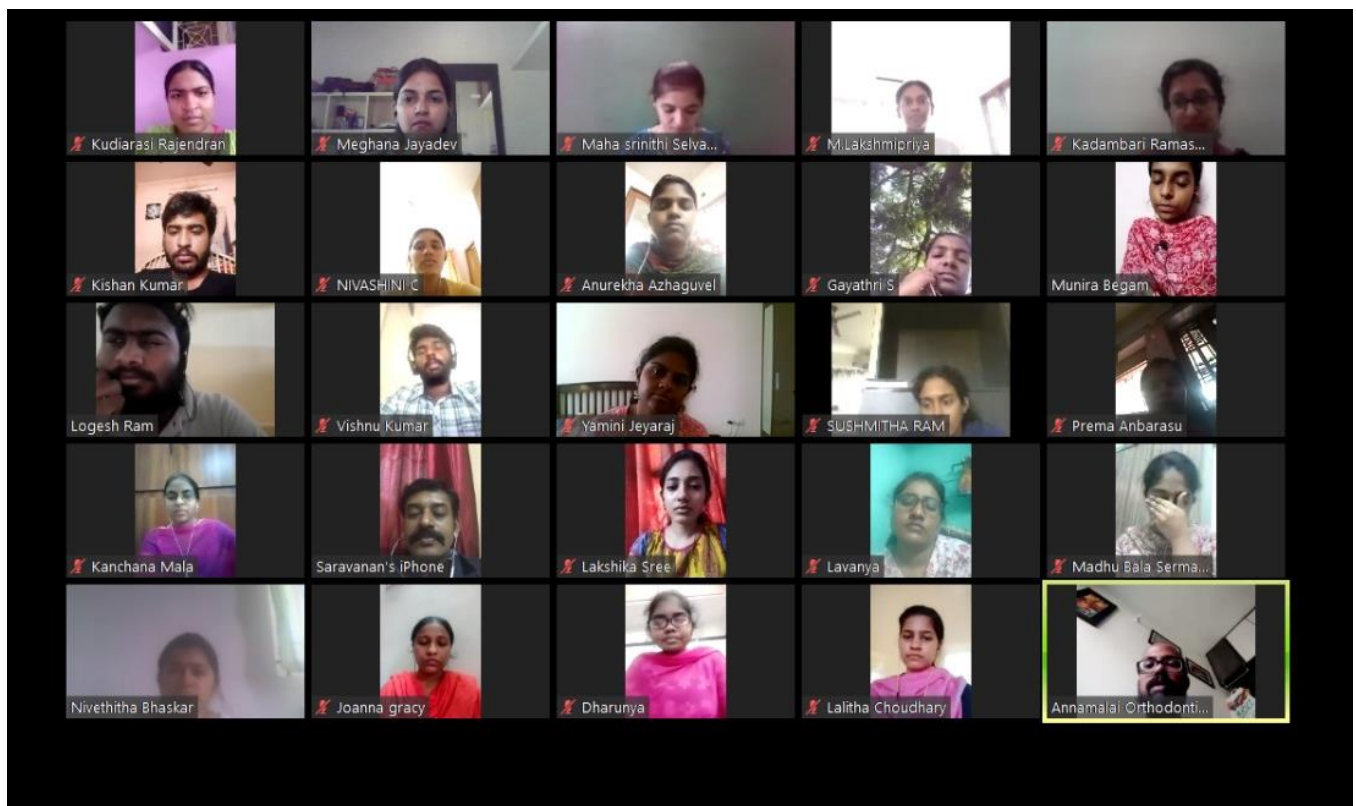
	Lalitha Choudhary	  
	Logesh Ram	  
	M.Lakshmipriya	  
	Maha srinithi Selvaraj	  
	Munira Begam	  
	NIVASHINI C	  
	Prema Anbarasu	  
	Saravanan's iPhone	  
	SUSHMITHA RAM	  
	Vishnu Kumar	  
	Yamini Jeyaraj	  



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Recording...

