

由齒顎矯正看人生觀!!

甚麼是齒顎矯正呢?

與人生又會有何關聯呢?

Are you ready !!!

您準備好了嗎?

台北醫學大學口腔研究所 林祥建



Success

引言

- “成功”是對事前，有預先準備的人而說的
- 品質非管制出來的，品質是規劃出來的
- 品質是做出來的

人的成功是偶然乎？

太少了

人生



- 人生誰無死，能瀟灑走一回，真不簡單。

人生需要藝術，活著才有意義“生生氣息”

彩色人生

生活



生活 = 生與活

生 = 與藝術(廣義的)活在一起

活----- 取走藝術 = 植物人-----不是嗎?

美容外科

改頭換面-----談臉型改造術

牙科審美-----正確齒顎矯正亦可改變人生，
照樣能使人生黑白變彩色

俗語說“人不知美醜，則一切相安無事”---外型
但對臉部的美白卻耿耿於懷，
讓人有點顛倒本末的感覺

孩子不要輸在起跑點

但又有多少人知道何謂起跑點呢？

雜誌——健康生活家

西方名言：美麗只到皮膚般深
醜卻可深到骨子裡

“臉部則是人體美的焦點”

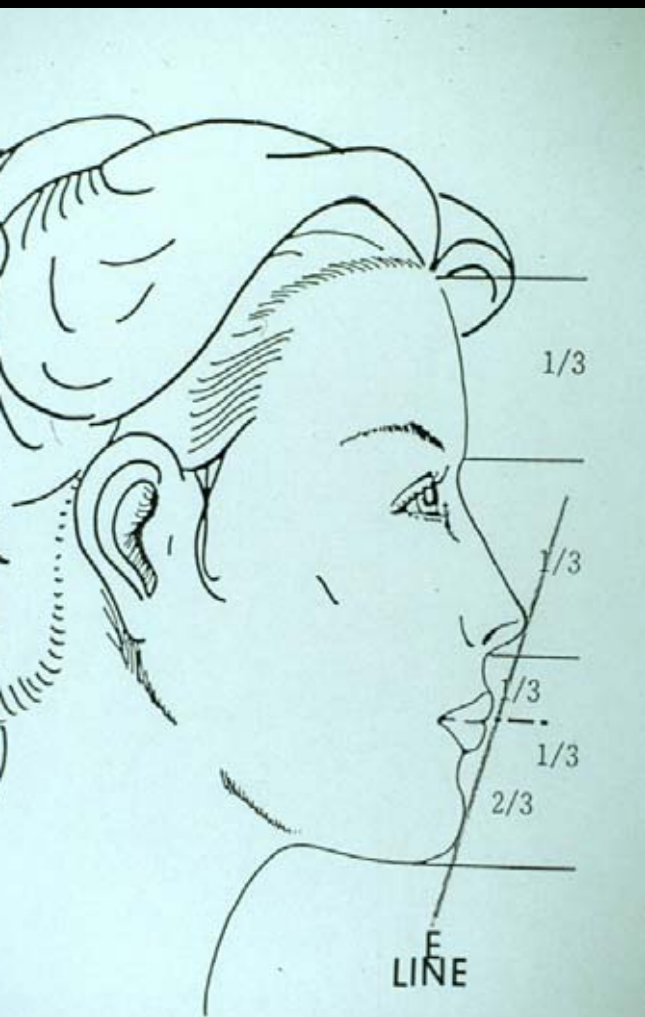
時下

許多愛美者，希望透過美容科技，（顱顏整修之外科美容）達到“重新出發”，“改變命運”的捷徑

許多人不知道有些是不需挨這些刀的

齒顎矯正可達到某些程度的協調美

協調美-----東方美

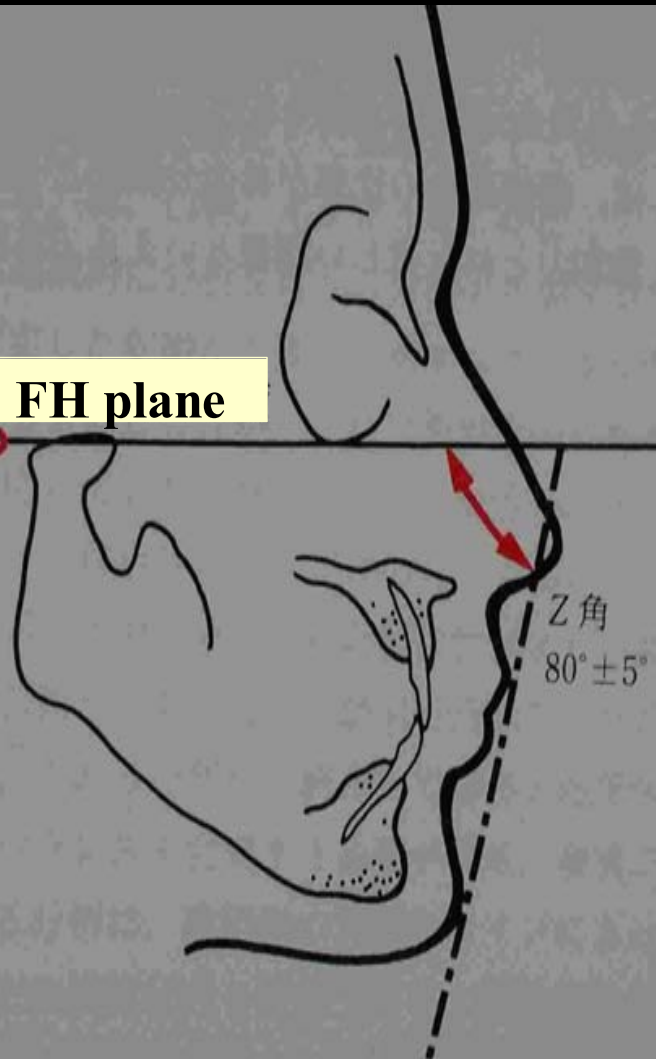


Beautiful face or harmony



**Beauty is beauty
True is true**

Esthetic line



FH plane

Z角
 $80^{\circ} \pm 5^{\circ}$



mid.of S



Z-angle

Holdaway line

S-Line

E-line

請注重口腔健康

預防重於治療

蛀牙(齲齒)-----囊腫等

牙周病-----植牙,假牙等

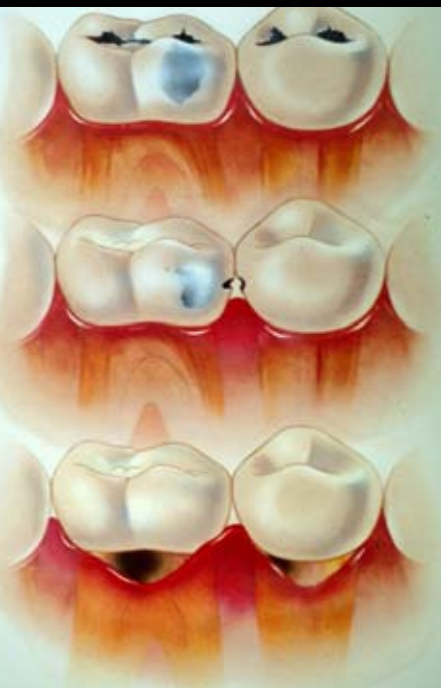
顛顎關節症(偏頭疼)-----關節磨耗

齒列錯咬,下顎偏移(脊柱彎曲).骨刺等

不要以為牙齒有 32 顆很多,無所謂

運氣不好會出大問題的

牙齒與口腔疾病關係



矯正非只排牙

其目的是：

1. 矯正後其是較有協調性的外貌
2. 整齊的齒列排列
3. 具有咬合功能---關節正常
4. 健康的口腔組織(牙齦組織)

