

Summer 2024



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Quarterly
Newsletter

Orthognathic Surgery

Provided by:

STRICKLAND
ORTHODONTICS

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SUMMER 2024

Dear Baldwin County Dental Offices:

Here at Strickland Orthodontics, we have decided to start doing a newsletter for our local dentists! We want to keep y'all up to date with any big news involving our practice and send over a few of our most exciting finished cases. We also wanted to use this opportunity to summarize a few relevant articles to help us all care for our patients in a more evidence based way! We hope that you all enjoy this, and we look forward to serving the Eastern Shore community alongside you. We have included Dr. Stephen's and Dr. Maggie's cell phone numbers at the bottom of the page. Please reach out to them directly with any concerns, questions, or to have treatment planning conversations.

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WHAT IS ORTHOGNATHIC SURGERY?

Orthognathic surgery realigns the jaws or repositions dentoalveolar segments when orthodontic problems are too severe for orthodontics alone. Surgical treatment is not a substitute for orthodontics, but it must be coordinated with orthodontics and other dental treatment to achieve the best possible results.

The great majority of patients who undergo orthognathic procedures report long-term satisfaction with the outcome (80-90%). It is something that we do not take lightly, and we work very hard to communicate thoroughly with the patient, their parents/family, and the surgical team to make sure all parties are adequately informed about the risks and benefits of this process.

Rigid intraoral fixation (RIF) has allowed for immobilization of the jaws or "wiring the jaws shut" to be a thing of the past. This has allowed surgery to be more predictable and more comfortable for patients. Virtual planning and custom fixation has taken surgical predictability and stability to the next level.

WHY AND WHEN IS IT INDICATED?

There are many reasons why orthognathic surgery may be indicated. There is often significant functional issues or airway considerations with severe malocclusions. In addition, there are major changes that can be made from a profile and smile esthetic standpoint. We hope to highlight some patients that were good candidates for orthognathic surgery and a little bit about the orthodontic side of treatment planning and execution.

STAGES OF SURGICAL PROCESS

Depending on the amount of orthodontic preparation needed prior to surgery, 6-18 months of pre-surgical orthodontics is needed. After surgery, settling movements, interference reduction and finishing is needed which typically entails about 6-12 months of post-surgical orthodontics. These are the general steps of the process:

1. Orthodontic consult
2. Oral Surgery consult- evaluate candidacy for surgery from insurance standpoint
3. Pre-surgical orthodontics (6-18 months). Extractions are sometimes indicated. Patient can choose traditional braces or aligners
4. Surgery performed
5. Post-surgical orthodontics (6-12 months)



MANDIBULAR SURGERY

Types of Surgery

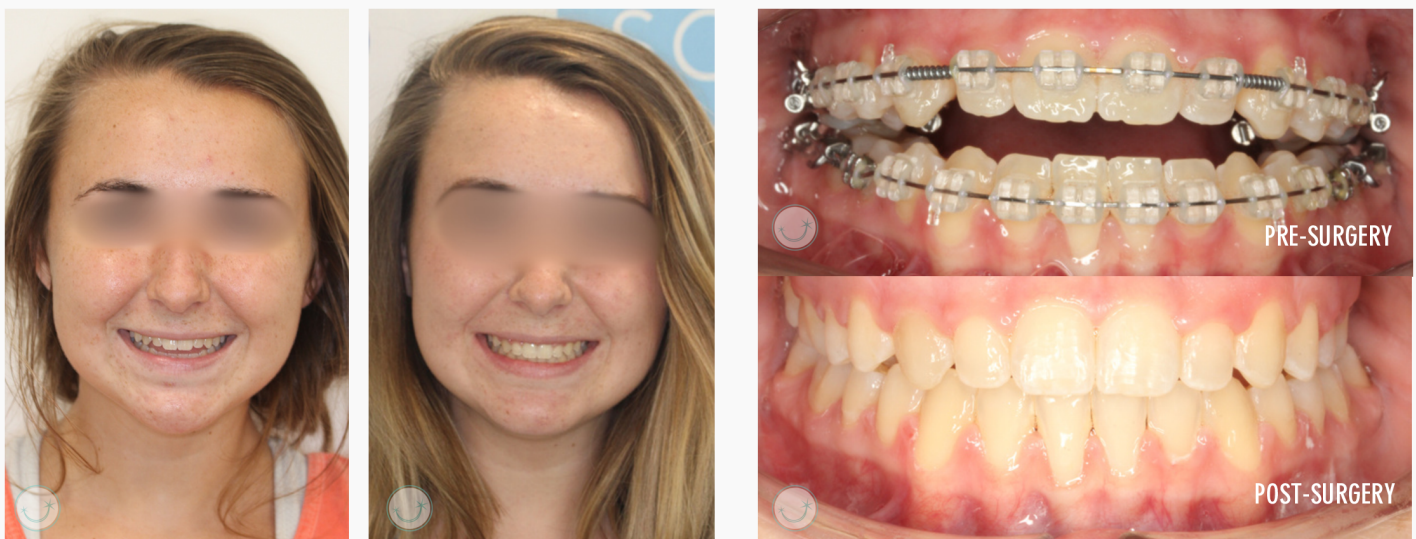
In this surgical scenario, the mandible is the only jaw that is moved. It can be moved forward, backward or rotated to achieve a vertical change. The chin can also be moved in all three planes of space separately to accomplish esthetic goals. Moving the mandible backward has significant airway considerations that need to be evaluated by the surgical and orthodontic team.



