VALO’s curing light goes cordless

By Sierra Rendon, Ortho Tribune

If you’ve had the opportunity to experience the durability and fast curing of the VALO Ortho curing light, you know what a revolutionary product it is. At the AAO’s annual meeting in Honolulu, Opal Orthodontics previewed its new VALO Ortho Cordless, now available for pre-order.

“It’s the same powerful and durable curing light as before, but now orthodontists have the choice,” said brand manager Suzanne Wilson. “It’s just another option for the orthodontist.”

The VALO Ortho Cordless offers:
• Unique Xtra Power Quadrant Mode that quickly and efficiently cures five teeth with one touch of the button.
• A powerful, optimally collimated beam that delivers consistent, even cures directly over the labial face of the bracket.
• A slim, low-profile design that allows unprecedented access anywhere in the mouth.
• Intuitive, user-friendly timer controls.
• Highly efficient LEDs that keep the wand body cool to the touch.

Wilson says she’s even purposely dropped the curing light on the floor to show just how durable the product is. Wilson says she’s even purposely dropped the curing light on the floor to show just how durable the product is. Wilson says she’s even purposely dropped the curing light on the floor to show just how durable the product is. Wilson says she’s even purposely dropped the curing light on the floor to show just how durable the product is.

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The only 100 percent customized lingual fixed bracket system on the market today, Incognito Lite System is an ideal treatment option for adult patients, especially relapse cases. The product has been awarded the international design prize, The Red Dot Award: Product Design 2012. It received the globally sought-after Red Dot for its fine design in the health-care products category.

Incognito Lite Appliance System is designed for the orthodontist performing direct and indirect orthodontic procedures, who is seeking the quality, durability and power of VALO, now with the convenience of a cordless curing light. The light features custom, multi-wavelength light-emitting diodes (LEDs) to produce high-intensity light at 395 to 480 nm — capable of polymerizing all light-cured dental materials quickly and efficiently.

VALO Ortho Cordless comes with VALO rechargeable batteries and a battery charger suitable for power outlets from 100 to 240 volts. The standard lithium iron phosphate rechargeable batteries are safe, inexpensive and optimized for power and longevity.

The new appliance is designed to rest in a standard dental unit bracket, or it can be custom-mounted using the bracket included in the kit. It offers consistent curing intensity and output in a durable, aerospace aluminum body with Teflon coating and a sleek, ergonomic design.

Incognito Lite Appliance System: simplified system realigns the ‘social six’ teeth

3M Unitek introduces Incognito™ Lite Appliance System, a new lingual brace system that is placed on the inside of the teeth, making it virtually unnoticeable to others. Incognito Lite System realigns the “social six” teeth — those in view when smiling or talking — and is used as a treatment method for mild to moderate misalignment cases that do not require the full Incognito Appliance System.

The Incognito Lite System is an ideal treatment option for adult patients, especially relapse cases. The product has been awarded the international design prize, The Red Dot Award: Product Design 2012. It received the globally sought-after Red Dot for its fine design in the health-care products category.

Incognito Lite Appliance System uses the same advanced technology as the original Incognito Appliance System, featuring completely customized brackets and robotically bent wires. However, the Incognito Lite System requires fewer brackets and only three pre-selected archwires, mounted exclusively on the inside of the teeth, which allow for an efficient, yet targeted treatment.

Orthodontists benefit from the easier accessibility to the area behind patients’ teeth during system placement, and fewer wires are used than with the original Incognito System. Another key differentiator is that it is the first Incognito Braces product to be digitally set up using proprietary software.

Patients can expect the same precise treatment results found with the original Incognito System. In addition, patients may experience shorter treatment time compared to other “invisible” solutions on the market because Incognito Lite Appliances are worn all day, every day.

