Miniscrews—a focal point in practice

Six-part series by Dr Björgn Ludwig, Dr Bettina Glasil, Dr Thomas Lietz & Prof Jörg A. Liasson—Part V

Therapeutic auxiliary elements

Down in the jungle

The number of dental suppliers worldwide that offer miniscrews has expanded to an estimated 45 and this number is still growing. Two trends are apparent from the range of products that are currently available. There are companies that supply miniscrews only in combination with the required insertion instruments. However, miniscrews are only a means to an end where bone anchorage is concerned—an aspect that is far too often overlooked. This is because if the desired therapeutic outcome is to be achieved, appropriate auxiliary devices must also be used (eg springs, elastic chains, wires). For the purpose of a treatment, this means that a range of suppliers must be approached in order to obtain all the elements required for the actual procedure. A potential problem under these circumstances is that the miniscrews and the auxiliary elements may be incompatible.

Very few suppliers of miniscrews also offer a complete system. Such a system consists of diagnostic and therapeutic auxiliary products, in addition to miniscrews (Table 1). In the case of a complete system, it can be assumed that the head of the miniscrew will be compatible with the auxiliary element. The building-block principle can be used to construct an individually tailored appliance from the various elements. The greater the range of auxiliary elements that is available, the more freedom and flexibility these elements afford in a range of applications.

Companies supplying auxiliaries

<table>
<thead>
<tr>
<th>Companies supplying auxiliaries</th>
<th>Name of the miniscrew</th>
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<tr>
<td>DENTAL/RUM (Germany)</td>
<td>tomas-pin</td>
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<tr>
<td>FORESTADENT (Germany)</td>
<td>OrthoEasy®</td>
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<tr>
<td>Mondreal (Germany)</td>
<td>BENEFIT</td>
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<td>HDC (Italy)</td>
<td>Spider Pin</td>
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<tr>
<td>Micerrum (Italy)</td>
<td>M.A.S.</td>
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<tr>
<td>Bio Materiales (Korea)</td>
<td>Orthodontic Mini Implant</td>
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<td>Dentos (Korea)</td>
<td>AbsolAnchor</td>
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<td>Jeil Medical (Korea)</td>
<td>Dual-Top™ Anchor Screw</td>
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<td>Bio-Ray (Taiwan)</td>
<td>A-1</td>
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<tr>
<td>IMTEC Corp. (USA)</td>
<td>Ortho Implant</td>
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<td>Ormco (USA)</td>
<td>VectorTAS™</td>
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Table 1: There are at least 45 companies that manufacture or supply miniscrews. However, only 13 of these offer auxiliary elements for use in orthodontic treatments that are compatible with their own screws.

Fig. 1: The wire ligature is appropriately activated and applies the required force for repositioning of the canine. (Photo: Dr Morea, Brazil)

Fig. 2: The use of a square profile wire makes it possible to achieve very rigid (indirect) attachment. (Photo: Dr Böhm, Germany)

Auxiliary elements for direct chairside use

These auxiliary elements can be divided into three main groups:

- basic elements;
- semi-finished elements; and
- finished elements.

Classification is determined by the extent to which the user has to process or manipulate the element before it can be used. In some cases, it may be necessary to bend a square profile wire. This can be advantageous in mesialisation when a hook or a spring can be provided on the pin for attaching a spring or elastic chain and for attachment to the main arch of the appliance. For this purpose, the wire should be bent at a right angle. Bent wires can also be used in another situation. A ligature or a drop of adhesive is used to fix a square profile wire in a miniscrew slot. Depending on the reciprocal forces and the quality of fixation, the wire (square or round profile) can start to slip within the slot. This can readily be prevented by bending the wire, at least if a pin with a cross-slot is used (Fig. 5a).

In these two situations, however, a grade of wire that fills the slot can only be used if the edges of the slot at the point of cross-over are removed. Of the 16 mini-screws with cross-slot bracket heads currently available, this convenient detail is only found in OrthoEasy (FORESTADENT; Fig. 5b) and the tomasspin (DENTAL/RUM; Fig. 5c).

Basic elements

These consist solely of orthodontic wires (particularly wires with round profiles) of various grades and materials. The wires are used to fashion individual auxiliary elements, which can be more or less time-consuming depending on the type of appliance required. The wires (particularly those made of stainless steel) are quite reasonably priced. Round profile wires are mainly used as ligatures, in other words, simply as fixing elements, but if appropriately twisted, they can also be used for traction purposes (Fig. 1). Three-dimensional monitoring of round profile wires is not possible as they offer little resistance to torque. Square profile wires, however, can be subjected to 5-D inspection because they are torsion free & highly stable & provide (depending on their dimensions) for a very rigid attachment between miniscrew and appliance (Fig. 2). It is advisable to use a grade of wire that fills the slot of the miniscrew. There are three companies that offer pre-prepared wire elements, such as the L and U wires (FORESTADENT) and the tomas T wire (DENTAL/RUM). These elements facilitate the attachment of bands & brackets (Fig. 7a). The tomas T wire (Fig 7b) with its three arms provides...
for a wide range of possible application combinations. For the purpose of mesialisation, for example, one arm can be bent to form a hook. Another can be attached to the main arch by means of a cross tube. Another variant devised by Dr S. Baumgärtel is the fixation of the anterior teeth to a para-median miniscrew (Fig. 7c).