以下提供一些例子,讓大家都腦力激盪一下

15Y6M



IVA-15Y6M



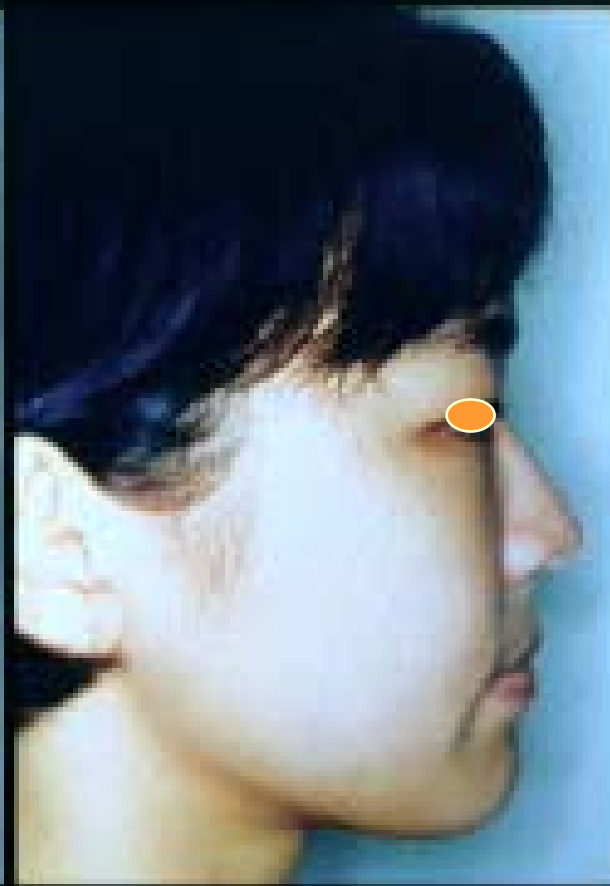
After retention(19Y10M)



19Y10M



Facial changes



症例:

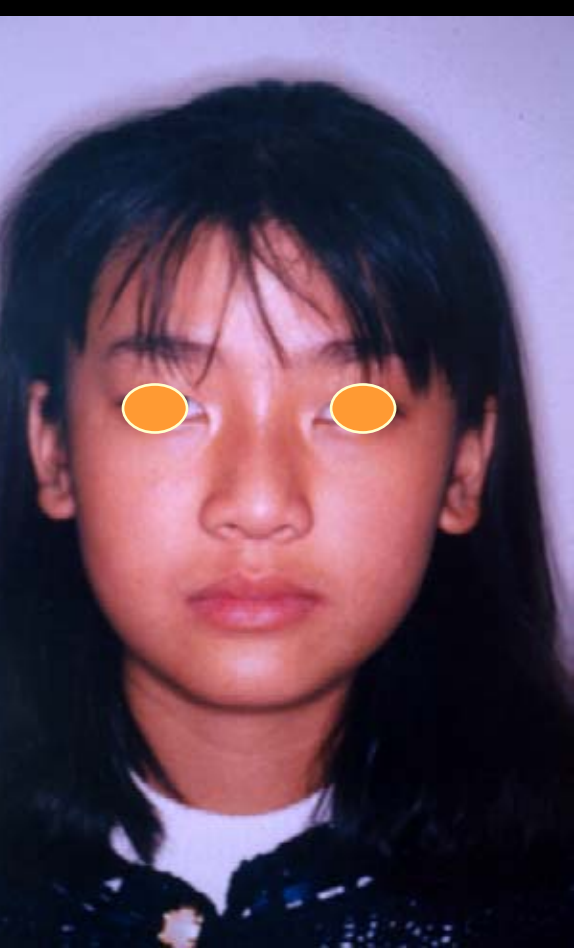
10Y7M



IIIC-10Y7M



12Y (treated 1Y5M)



IVA-12Y



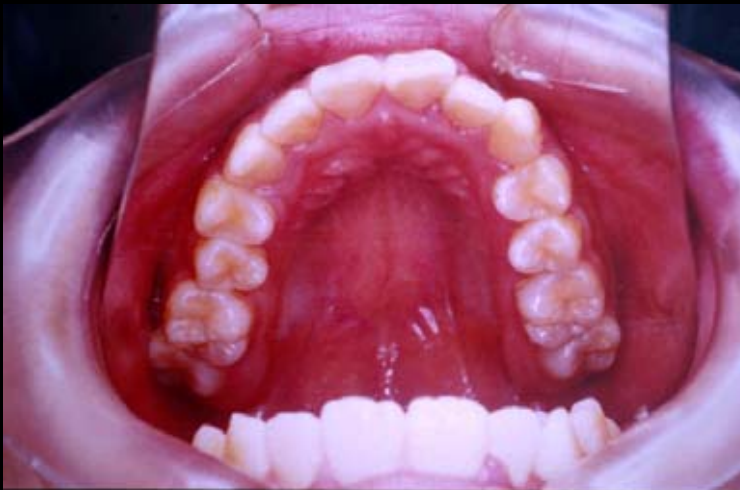
Facial changes



15Y9M



IVA-15Y9M



18Y(2Y3M)



IVA (18Y)

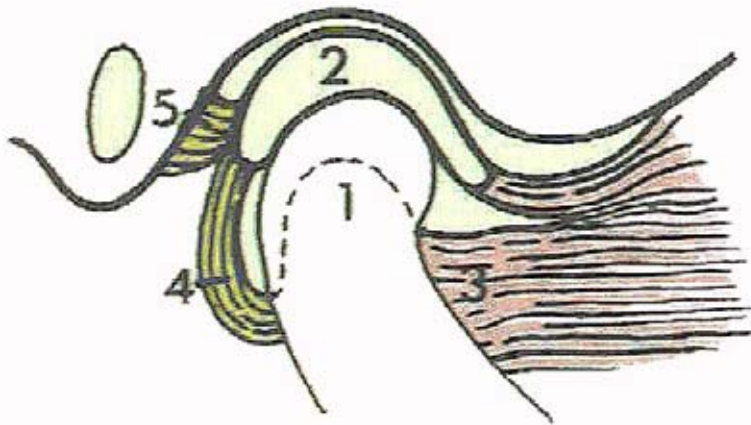


Facial E-line Change(15Y9M~18Y)