“We are thrilled to make this simple and completely esthetic treatment option available to our customers. Our focus was on creating a treatment option that was simple for our orthodontists,” said Gabrielle Minkus, U.S. marketing manager for the Incognito brand at 3M Unitek. “This product offers great ease-of-use for their staff, thanks to simple bonding and simple wire changes, and it’s a simple treatment for patients because it requires much less treatment time. We want to help our orthodontists give their patients what they want: straight teeth with hidden braces.”

Dr. Adam Schulhof, one of the leading Incognito Appliance System providers in North America, adds: “Even more impressive than the beautiful results my patients get with Incognito Lite Braces is the minimal chair time involved. The initial bonding is very easy and the wire changes are simple and quick. My assistants love it almost as much as the patients do. There is no need for ‘reboots’ or multiple ‘finishing’ appointments.”

Due to simplified handling, Incognito Lite Appliances perfectly complement the Incognito Appliance System and offer ease-of-use for orthodontists, especially those who want to enter into the world of lingual orthodontics. According to trial users, patients benefited from quick acclimatization and high comfort while wearing Incognito Lite Appliances. Thanks to the unique production process of the system, precise treatment results can be achieved.

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3Shape, a user-acclaimed world-wide leader in 3-D scanners and CAD/CAM software solutions, presented its Ortho System™ and TRIOS®, its new intra-oral digital impression solution, at the 2012 AAO Annual Session in Honolulu.

**Ortho System™**
Ortho System brings together accurate 3-D scanning, intuitive treatment planning and analysis, efficient patient management, communication tools and appliance design, all providing streamlined workflows that increase efficiency and productivity. Some of the features are:

- **Link between orthodontic clinics and labs:** The clinic can take a digital impression with TRIOS and immediately perform treatment planning with Ortho Analyzer™, while the lab will load the case into 3Shape’s Appliance Designer™ to design the customized product. Additionally, labs can receive digital impressions directly from the clinic and immediately send feedback or questions.

- **OrthoAnalyzer:** Provides complete insight into patient cases by simulating treatment plans and applying familiar analyses in a highly efficient and systematic manner.

- **Appliance Designer:** Users can design modified study models or appliances for output using all types of 3-D driven machines and materials. Easily create nightguards, retainers, splints, surgical bites and much more.

- **Open formats:** The Ortho System allows users to create high-quality digital study models and appliances in the standard STL file format, allowing labs and practices to choose their service partners.

**TRIOS: next-generation impressions**
3Shape also showcased its TRIOS digital-impression solution, including a wide range of new features.

TRIOS enables dentists to rapidly capture the complete intraoral situation and send the 3-D model directly to the lab. Unlike many other scanners, 3Shape’s TRIOS does not require pre-spraying of the teeth. The system clinically validates the impression and includes flexible tools allowing dentists to edit their scans, and even “delete and rescan” specific areas where needed. Some key features are:

- **Ultra Fast Optical Sectioning™ technology for high speed**
- **Spray-free for optimal accuracy and patient comfort**
- **Accurate scanning with up to 1,000 3-D pictures, for true geometries**
- **Autoclavable scanner tip with easy to flip tip for scanning upper and lower jaw**
- **Easy to use with complete motion and positioning freedom**
- **Smart-Touch screen with line 3-D visualization**
- **Instant Impression Validation**
- **Online communication with the lab**

**Sesame Communications, a leading provider of online patient communication and engagement tools for the orthodontic industry, and Ortho2, the largest independently owned provider of comprehensive orthodontic practice management and imaging systems, announced a data-sharing partnership.**

Sesame Communications will obtain patient data from Ortho2’s Edge™ system to bring the full suite of Sesame services to Ortho2 cloud-based customers. Sesame has a long history of providing patient communications to customers on other Ortho2 platforms and the addition of the Edge system to that list ensures customers can stay current with the latest Ortho2 technology while still utilizing all the Sesame services they are accustomed to.

“We are thrilled to be expanding our collaboration with Ortho2,” said Dana Friedman, chief executive officer of Sesame Communications. “This partnership allows us to bring convenience and reliability to our shared customers, ensuring they always have the latest technologies without constant hardware upgrades.”

