PREVENTIVE ORTHODONTIC TREATMENT:
Dental services intended to prevent the development of a malocclusion by maintaining the integrity of an otherwise normally developing dentition. Typical services include dental restorations, temporary prostheses (space maintainers) to replace prematurely lost deciduous teeth, and removal of deciduous teeth that fail to shed normally when this will allow the permanent successors to erupt satisfactorily.

INTERCEPTIVE ORTHODONTICS:
An extension of preventive orthodontics that may include minor local tooth movement in an otherwise normally developing dentition. It may include such procedures as the redirection of ectopically erupting teeth, correction of isolated dental crossbites or recovery of minor recent space loss where overall space is adequate.

The key to successful interception is early intervention in the incipient stages of a developing problem. The presence of complicating factors such as skeletal disharmonies, overall space deficiency, or other conditions requiring present or future comprehensive therapy contraindicate independent interceptive therapy.

Early phases of comprehensive therapy may utilize some procedures that might also be used interceptively in an otherwise normally developing dentition, but such procedures are not considered interceptive in those applications.

SERIAL EXTRACTIONS:
A program of selective extraction of deciduous and sometimes permanent teeth over a period of time, with the objective of relieving crowding and facilitating the eruption of remaining teeth into improved positions. Close supervision and control of ensuing eruption is essential, because overclosure of the spaces and other sequelae can be expected in a significant number of cases. Comprehensive orthodontic treatment is almost always also required for space management, control of the autonomous tipping usually induced by the procedure, and for other malrelationships that commonly accompany these conditions.

Ref: AAO Orthodontic Glossary 1981

SUGGESTED READINGS:
Early Orthodontic Supervision by Donald Joondeph (Orthodontic Dialogue, Vol. 1, No 2, Summer1989)

Extraction or non extraction? The active role of the general practitioner
By C. Moody Alexander and Joe D. Jacobs

Part 1. Treatment coordination and timing (Oral Health Vol. 69 No. 2 (Feb 1979, p.33-34))
Part 2. Eruptive guidance and space maintenance (Oral Health Vol. 69 No. 4 (April 1979, p.40-43))
Part 3. Space regaining (Oral Health Vol. 69 No. 5 (May 1979, p.56-58))
Part 4. Indications, procedures and contraindications (Oral Health Vol. 69 No. 6 (June 1979, p.52-55))
THE ETIOLOGY OF MALOCCLUSION
PREVENTIVE AND INTERCEPTIVE ORTHODONTICS

Mc Gill Dentistry 3rd year Lecture — Jules E. Lemay III d.d.s., f.r.c.d. (C)

CLASSIFICATION OF ETIOLOGIC FACTORS

Extrinsic Factors (General)

1. Heredity (the inherited pattern)
2. Congenital defects (cleft palate, torticollis, cleidocranial dysostosis, cerebral palsy, syphilis, etc.)
3. Environment
   a. Prenatal (trauma, maternal diet, maternal metabolism, German measles, etc.)
   b. Postnatal (birth injury, cerebral palsy, TMJ injury, etc.)
4. Predisposing metabolic climate and disease
   a. Endocrine imbalance
   b. Metabolic disturbances
   c. Infectious diseases (polio, etc.)
5. Dietary problems (nutritional deficiency)
6. Abnormal pressure habits
   a. Abnormal suckling (forward mandibular posture, non physiologic nursing, excessive buccal pressures, etc.)
   b. Thumb and finger sucking
   c. Tongue thrust and tongue sucking
   d. Lip and nail biting
   e. Abnormal swallowing habits (improper deglutition)
   f. Speech defects
   g. Respiratory abnormalities (mouth breathing, etc.)
   h. Tonsils and adenoids (compensatory tongue position)
7. Posture
8. Trauma and accidents

Intrinsic Factors (Local)

1. Anomalies of number
   a. supernumerary teeth
   b. missing teeth (congenital absence or loss due to accidents, caries, etc.)
2. Anomalies of tooth size
3. Anomalies of tooth shape
4. Abnormal labial frenum
5. Premature loss
6. Prolonged retention
7. Delayed eruption of permanent teeth
8. Abnormal eruptive path
9. Ankylosis
10. Dental caries
11. Improper dental restorations

Ref.: Graber 1961