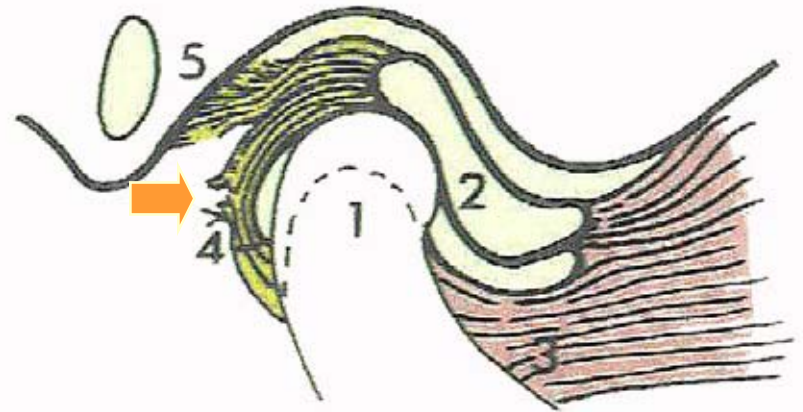


關節症會影響姿勢

介紹



Normal positioning of the temporomandibular joint. Note the mandibular condyle (1) and articular disk (2) and their relation to the Lateral pterygoid (3), the Posterior ligament (4) and the retrodiscal tissue (5).

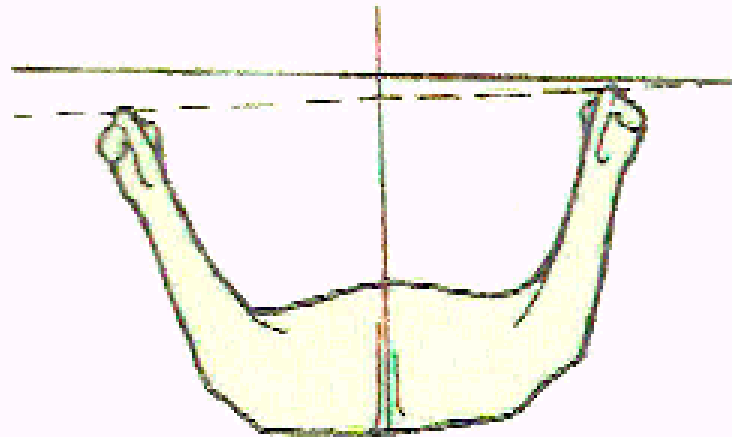


Anterior disc displacement greatly influenced by an abnormally anterior-rotated ilium. This may cause tears in the posterior ligament and the retrodiscal tissue.

正常的關節

不正常的關節

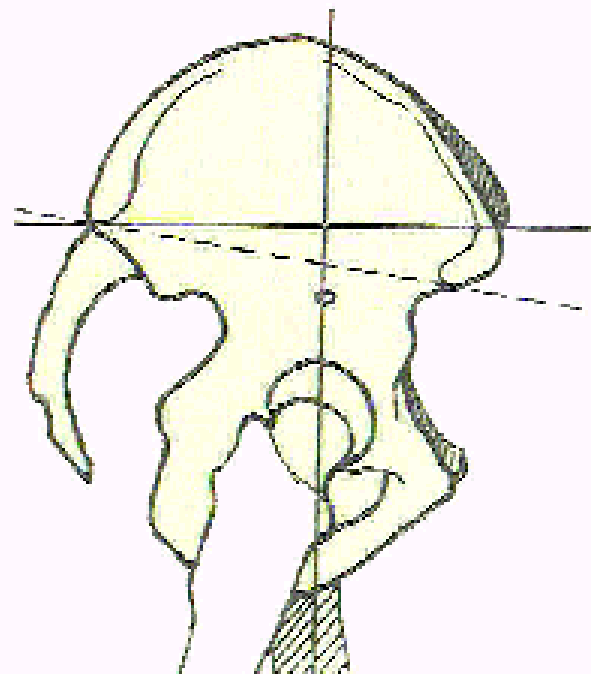
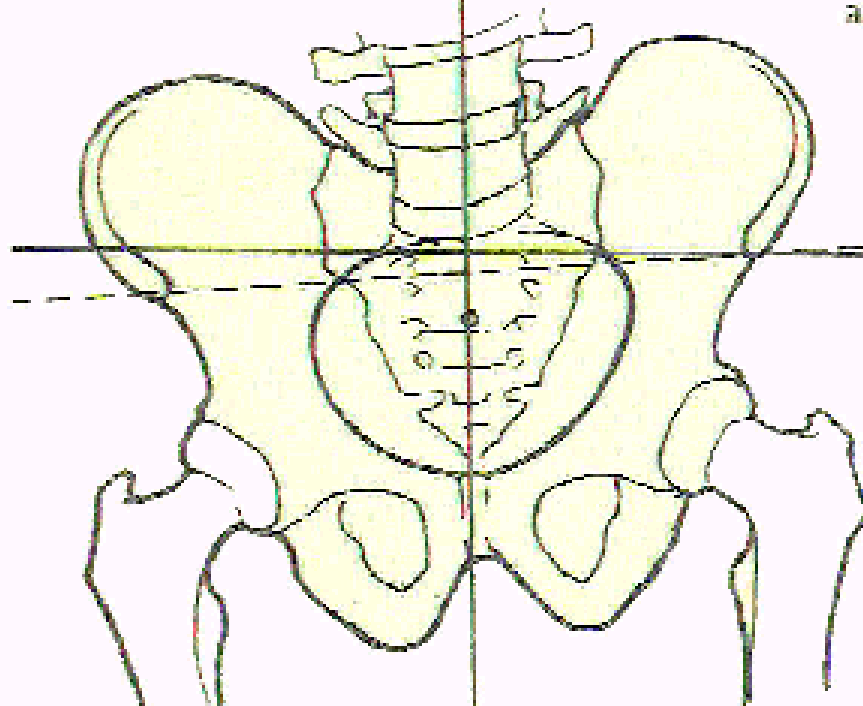
POSTURAL INFLUENCES ON TMJ



The line drawn between the bases of the Posterior superior iliac spine and the Anterior superior iliac spine establishes the normal pelvic angle (solid line). Female 5–10%. Male 0–5%

Pelvic movement (dotted lines) off the midsagittal and coronal planes (solid lines) causes compression of the mandible.

The abnormal right, anterior rotation of the ilium, as shown, causes an anterior mandibular rotation.