Pre-surgical orthodontics involved extraction of lower 4s (#20, #28) to decompensate the lower incisors. This helped us maximize the possible surgical movement. Surgery has been done but orthodontic treatment is still in progress for this patient.

MAXILLARY SURGERY

The maxilla can be moved up or forward with excellent stability. Moving the maxilla down or increasing the width can be done but with less stability and higher chance of relapse. A splint is often used for 4-8 weeks after surgery if the maxilla is widened. The maxilla is hardly ever moved backwards. Maxillary surgery is often done in conjunction with mandibular surgery to get the most ideal result.

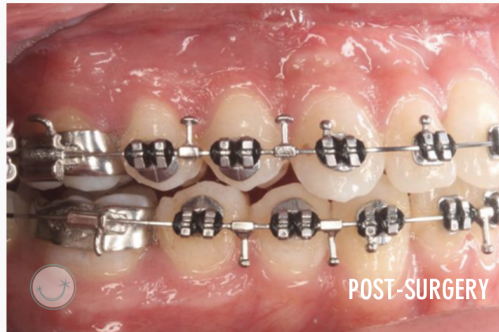
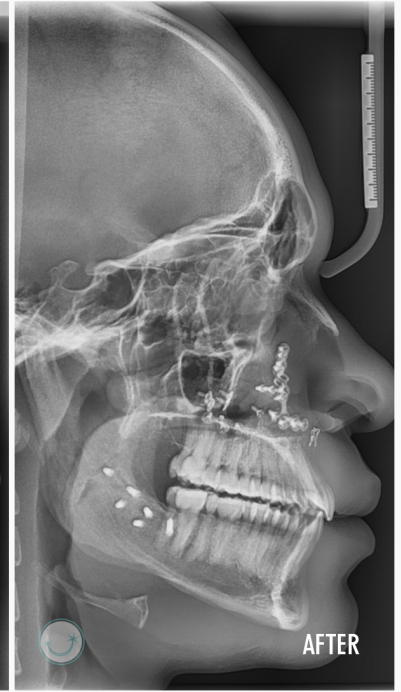
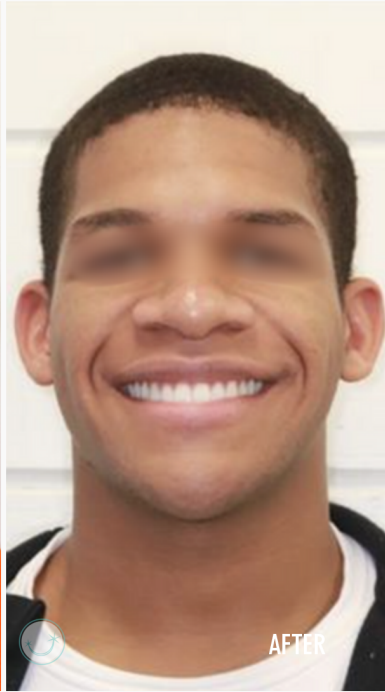
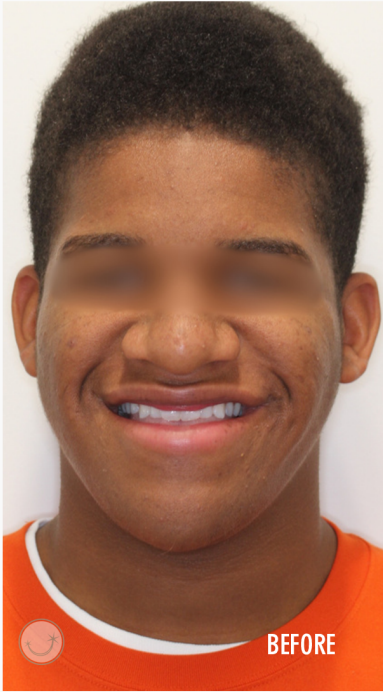