Sesame’s patient connection platform features a robust patient portal with integrated automated reminders, surveys, online payment options, interactive treatment imagery, health history forms, and more. Orthodontists can access their Sesame 24-7™ centralized dashboard to view the performance of their digital marketing efforts and real-time patient analytics, enabling clinicians to monitor the health and performance of their practice to make informed decisions to help boost profitability, increase patient satisfaction, multiply referrals and improve productivity.

For more information about Sesame, visit [www.sesamecommunications.com](http://www.sesamecommunications.com) or call (877) 633-5193. For more information about Ortho2, visit [www.ortho2.com](http://www.ortho2.com) or call (800) 678-4644.

Ortho2, Sesame unveil new data-sharing partnership
Go ‘wild’ for multi-shaped braces

Increasing awareness of WildSmiles Designer braces among kids and parents is leading many orthodontists to go wild for WildSmiles.

“WildSmiles is a great differentiator,” said Dr. Ben Burris, a WildSmiles provider located in Jonesboro, Ark. “In a sea of providers offering braces and aligners, WildSmiles lets me stand out. WildSmiles makes patients decide to choose me — mostly because kids demand them!”

After being “tested” in the marketing for more than a decade, many of the clinical and detailed questions orthodontists often present have been shown to not be real concerns, said a WildSmiles representative.

WildSmiles Braces provides brackets with patented shaped pad designs. The designer brackets are placed on the maxillary arch only and can be mixed and matched with color elastics for added patient individuality.

Many patients find information about WildSmiles when doing Google searches about the braces process before getting braces. In fact, Dr. Neal Kravitz, an orthodontist with practices in northern Virginia, says many of his “new patients come to our offices specifically asking for WildSmiles.”

He goes on to say, “many kids hold up the WildSmiles typodont and their faces light up! Entire teams have come to our office for WildSmiles and choose the team colors. We create raving fans who show off their braces.”

Patients seem to identify with the shape they choose in a personal way. They love to talk about their shaped brace. Because other esthetic options are geared toward hiding your braces, it’s natural the WildSmiles option is a fun thing for patients to focus on.

Since 2002, WildSmiles has grown to service orthodontists all across the United States and into more than 30 different countries. Company representatives tell us many of their clients love the added community marketing benefits.

One representative tells a story of new patients visiting an orthodontist, a WildSmiles customer, because they were talking about the cool diamond-shaped braces at soccer practice.

“It has definitely been the practice builder I wanted,” said Dr. Jeff Haskins in Denver.

The company says many clinicians are eager to share how easy they find WildSmiles to be to integrate into their practices. It does not seem to matter if you use self-ligating or twin brackets; WildSmiles customers use them all.

One thing WildSmiles customers seem to have in common is a willingness to offer options for their patients.

Dr. David Sarver, a practicing orthodontist in Vestavia Hills, Ala., puts it this way, “Orthodontics is and should be fun. “WildSmiles gives us an option that allows us to be playful but serious at the same time.” And that’s what it’s all about for WildSmiles, helping to make the experience of having braces more enjoyable for the patient.”

More information
More information about WildSmiles Braces can be found at www.wildsmilesbraces.com or call (402) 334-7171.

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Edge combines management, imaging and communication

Edge from Ortho2 delivers an all-encompassing practice management, imaging and communication software with plenty of features, high capability and integrated programs — all supported by a customer service team. Edge features private Cloud Computing with off-site data hosting options, innovative imaging, reminders, patient-education animations and more.

With private, secure Cloud Computing from Ortho2, your practice can eliminate the cost, complexity and risk associated with in-house servers and backups. This feature allows you to fully access the secure web-based data infrastructure from anywhere, even your smart phone.

- 35 percent to 44 percent cost savings with lower initial and ongoing hardware costs
- Secure data protected by world-class firewalls

The design inside Edge uses the latest user interface innovations, such as navigation elements that present meaningful options, hover view and use of drag-and-drop, and Edge is backed by an industry-leading customer-support team.