**CASE DISCUSSION**

**Participants:**

- Kudiarasi Raje...
- Munira Begam
- M.Lakshmi Priya
- Lakshika Sree
- Maha srinithi S...
- Lalitha Choudhary
- Anurekha Azha...
- Lavanya
- Yamini Jeyaraj
- Gayathri S...
- Vishnu Kumar
- Nivethitha Bha...
- Kauvya Karuna...
- SUSHMITHA R...
- Kadambari Ra...
- Logesh Ram
- NIVASHINI C
- Dharunya
- Saravanan's iPh...
- Kanchana Mala
- Madhu Bala Sé...
- Yuganthi Durai
- Kishan Kumar
- Joanna gracy
- Prema Anbarasu



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Recording... You are viewing Annamalai Orthodontist's screen View Options Speaker View Exit Full Screen

**CASE DISCUSSION**

Unmute Stop Video Security Manage Participants Chat Share Screen Pause/Stop Recording Reactions End Meeting





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1	29.04.2020	CASE DISCUSSION	Dr. SARAVANA KUMAR	11



29.04.2020



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Jio 4G LTE 46 K/s 24.6 K/s 7% 3:04

Close Participants (23)

Search

	Madhu Bala Sermarajan (me)			
	Maha srinithi Selvaraj (host)			
	Nivethitha Bhaskar			
	Saravanan's iPhone			
	Annamalai Orthodontist			
	Anurekha Azhaguvel			
	Balaji's iPhone			
	Balan Edward			
	Dharunya			
	Gayathri S			

Chats Invite

Jio 4G LTE 46 K/s 7.7 K/s 7% 3:04

Close Participants (23)

	Jaya Kumar			
	Jayabalan C			
	Jineesh M			
	Joanna Gracy.P			
	Lalitha Choudhary			
	Lavanya			
	Logesh Ram			
	Meghana			
	Munira Begam			
	NIVASHINI C			
	Prema Anbarasu			

Chats Invite



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Jio 4G LTE 46 2.2 K/s 17% 3:05

Close Participants (23)

	Jineesh M			>
	Joanna Gracy.P			>
	Lalitha Choudhary			>
	Lavanya			>
	Logesh Ram			>
	Meghana			>
	Munira Begam			>
	NIVASHINI C			>
	Prema Anbarasu			>
	SUSHMITHA			>
	Yamini Jeyaraj			>