Double jaw surgery to correct anterior open bite

Patient Examples

1

The maxilla was moved down and forward to increase incisal show upon smiling and decrease the amount of backward mandibular movement needed. The mandible was moved back with counterclockwise rotation.



2

Asymmetry to the patient's right



3

Open bite correction



4

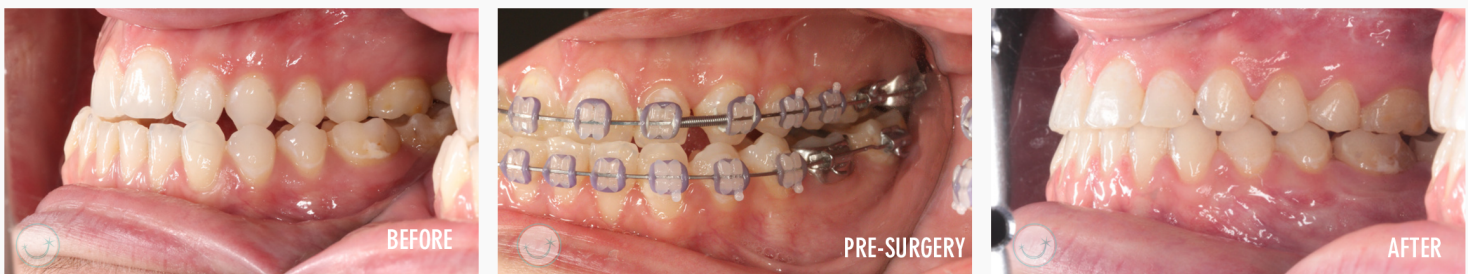
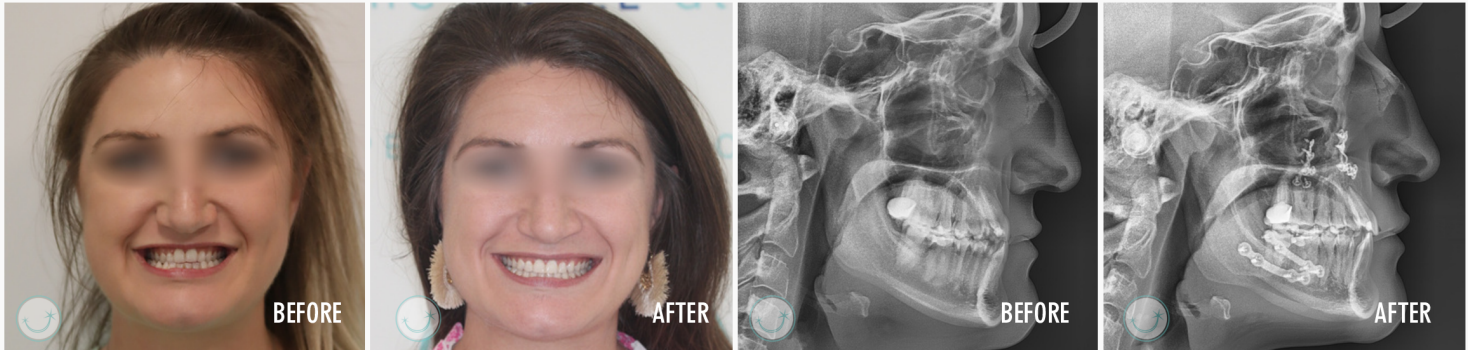
Class II correction