Check out other advancements available with Edge.

- **Edge Imaging** is one of the most robust imaging technologies available today, according to Ortho2. With an intuitive interface, time-saving features and easy customization, Edge Imaging can help manage all of your patient image files.

  Edge Imaging includes new features such as quick-access card flow presentation, smart drag-and-drop layout customization, unlimited undo capabilities, silhouette image alignment and more.

- **Premier Imaging** is an optional upgrade for Edge Imaging and includes comprehensive image morphing, cephal tracing and analysis and Bolton Standards. Superimpose multiple time points on structures rather than oriented planes or use Bolton Standards for no-trace quick review. There is no additional cost for a multi-user license or digital X-ray integration.

- **Edge Animations** are patient-education animations for improved compliance and case presentation, including surgical and 3-D animations. With Edge Animations, you have the ability to edit and customize videos, using annotation and audio controls or drag-and-drop, so virtually any image or movie can be included. Publish your animations to disc, e-mail or YouTube.

- **Edge Reminders** is an easy-to-use system for automating your patient reminders. Send automated phone, text and e-mail appointment reminders for any range of upcoming appointment dates, recall reminders, birthday greetings and more. Patient responses are even integrated into your schedule. Edge Reminders offers low, flat billing with no minimum monthly charge.

- **Edge Portal** offers 24/7 online account access for patients, responsible parties and consulting professionals to retrieve appropriate information and images, make online credit card payments and more.

  Edge Portal also gives your practice real-time access to vital practice information, treatment chart data and images from any location or device, including tablets and smart phones.

The Edge Dashboard.
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SAVE THE DATE

Yankee Dental Congress 2013 will bring together thousands of brilliant minds to learn about the most innovative approaches, practices, and resources in dentistry.

Here is a sneak peak at a few education highlights:

Gordon Christensen, DDS
RESTORATIVE

Loretta LaRoche
PERSONAL DEVELOPMENT

Kenneth Hargreaves, DDS
ENDODONTICS

Roger Levin, DDS
PRACTICE MANAGEMENT

Laney Kay, JD
INFECTION CONTROL

Cherilyn Sheets, DDS and
Jacinthe Paquette, DDS
RESTORATIVE/ESTHETICS

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Connect with us
Myofunctional orthodontics and myofunctional therapy

By Chris Farrell, BDS, Sydney

A brief history of orthodontics

More than 100 years ago, and before Edward Angle, dentists realized they could move teeth into a more esthetic position by applying various mechanical devices to the teeth. This, in turn, caused apposition and deposition of bone in areas where forces were increased or decreased. Teeth could be moved into a more esthetic position, and so the orthodontic profession was born.

Angle clearly stated his view that it was unethical to extract teeth for orthodontic purposes and proved that, with his complex fixed appliances, he was able to expand the arches and align the teeth. The problem at this stage was that a lot of these cases (possibly most of them) relapsed.

So Tweed, who was Angle’s student, suggested that the extraction of teeth was the only way to get stability. In the 1903's, extraction orthodontics became the normal practice after the Australian orthodontist Percy Raymond Begg developed the first straight wire appliance, which required less wire bending skills than previous methods.

Today, orthodontists reverse self-ligating brackets as the key to non-extraction orthodontics. Angle would be amused if he were around today. Has the stability of orthodontics changed? No. The orthodontic profession has accepted that to expect case stability using fixed appliances without fitting permanent retainers is both impractical and unethical.

Progress in orthodontic stability is achieved by advances in flowable composite, rather than advances in orthodontic technique. The Australian Society of Orthodontists (ASO) website is an example of the widespread acceptance that stability is not possible with tooth-centered orthodontics.