TMJ by attrition



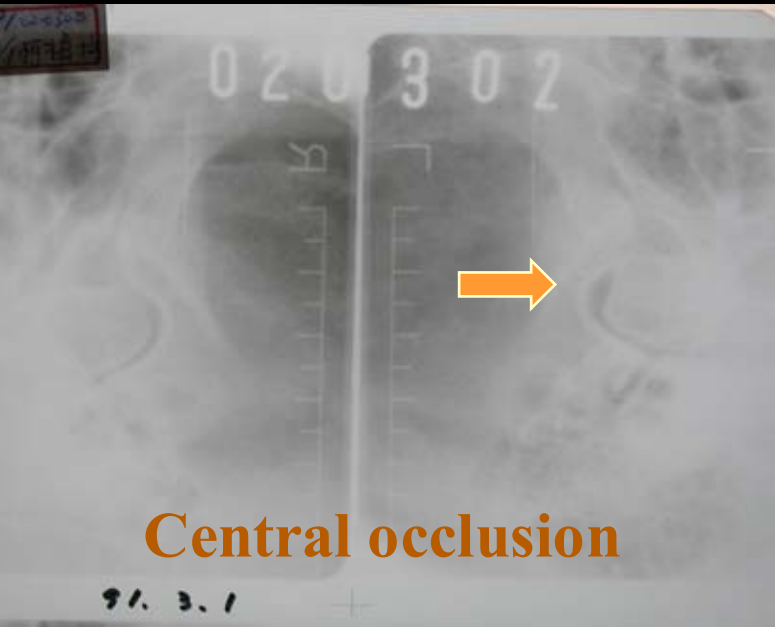
Patient had been treated by other orthodontist.