Chats Invite



29.04.2020



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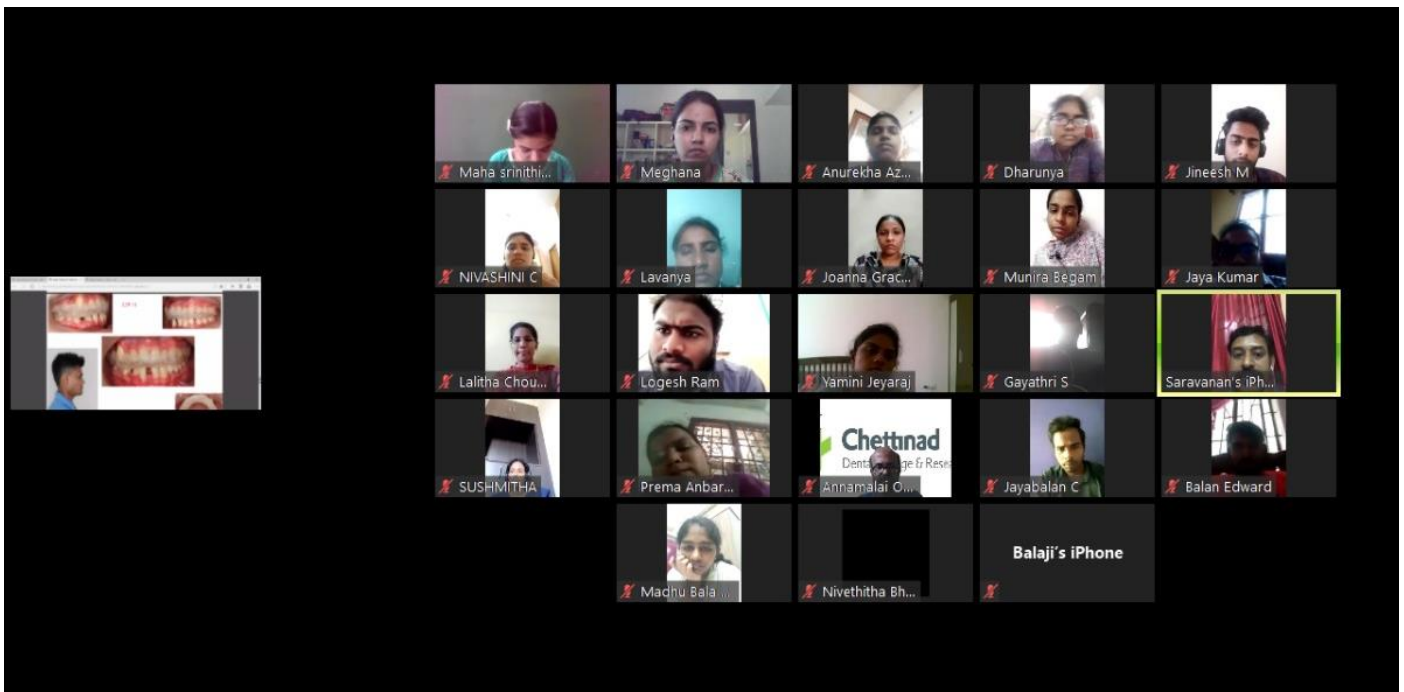
		<b>Prema Anbarasu</b>		



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**E-Teaching/Learning sessions for  
INTERNSHIP STUDENTS**

**Clinical  
discussions**































<b>S.No</b>	<b>Date</b>	<b>Clinical discussion topic</b>	<b>Faculty</b>	<b>No of students participate d</b>
1	30.04.2020	CASE DISCUSSI ON	Dr. YAMINI	05



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
Close Participants (23)

Search

-  Madhu Bala Sermarajan (me)   >
-  Meghana Jayadev (host)   >
-  Saravanakumar Subramani...   >
-  Yamini Jeyaraj   >
-  Annamalai Orthodontist   >
-  Anurekha Azhaguvel   >
-  Chandhni's iPhone   >
-  Deepika R M   >
-  Dharunya   >
-  Hema Suresh   >

Chats Invite

Close Participants (23)

-  Lalitha Choudhary   >
-  Lavanya   >
-  Logesh Ram   >
-  Maha srinithi Selvaraj   >
-  Munira Begam   >
-  NIVASHINI C   >
-  Nivethitha Bhaskar   >
-  Prema Anbarasu   >
-  SUSHMITHA RAM   >
-  Vishnu Kumar   >
-  Yuganthi Durai   >


































