



## Potential Risks And Limitations Of Orthodontic Treatment

To Our Patients:

As a rule, excellent orthodontic results can be achieved with informed and cooperative patients and parents. Successful treatment is a "team effort"- the patient, parents, orthodontist, and his staff all working together. Thus, the following information is routinely supplied to anyone considering orthodontic treatment in our office. While recognizing the benefits of a pleasing smile and healthy teeth, you should also be aware that orthodontics treatment, like any treatment of the body, has some inherent risks and limitations. These are seldom serious enough to forego treatment, but should be considered in making the decision to wear orthodontic appliances. Please feel free to ask any questions about this information at the pretreatment consultation.

Decalcification (permanent white marking of the enamel), decay, or gum disease, with or without bone loss, can occur if patients do not brush their teeth properly and thoroughly during the treatment period. Excellent oral hygiene and plaque removal is a must! Sugars and between meals snacks should be minimized. To help you prevent any dental problems from occurring, we recommend that you see your dentist at regular six month intervals or sooner, depending on your oral health requirements and their recommendations.

Some teeth have a slight tendency to rebound to their original positions after orthodontic treatment. This is called relapse. Very bad bites have a higher tendency to relapse and the most common area for relapse is in the area of the front teeth. After braces are removed, retainers are placed to minimize relapse. Excellent cooperation in wearing these appliances is vital. We will make our correction to the highest standards and, in some cases, over-correct, in order to minimize the rebound tendencies. When retention is discontinued, some relapse is still possible. This is considered a normal part of the aging process. Sometimes, additional treatment is necessary to correct problems that occur after original treatment has been completed.

On rare occasions, the nerve of a tooth may become non-vital during treatment. The nerve of a tooth that has been traumatized from a deep filling or even a minor blow can die over a long period of time, with or without orthodontic treatment. An undetected non-vital tooth may "flare-up" during orthodontic movement, requiring endodontic (root canal) treatment to maintain it.

In some cases, the root ends of the teeth may become shortened during treatment. This is called root resorption. Under healthy circumstances, the shortened roots are no disadvantage. However, in the event of gum disease later in life, root resorption could reduce the longevity of affected teeth. It should be noted that not all root resorption arises from orthodontic treatment. Trauma, cuts, impaction, endocrine disorders, or unknown causes can cause root resorption. Tooth loss or bone loss around the teeth can also occur, but is extremely uncommon. Occasionally, but rarely, teeth roots become fused to the surrounding bone. This is called ankylosis. If this occurs, teeth cannot be moved with orthodontic appliances and may need to be removed as part of the treatment.

Although it is rare, there is also a risk that problems may occur in the temporomandibular (jaw) joints (TMJ). Tooth alignment or bite correction (equilibration) usually improves tooth-related causes of TMJ pain, but not in all cases. Treatment of this condition may take several courses and can be very simple or become quite complex. Jaw joint pain may need to be treated as a medical disorder and may not necessarily be a dental disorder.

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Occasionally, a person who has grown normally and in average proportions may not continue to do so. If growth becomes disproportionate, the jaw relations can be affected and original treatment objectives may have to be reevaluated. Skeletal growth "disharmony" is a biological process beyond the orthodontist's control, and may require

jaw surgery to reestablish jaw "harmony". Growth changes that occur after active orthodontic treatment may adversely alter the treatment results previously obtained.

Many bad bites are the result of a discrepancy in the relationship of the skeletal parts (upper and lower jaw bones), and/or may be combined with dental (tooth) irregularities. Therefore it may be necessary to combine orthodontic treatment with jaw surgery to reposition skeletal parts to a normal position and make it possible to achieve a stable and/or lasting result. Patients that undergo orthodontics along with jaw surgery have the potential of experiencing any of the consequences that orthodontic patients might have and, in addition, the consequences that confront any patient having surgery performed in a hospital.

The total time for treatment can be delayed beyond our estimate for various reasons. We will do everything possible to avoid causing this to happen and hope that our patients will do the same. The **Primary causes of prolonged treatment** are lack of patient cooperation, including poor elastic wear, not wearing headgear as instructed, broken appliances, and failed appointments. All of these are extremely important factors which would lengthen treatment time, affect the quality of the results, and/or be cause for additional charges. For your benefit, please help to avoid this from happening! Non-compliance by the patient or failure to pay for services rendered in a timely manner may result in Dr. Schumacher electing to withdraw from treatment.

Headgear instructions must be followed carefully. A headgear that is pulled outward while the elastic is attached can snap back and could injure the face or eyes. Patients are warned not to wear their headgear during horseplay, competitive activities, or while engaging in sports activities. If a headgear is required in your treatment, be sure to release the elastic force before removing the headgear from the braces. Break-a-way safety modules are incorporated in most of our traction devices to minimize possible injury.

Due to the wide variation in the size and shape of teeth, or missing teeth, achievement of an ideal result (for example, complete closure of spaces) may require restorative dental treatment after orthodontic treatment has been completed.

In regard to ceramic braces (clear), there have been some incidents of patients experiencing damage to or wear to the teeth when wearing or removing ceramic braces. Chipping, breaking or the appearance of stress lines in the enamel upon removal was more common during the 1980's. Today, with newer bracket designs & instrumentation, these risks are minimal. Fractured brackets result in remnants which might be harmful if swallowed.

This letter attempts to inform you and/or your parents of the general procedures and potential difficulties and problems associated with orthodontic treatment. The success of your individual treatment depends upon a close professional working relationship with Dr. Schumacher and his staff. We will make every effort to discuss and explain the specifics of your treatment in detail. Understanding and cooperation are essential to obtain the results that both you and Dr. Schumacher seek. Again, we welcome you into our practice and we look forward to providing you the highest quality of orthodontic care achievable.

I/we have read both sides of this document, understand it, and consent to treatment.

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PATIENT NAME

DATE

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RESPONSIBLE PARTY SIGNATURE

DATE