Intral-oral view

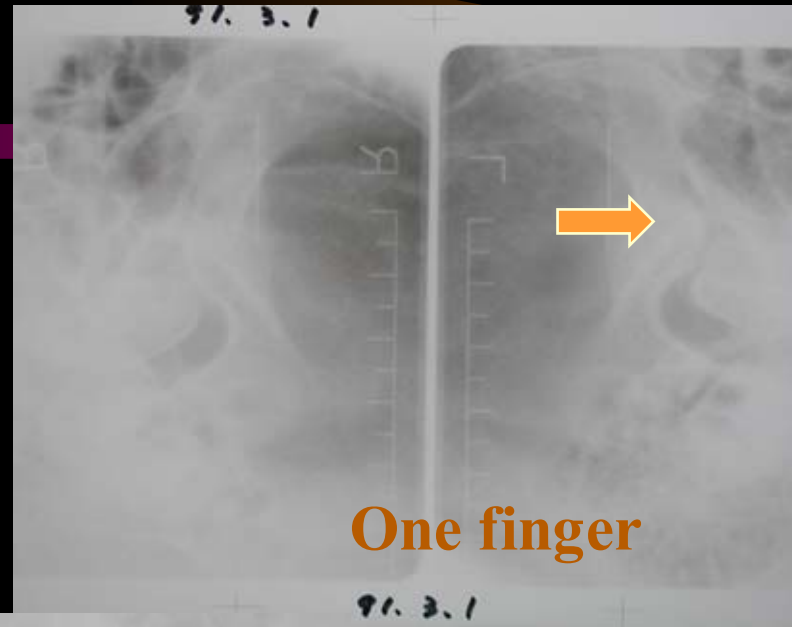


Deep-bite and anterior teeth axis are caused condyle posterior overload

TMJ by attrition



Central occlusion



One finger



Maximum open

此患者現在
治療中，結果
待下回分解

待再看其
他病例

Occlusion and scoliosis



Intral-oral view



Scoliosis



Out look of patient



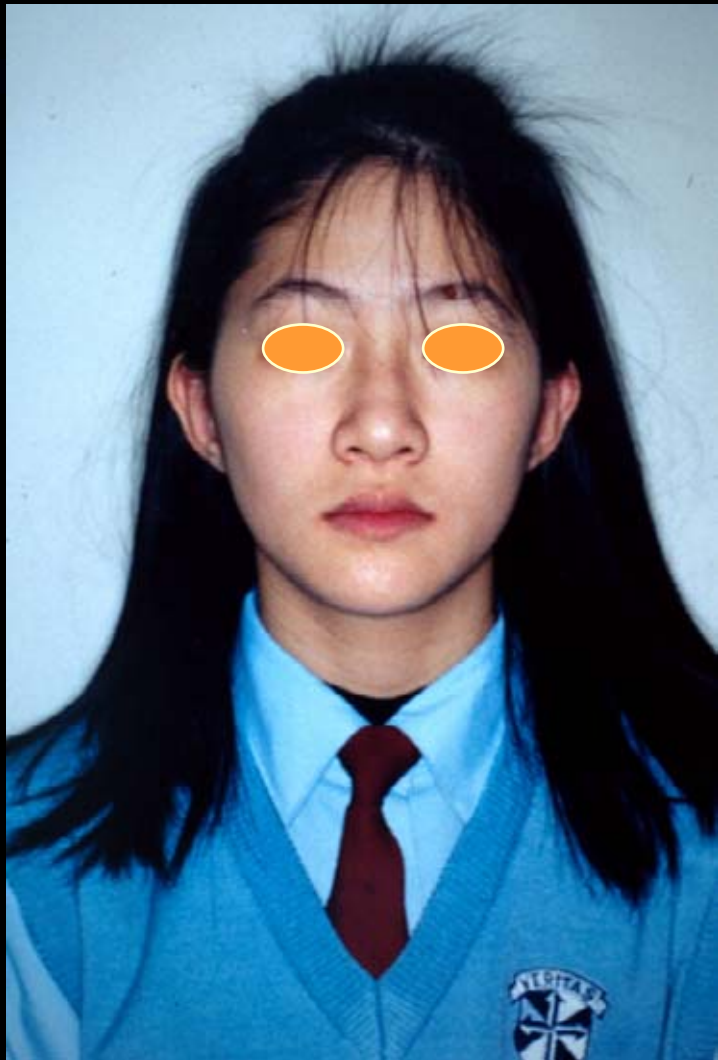
Intra-oral view



Posture



After 2Yrs treatment



Intra-oral view

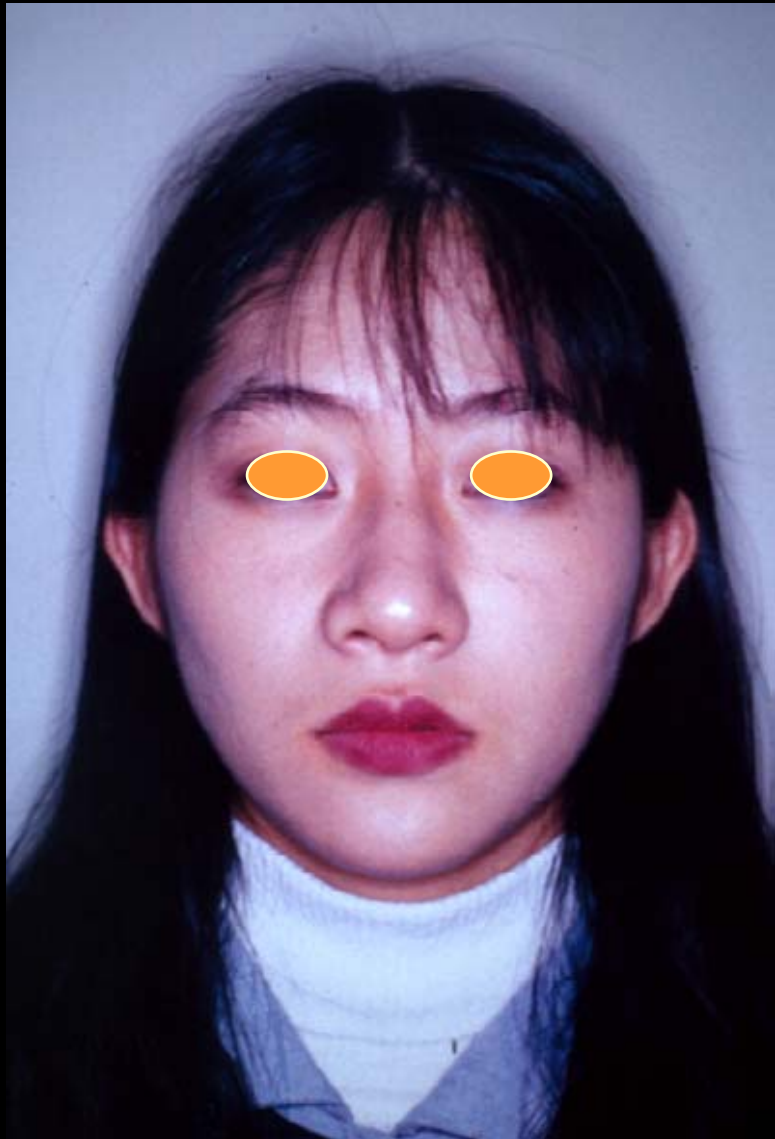


Posture Change



After 2 yrs treatment, the standing posture change

Outlook of after-retention (17Y)



Intra-oral view



After-retainer (17Yrs-old)



The front view



13Y



15Y



17Y

Profiles change



13Y



15Y



17Y

例

Outlook of profile

9Y5M



Intra-oral view



9Y5M



Pre-apical X-ray of central incisor & consultant's paper

黃士賢 先生
 女士於 20 年 2 月 9 日

治療，經檢查後，其牙周治療進度如下：

者標示(√)，或已完成者標示(○)

治療	—— 粘膜齒齦整形術(Mucogingival Surgery)
	—— 牙根切除術(Root resection)
	—— 組織切片檢查(Biopsy)
	—— 牙齒臨時固定術(Splinting)
	—— 牙根去除過敏治療(Desensitization)
Control)	—— 患者未繼續治療(Patient inactive)
& Root Planing)	—— 最後再檢查評估(Final re-examination)
stment)	—— 手術後治療(Post-surgical Tx.)
	—— 定期追蹤(Maintenance)

Conclusion) 牙周檢查結果

目：

EPT. 111 Negative
 Mobility = acceptable
 Bone loss, Almost to the apex

建議：

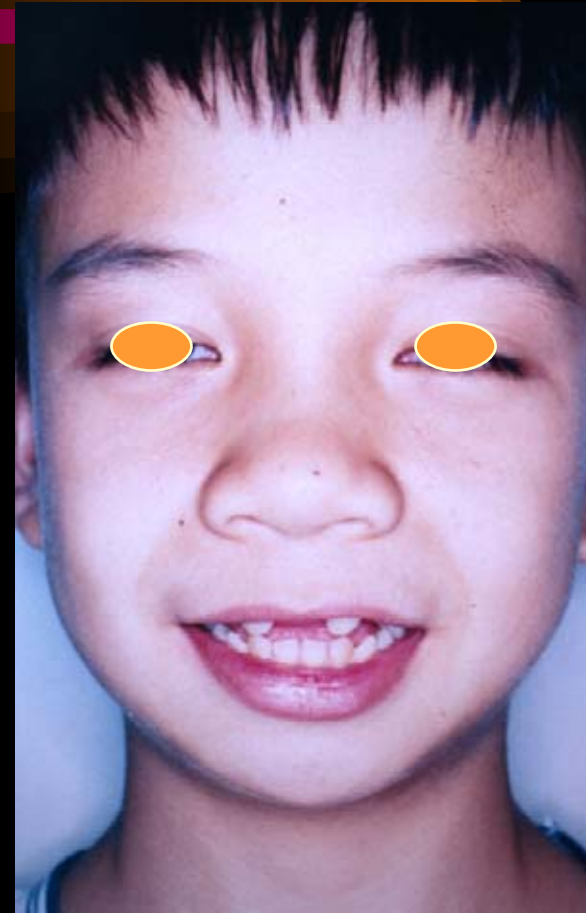
1. ENDO 111 + Splinting (先牙周)
 111 增長 212 牙冠) + FU - 年
 年 月 日 (041)