Patient Examples

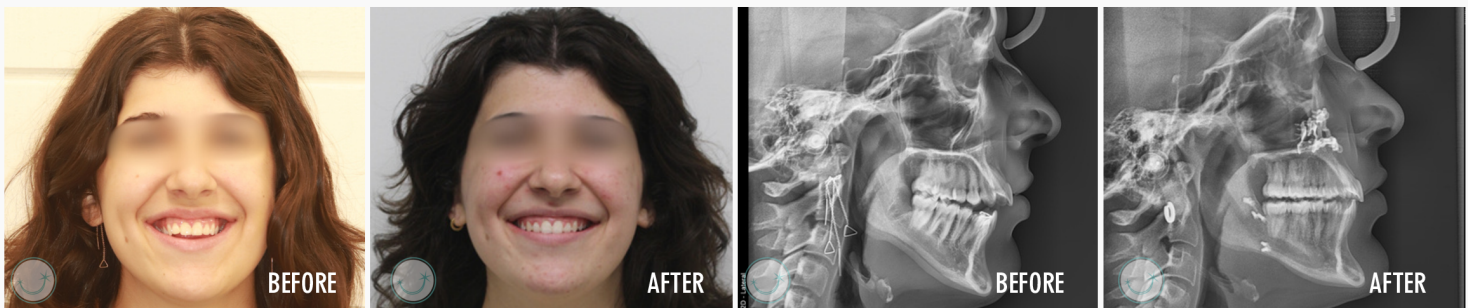
5

Patient presented with anterior and posterior crossbites. She had surgery to widen and move her maxilla forward. Her mandible was also moved backwards to achieve this result.



6

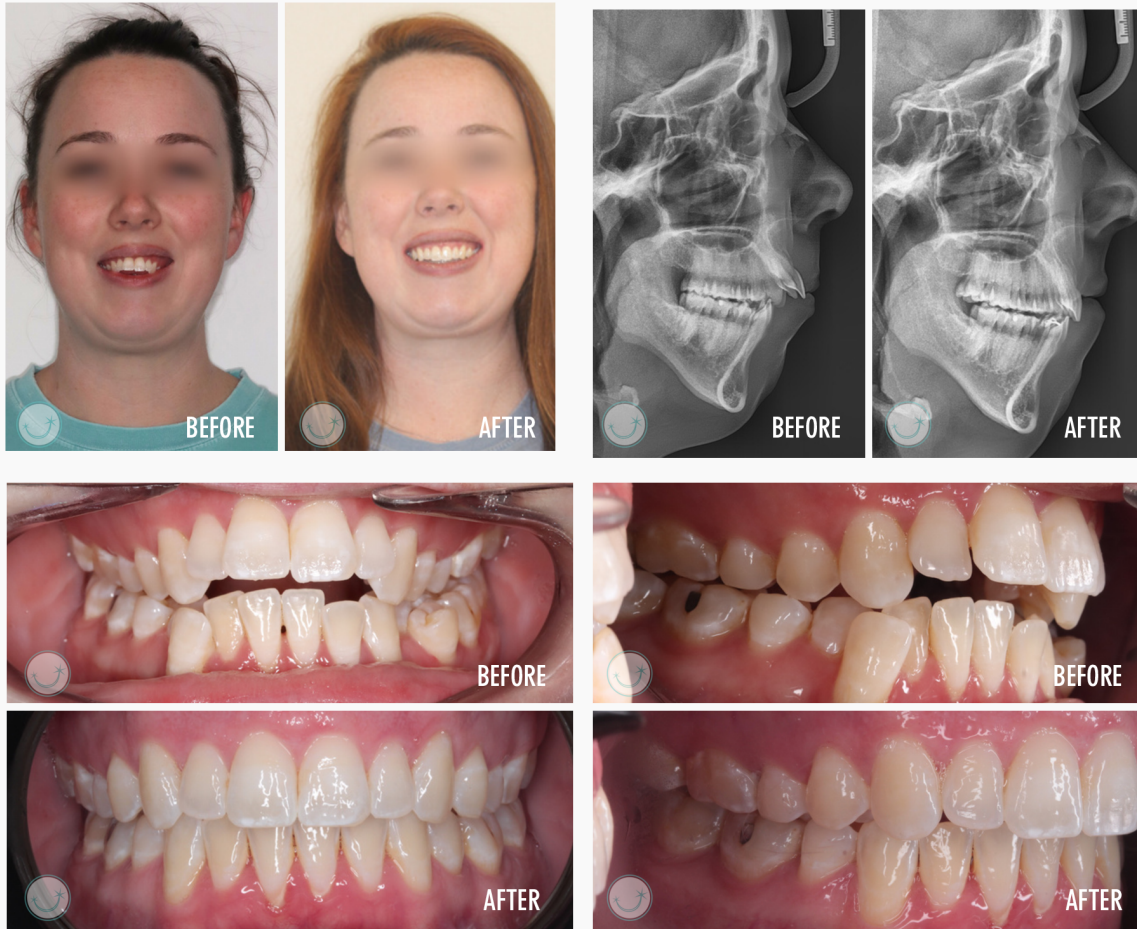
Patient presented with a posterior crossbite and anterior open bite. During surgery, the maxilla was widened but not moved inferiorly to prevent excessive gingival display. The open bite was closed via counter clockwise rotation of the mandible.