**Finished elements**

This group covers a whole range of auxiliary products for use in many different applications (Table 5). All of these require little or no time for preparation and can be used directly without adaptive adjustments. However, these products are also accordingly priced relative to type and grade of finish.

**Crimpable hooks**

For the purposes of En Masse Retraction, it is often an advantage when the force provided by spring or elastic chain is applied at the same level as the centre of resistance. This can be readily implemen-ted using ready-made hooks, which are crimped to the arch of the appliance (Fig. 8).

**Compression springs**

Compression springs are also ready-made elements and are sold by the metre. The springs can be used for distalisation and mesialisation. One problem is ensuring continuous activation as the spring effect is lost. Stop element can be incorpo-rated to avoid needing to remove the whole appliance whenever this happens (Table 5). These are available as crimpable elements and as screw stops. The latter have the advantage that they can be quickly adapted to a wide range of situation. When such stops are used, the effort required for the repeated activation of springs is consider-ably reduced.

**Coil spring elements**

Coil springs are not new in the field of orthodontic treatment. They are generally too small to be attached to miniscrews (Fig. 7b). A firm attachment to the screw head can only be achieved using ligatures or ready-made hooks that allow attachment of the spring to the head. For this reason, several suppliers now offer coil springs (Table 5) with at least one eye-let that is compatible with the head of their miniscrew (Fig. 8). These springs are generally made of NiTi and can be used in many different applications. New on the market are the...
Nikodem springs (Fig. 9a). These flat coil springs made of NiTi were originally developed for the alignment of displaced canines. However, they have also since been found to be effective in intrusion and En Masse Retraction (Fig. 9b).

Elastomeric chains are widely used traction elements. In contrast to NiTi springs, however, these rapidly lose their effectiveness. For this reason, a chain is usually placed around the head of a mini-screw so that it can be more easily removed later. Depending on head design and the direction of the force applied, it is possible for the chain to become accidentally dislodged from the head. This problem can be avoided by the use of ready-made hooks (Table 5) that can be attached to the head of the screw.

**Sliding hooks**

Sliding hooks with a welded arm for attaching springs (Table 5) are an equally familiar piece of equipment. They are experiencing something of a renaissance in connection with the use of mini-screws. They are used for En Masse Retraction, mesialisation and distalisation.

The effect of a sliding hook is determined by many different factors, which is why the value of attaching sliding hooks to the arch is disputed.

### Auxiliary elements for laboratory use

All the elements discussed above can be prepared and inserted, with varying amounts of time expenditure, directly to the arch. In recent years, the range of applications for miniscrews has also been extended to skeletal adjustment treatments, such as palatine suture expansion (see Dental Tribune Asia Pacific, 5(2009): 24). The corresponding appliances require very careful preparation, and for this reason, the related tasks have been transferred to the laboratory. The principal procedure involves the insertion of the mini-screw(s) and the subsequent reshaping process. Once a working model has been prepared, the appliance is constructed and adjusted appropriately.

For connection to a mini-screw, a suitable abutment must be employed. In hybrid PSE, for example, two arms of the expansion screw are welded to the abutment. The laboratory abutments available from FORRESTA-DENT fit the head of the OrthoEasy screw. An adhesive is used for fixture after insertion.

### An innovative approach is the BENEFIT-System (Mondial)

Analogous to prosthetic implants, an implant is placed in the bone. Instead of the widely known system where the head is firmly bonded to the threat, there are different abutments (Table 5) available. These will be threaded to the bone screw.

This way, many installations can be prepared in the laboratory, for example, distalisation, anchoring, and retention RPE, saving chair time. For many mechanisms, such as molar uprighting or intrusion, impression is not necessary and the BENEFIT implant can be directly used.

### Conclusion

Depending on the task at hand, it may be necessary to use various auxiliary elements. Most of the connection elements discussed are new and have already been used successfully in orthodontic treatment for some time. For this reason, most of them will already be available in every practice, but often not where they should be. In order to be effective and not waste time searching for tools, it is advisable to have the most important auxiliary elements to hand in a tray. You can either create a DIY version of the tray or purchase one of the ready-made trays available on the market.