2. Est. 111 + Ortho. →
 敬上 chance 100%
 有 50%

黃士賢



Outlook of beginning



After 1yr 3 months two upper incisor were lost at one day morning

Intra-oral view



After 1yr 3 months two upper incisor were lost at one day morning



Pre-apical X-ray



Outlook of after-treatment

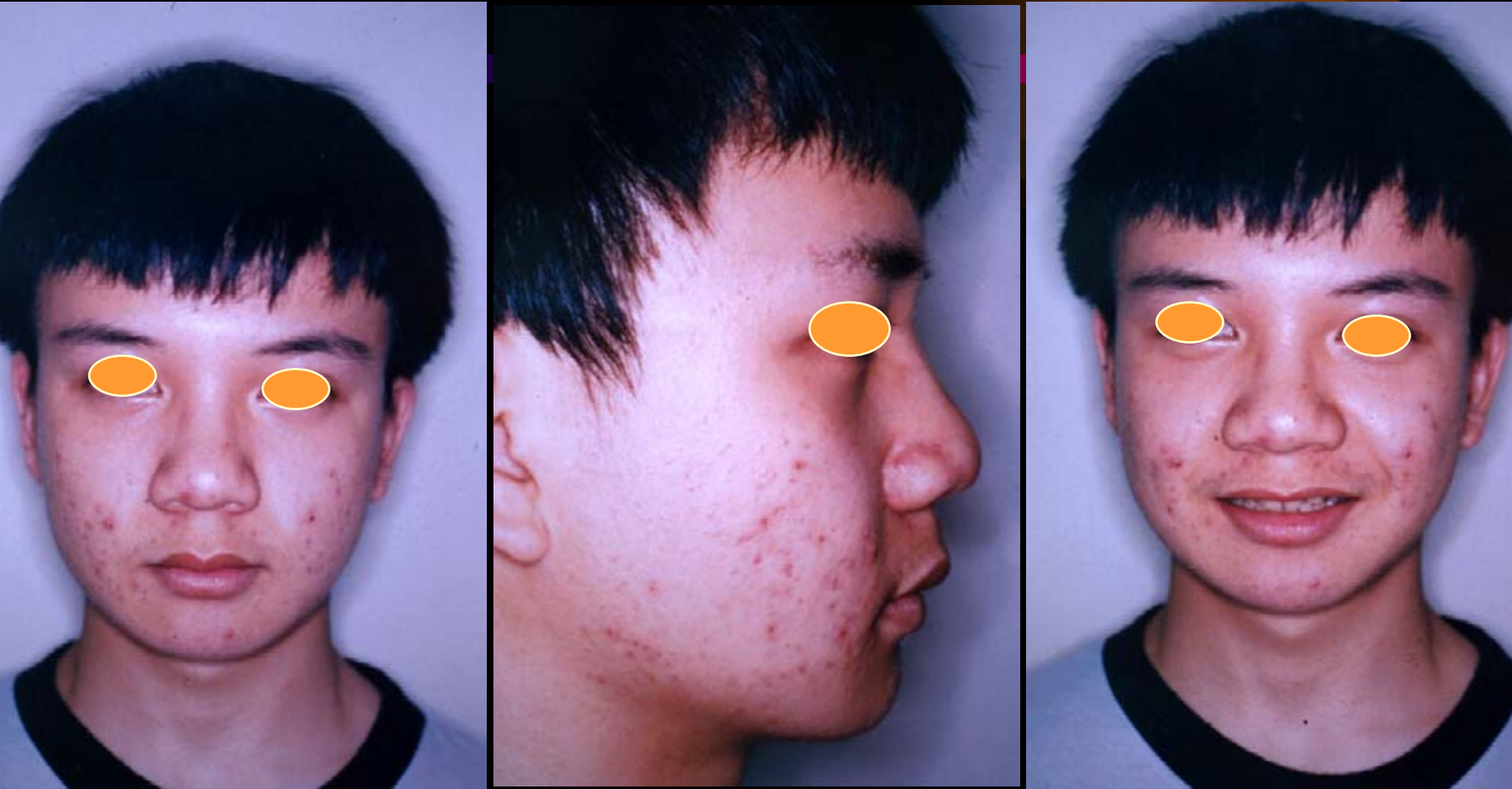


After 3yrs 5 months

Intra-oral view



Outlook of after-retainer



15 Months

Intra-oral view



Pre- ~ finish profiles change



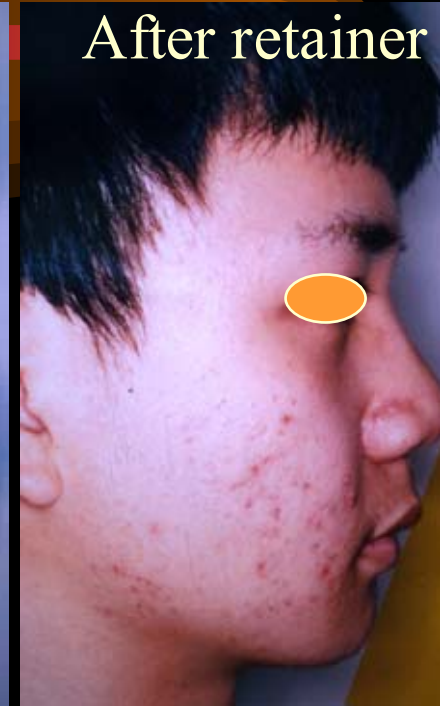
9Y5M



10Y8M



14Y1M



15Y4M

您覺得有變乎!

Case Summary

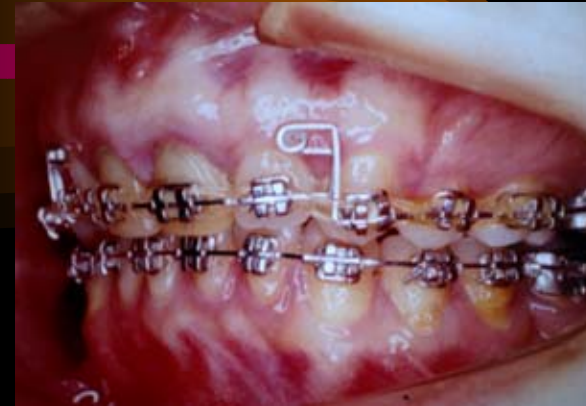
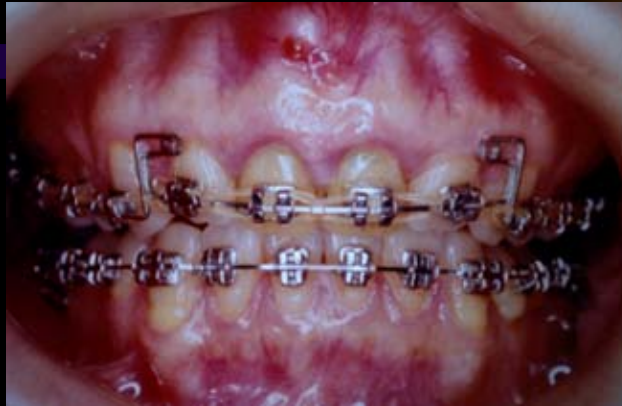
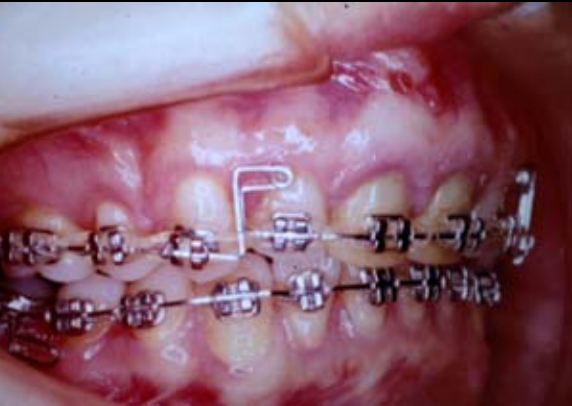
1. 31 yrs old female, has been treated at orthodontic department of Chang Gung hospital for about 2yrs.
2. Upper central incisors has been endo. treated
3. C.C.: Migraine headache
4. Upper jaw, both side 1st bicuspid had been extracted