In some cases, patients may reject a surgery recommendation. When this happens, we work to find an acceptable compromise to still provide stable occlusion with desired esthetics. Below are two cases that would have had an ideal outcome with surgery but were still an exciting orthodontic result!

1

Class II and open bite correction- orthodontics alone



2

Class II correction- orthodontics alone



These are some current cases we are working on! We are so excited for the opportunity to care for these patients and can't wait to see their end result after orthognathic surgery.

1

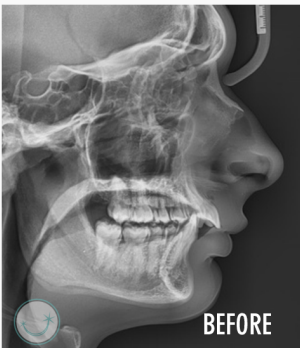
Third molars were removed prior to starting treatment. Our plan is to level and align both arches in preparation for double jaw surgery. There is a 6 mm transverse discrepancy, so the maxilla will be widened and moved forward. The mandible will be moved backward, rotated counter clockwise, and moved the right to correct the asymmetry.



Extraction of third molars must be done at least 6 months prior to surgery.

2

This patient has chosen Invisalign as the treatment modality to prepare him for surgery and finish post-surgery. We will align the arches and perfect the transverse dimension before surgery. We will leave his deep bite with the goal of increasing of his lower facial height during surgery.



3

This patient presented with a retrognathic maxilla. In order to allow for maximum surgical movement, we are removing #4 and #13 to decompensate the maxillary incisors. From here, the maxilla will be moved forward to correct the anterior crossbite and improve her profile.



Did you know we are able to treat surgical cases with Invisalign?! At our office, patients truly have a choice in how they proceed with orthodontic care in conjunction with surgery.

Doctor's Corner

Summer has almost come and gone- wow what a blur! I have enjoyed hearing what our patients have been up to. Lots of travel, water parks, ice cream and forgetting that homework exists! While this time of year is pretty busy for us at the office, we are so grateful to all get a week off to enjoy the season and spend time with family. I am always reminded by the tourists this time of year just how lucky we are to live in this awesome part of the state and country. Everyone's vacation is our home!

In May, a few of us from the office attended the American Association of Orthodontists meeting in New Orleans. It was a great opportunity to learn and grow as a team! Always fun to ride with your team and learn about the music that everyone prefers. Turns out I was the only Swiftie in the car, so I got outvoted! Hope everyone is geared up and ready for the start of a new school year with fresh tans and grateful hearts. At 50, we sure are!

Dr. Maggie Grissom

Diplomate, American Board of Orthodontics



A few recent favorite books of mine!

Hello Beautiful

By: Ann Napolitano

The Heiress

By: Rachel Perkins

Angels and Demons

By: Dan Brown

Strickland Happenings



As Dr. Maggie mentioned, our leadership and marketing team had a great time at the AAO meeting hosted in New Orleans. It was so awesome to learn about new procedures, refresh our customer service skills, and develop our leadership team. We're excited to bring fresh ideas back to our team and improve the experience for our patients!

We also had the opportunity to update our team photos. It's always a good time to see everyone add those final touches to be photo-ready!

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Military
Teachers

Thank you for ALL that you do!
We appreciate you!

LUNCH & LEARN

Ankylosis Why 7-9? Retention
Phase I / Phase II Surgery

Other topics available as well

Email community@stricklandorthodontics.com
to schedule a Lunch & Learn for CE credit.
We'd love to meet with your team!

STRICKLAND
ORTHODONTICS

PROFESSIONAL
PARTNERSHIPS

Thank you for trusting us with your smile! To show our appreciation, we're offering all dental office team members a special discount on orthodontic treatment. We love creating amazing results in a fun, positive environment, and we want you to experience our care firsthand. We hope this makes it easy to confidently recommend us to your friends, family, and patients.



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