

Conclusion

It has been my intention to demonstrate some of the simplified mechanics that can be used in a Bioprogressive approach to nonextraction therapy. Loop systems and arches that are difficult to tie in and control have virtually been eliminated. Sectional arches (primarily utility arches) are used whenever they allow for an unlocking of the malocclusion that cannot readily be achieved with continuous arches.

Tying treatment mechanics and wire types, sizes, and forms to the visual treatment objectives is of paramount importance. This feedback mechanism allows the clinician to keep track of the overall treatment goals and make chairside clinical decisions without having to completely rethink a case at every appointment.

In addition to reducing doctor time and frustration, an obvious benefit is a more comfortable and cleanable appliance for the patient. Optimum orthodontic quality can only be achieved, however, through complete understanding of the diagnostic principles, appliance design features, and appropriate staging of mechanics.

*26302 La Paz Road #202
Mission Viejo, CA 92691*

(TO BE CONTINUED)

>>>>>>>

CORRECTION

In the September article by Dr. James A. McNamara (An Orthopedic Approach to the Treatment of Class III Malocclusion in Young Patients, JCO 21:598-608, 1987), the elastic size to be used should be 5/16", 14oz, rather than 5/8".