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Close	Participants (23)	
	Hema Suresh	  >
	Joanna Gracy. P	  >
	Johnvee S	  >
	Lalitha Choudhary	  >
	Lavanya	  >
	Logesh Ram	  >
	Maha srinithi Selvaraj	  >
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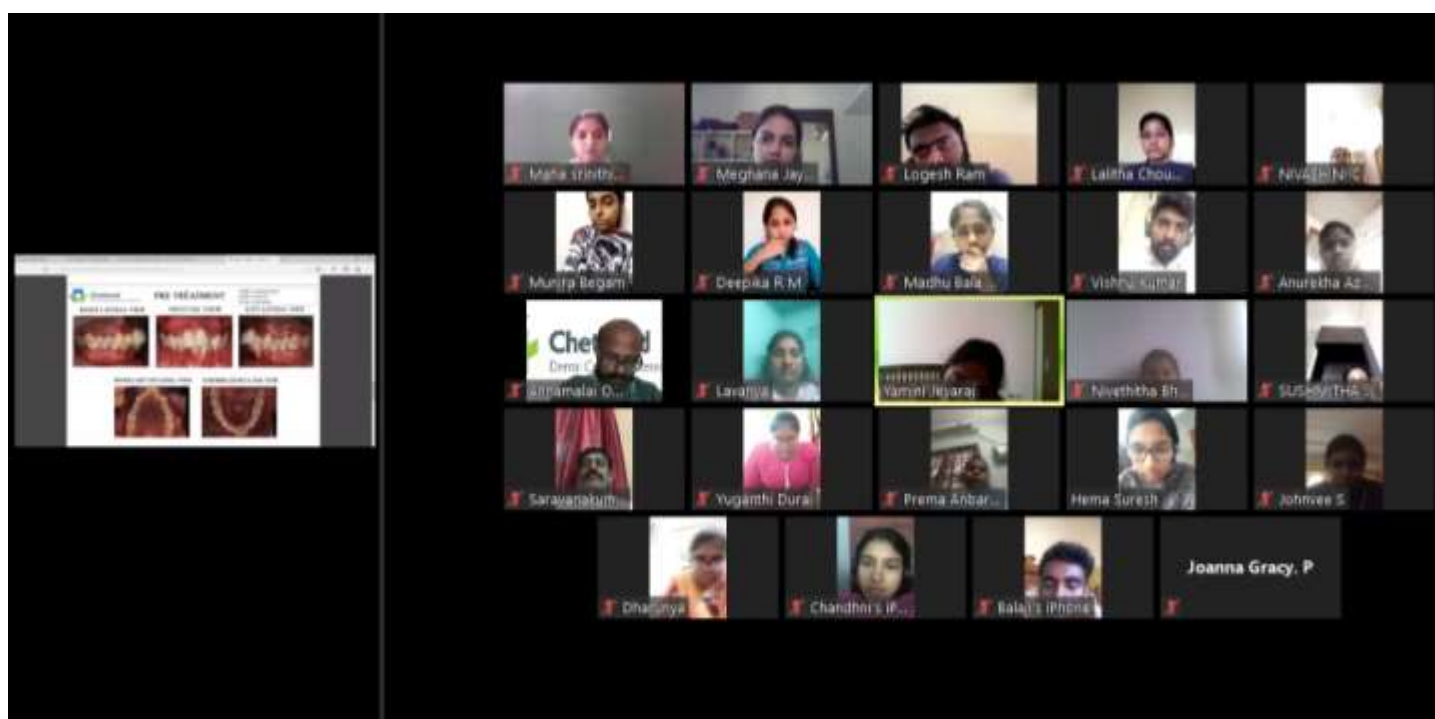
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END TREATMENT

Manish srinivas, Meghana Jay, Logesh Ram, Lalitha Chou, NAVAGHNI, Munira Begam, Deepika R.M, Madhu Bala, Vishnu Kumar, Anurekha A., Chettinad Dental College & Research Institute, Lavanya, Vamini Jeyaraj, Nivethitha Sh, SUSHITHA S, Saravanasubramanian, Yugamthi Durai, Prema Anbar, Hema Suresh, Johnvee S, Dhanya, Chandni's id, Balaji's iPhone, Joanna Gracy, P.





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1	02.05.2020	CASE DISCUSSI ON	Dr. SUSHMITHA	15



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2:52 32 KB/s HD 83%

Close Participants (29)

Search

- GP Gowtham PD (me)
- VJ Vikraman J (host)
- Balan Edward
- SR SUSHMITHA RAM
- Annamalai Orthodontist
- Anurekha Azhaguvel
- a Ateeq Ahamed
- B Balaji's iPhone
- Chandhni Shanker
- Deepika R M
- D Dharunva

Invite

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Close Participants (29)

- Nivethitha Bhaskar
- PA Prema Anbarasu
- Saravanakumar Subramani...
- SA Shafeeq Ahamed
- Sowmya Natarajan
- SS Sruthi S
- SK Suba Keerthi
- Subashini Natarajan
- SV Sureka Varatharaj
- YJ Yamini Jeyaraj
- Y Yuvarani Muthu Kumar