Teeth may have a tendency to change their positions after treatment. The long-term, faithful wearing of retainers should reduce this tendency. (Source: www.aso.org.au/Docs/Orthodontics/Risks.htm)

Myofunctional therapy

Understanding how the oral muscles and the tongue influence the jaws and dental arches predates Angle by a long way. The history of myofunctional therapy dates back to the 19th century in Italy. In 1906, American orthodontist Alfred Rodgers experimented with facial muscle exercises and, in 1918, wrote a paper titled “Living Orthodontic Appliances,” in which he cited that muscle function alone would correct malocclusion. In 1907, renowned orthodontist Edward H. Angle’s textbook “Malocclusion of the Teeth” detailed the effects of oral habits on occlusion.

Angle stated that in his view, every malocclusion has a myofunctional cause. Myofunctional therapy became the popular “adjunct to orthodontics” in the 1960s and 1970s, when Daniel Garliner created the Myofunctional Institute in Florida.

Garliner trained thousands of myofunctional therapists and wrote multiple books on the subject. The new etiology of malocclusion was confirmed by rapid success in treating malocclusion with greater stability.

Unhappily, this success was not evident in 100 percent of cases. Arguably, the ensuing decades saw myofunctional therapy diminish in popularity because of the then time-consuming treatment being seen as only an optional addition for cases where the patient exhibited tongue thrusting. Tooth-centered orthodontics with direct bonded brackets and super-elastic wires no longer warranted the “tongue thrust therapist” in all but the occasional cases.

Myofunctional orthodontics

Myofunctional orthodontics put forward that the cause of malocclusion was muscle dysfunction. From an early age, mouth breathing, thumb sucking, tongue thrusting or swallowing incorrectly can be observed in most children.

All will have a developing malocclusion. The correction of these dysfunctional habits not only corrects the malocclusion (if treated early enough), it also has the potential to improve facial growth.

The problem with treating myofunctional habits early is that the compliant patient will no longer need braces. This is one of the biggest dilemmas facing an orthodontist today. Correct the causes early and the market for braces can be drastically decreased. However, treating children earlier at their optimal growth stage (between ages 8-8 years) using myofunctional orthodontic techniques can make orthodontic treatment easier and more stable.

Once a practitioner can see the causes of a child’s malocclusion, it is possible to serve the growing demand from parents who do not want to delay treatment...’

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Myofunctional orthodontics and myofunctional therapy

‘Once a practitioner can see the causes of a child’s malocclusion, it is possible to serve the growing demand from parents who do not want to delay treatment...’

Correct their own dysfunctional habits (chronic mouth breathers, for example), correct dental alignment and arch development is only possible if the patient accepts wire and glue for life. Occasionally, patients do accept this, and so sometimes retainers are fitted under the direction of the patient or parent. This occurs for only a minority of cases.

Once you can diagnose the causes of the malocclusion, you are capable of resolving the malocclusion, rather than just treating its symptoms.

Treating the causes of the malocclusion, rather than just relying on mechanical forces to align teeth has great benefits for both patients and parents. If you’d like to learn more, MBK offers myofunctional orthodontic training.

Benefits of myofunctional orthodontics

Myofunctional orthodontics produces healthier patients who are able to grow without the detrimental habits that limit facial growth. Patients who stop mouth breathing are healthier and get less allergies and infections because of breathing through their nose. Fixing incorrect swallowing patterns and improving poor nutrition allow correct downward and forward facial growth and development.

Case after case using myofunctional orthodontics produces stable maxillary arch development and resolves lower anterior crowding with little mechanical effort. No braces are needed, and for the majority, no permanent retainers are required.

Reference


About the clinician

Chris Farrell, BDS, graduated from Sydney University in 1971 with a comprehensive knowledge of traditional orthodontics using the Begg technique. Through clinical experience, he took an interest in TMJ/TMD disorder and, after further research, Farrell discovered that the etiology of malocclusion and TMJ disorder was myofunctional, contradicting the established views of his profession. Farrell founded Myofunctional Research Co. (MRC) in 1987 and has become the leading designer of intra-oral appliances for orthodontics, TMJ disorder and sports mouthguards.