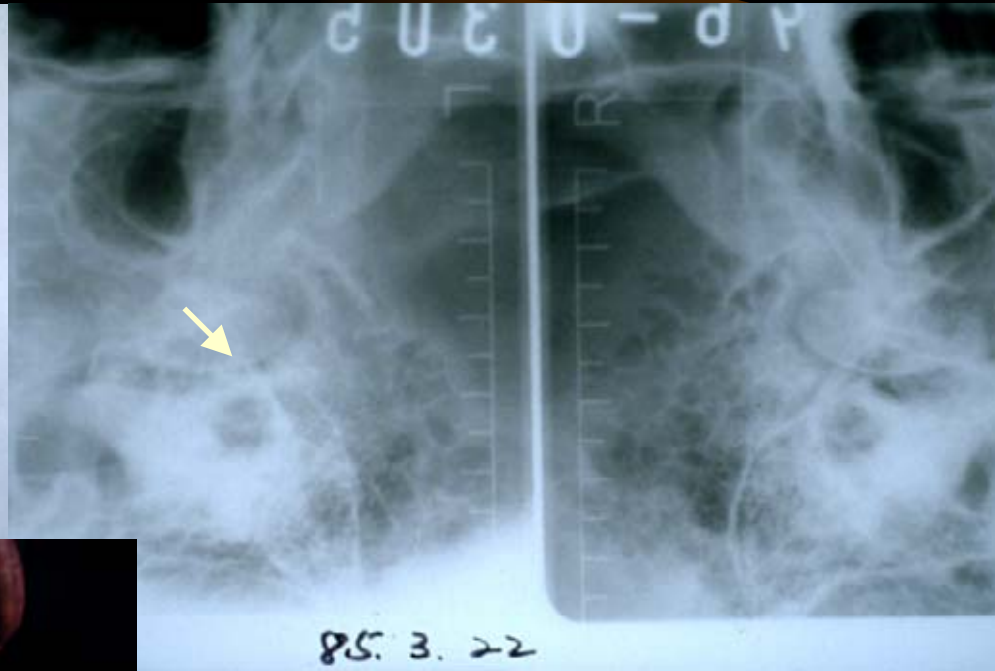
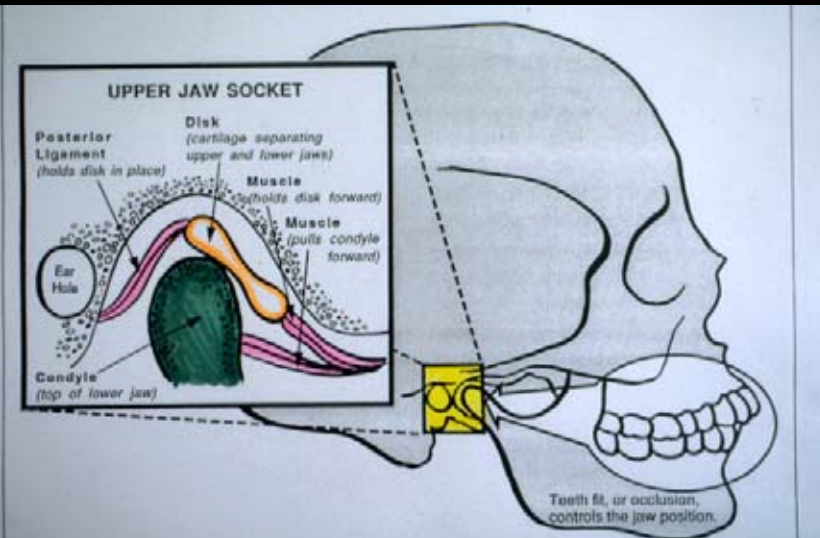
Lateral view