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2:53 34 KB/s


HD 83%



Close


Participants (29)



 Deepika R M


 >



 Dharunya


 >



 GB Gautham B


 >



 GS Gayathri S


 >



 HR Harish Raghav


 >



 JG Joanna Gracy.P


 >



 Johnvee S


 >



 L Lavanya


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 NC NIVASHINI C


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 Nivethitha Bhaskar

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 PA Prema Anbarasu

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SUSHMITHA RAM



Nivethitha Bhaskar




Anurekha Azhaguvel




Sowmya Natarajan

2:52 68 KB/s HD 83%




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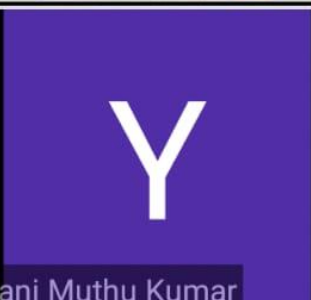
Annamalai Orthodontist



Chandhni Shanker



Subashini Natarajan



Yuvarani Muthu Kumar



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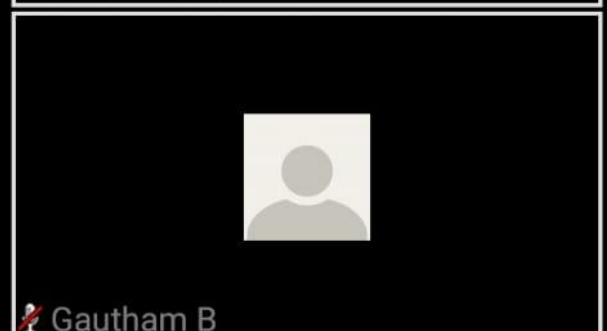
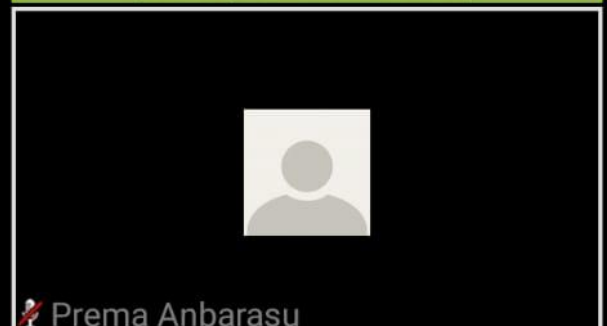
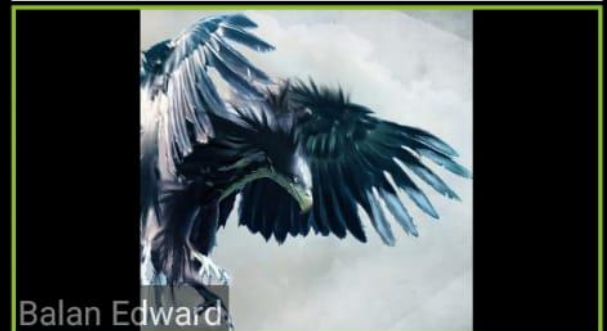
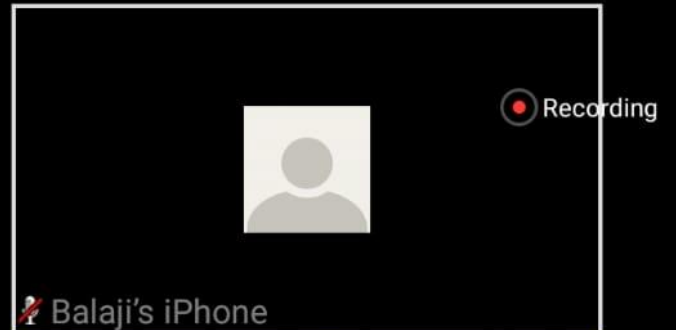
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