Intra-oral view



TMD

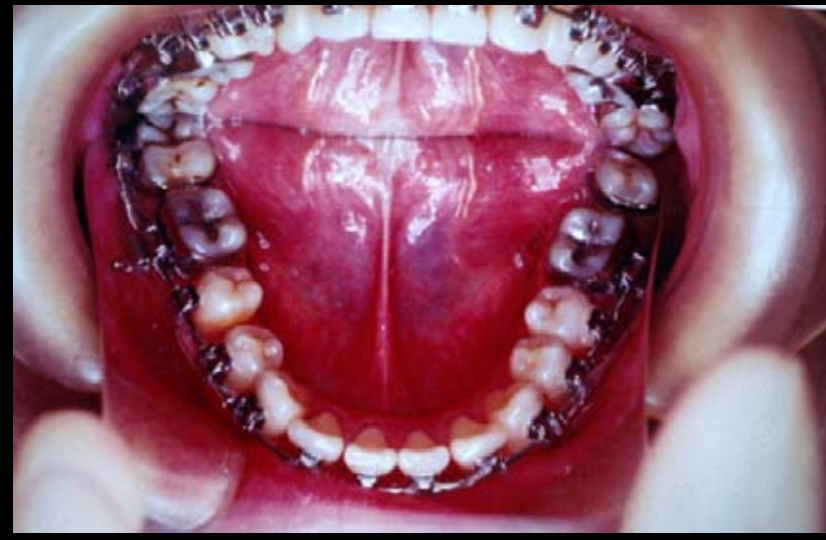


Migraine headache because of condylar posterior overloading

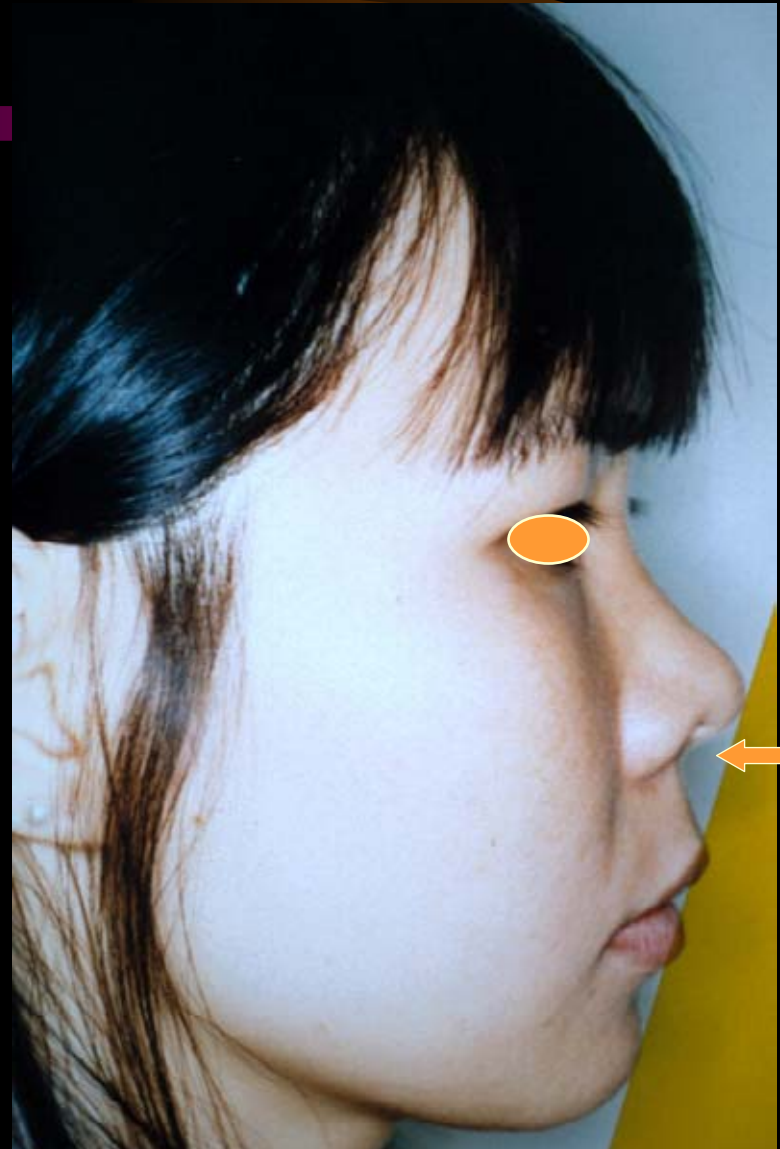
Level arm after 3 Mons



.019x.025 with passive torque and retraction



Nasal angle change



Intra-oral view of after treatment

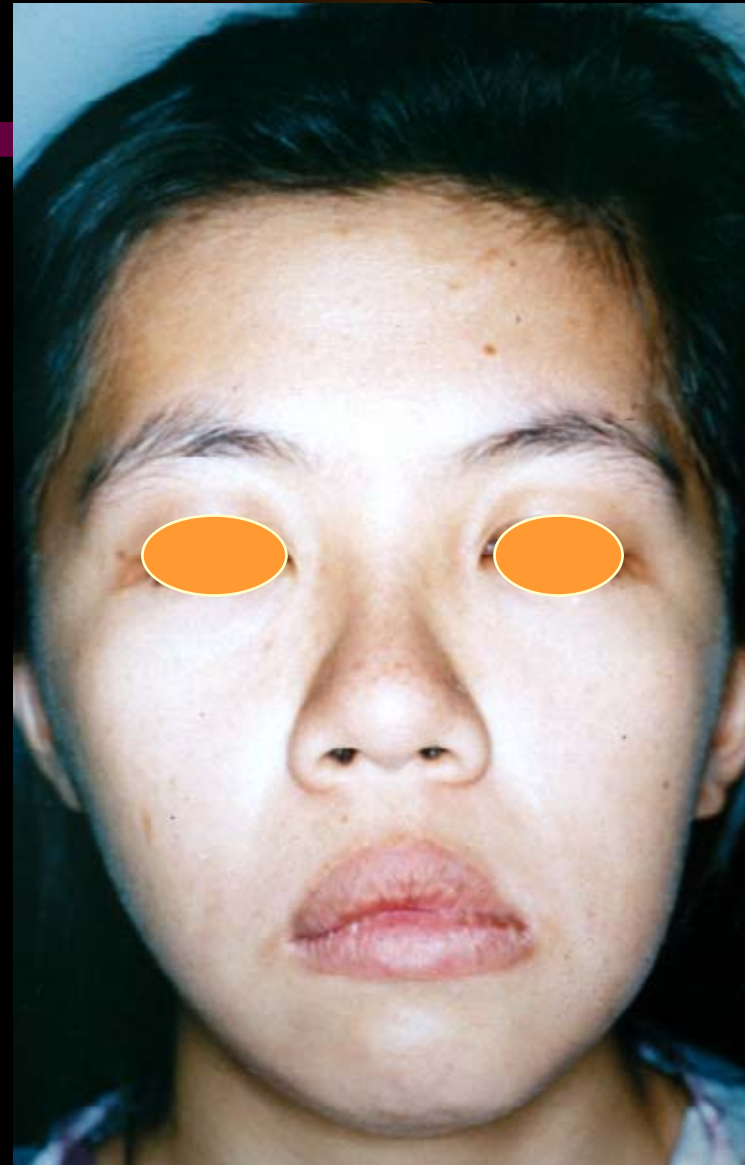


Incisor axis change and free the incisor guide

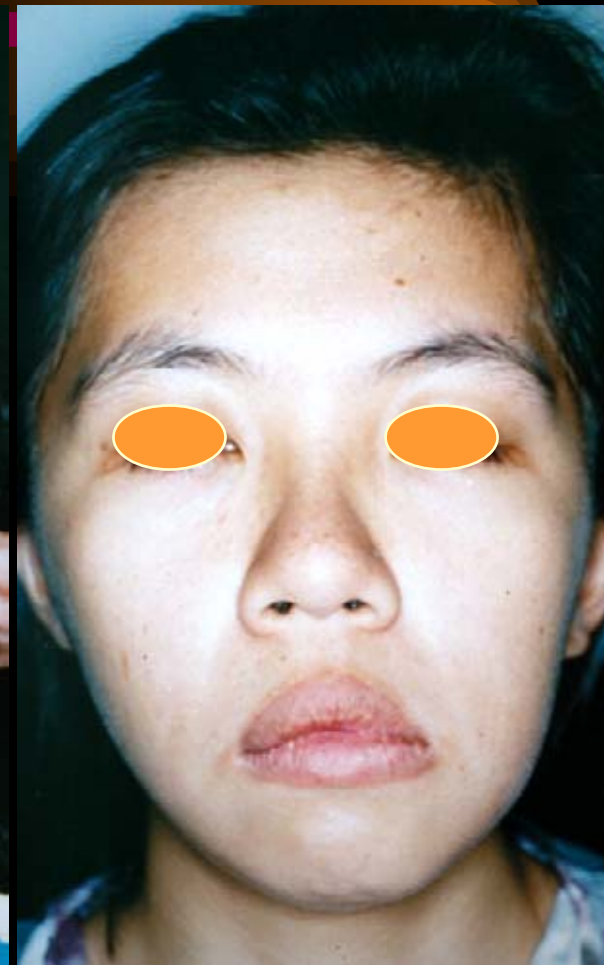


Case Summary

- 1). A 27 yrs old female, Single, refer from implantologist.
- 2). She is very depressed by her sad face and devoid of animation.
- 3). Very terrible mouth, because of many teeth were lost.
- 4). Her mandible is shift to left and lips are shift to left too, many teeth were residual roots.



Facial of outlook



Intra-oral view (27Y)



treat



Intra-oral view (27Y6M)



Refer to GP for endo-treatment & split the right knife ridge



Outlook of post-treatment (2Y6M)



Outlook of intra-oral view of after-treatment



Who says the face is not important.





Outlook of Pre- and after- treatment facial change

Now, she is a married woman

**She has great confidence
and happy in her face after
facial change.**

Oh! I am orthodontist.

總結：（1）

12月天下電子報的調查，約7成2的台灣人認為美是很重要的。自古至今人們都重視相貌，如花似玉，貌似潘安常被提起，奇怪的是我們的教育中，美育卻又未被重視。以上幾個例症介紹，希望能突顯齒顎矯正不只重於牙齒的排列。而牙科的審美觀念，也絕非限制於牙齒。牙科是整體性的。齒顎矯正一定要經過正確診斷，訂定治療目標。試想單單隆鼻就能使人生變彩色。試想我們買衣服都得試穿，做矯正怎能不去了解一下呢？齒顎矯正醫師若能得到患者合作，是能達到合乎審美觀點，改變患者一生呢！

總結：（2）

所以我認為“愛”是有計劃的，有目地的，有期待的。絕非無謂的寵，怕，天底下絕沒有白吃的午餐。我們看到的都是結果。

父母“要做孩子未來的墊腳石，不要於無形中做了他們的絆腳石”

愛真的是藝術，生活於藝術中，真的不容易。是要時時注意的。

人生多美妙



謝謝大家，讓我有機會發表，牙醫在社會上另一功勞

美是大家追求的目標

希望大家有個更好的生活