

Orthodontic Disease:

Disease is defined as a dysfunction of an organ.

In orthodontics disease means: dysfunction of dynamic occlusion caused by wrong angulated / inclined teeth, wrong shape of the upper or lower occlusal curve or wrong angulation of the upper to the lower occlusal plane.

Dynamic dysfunction of teeth / occlusion force the lower jaw, its joints and the acting muscles into a wrong functional position.

Dynamic dysfunction of teeth and occlusion act as lever arms, causing complex destructive reactions and damage or chronic disease of the integrated hardware (teeth, parodontium, temporomandibular joints, TMJ) and software of the sensitive / active network of muscles, nerves and nutrition (blood supply).

Symptoms of orthodontic disease are summed up in the syndrome of CMD,

Craniomandibular Dysfunction:

Dizziness, Visual disorders, Nausea, Vomiting, Blackouts, Loss of consciousness, Staggering gait, Uncertainty of heights, Diminished hearing, Ear noises, Sensitivity to noise, Ear blocking,

Joint: Crepitus, Pain, Limited movement, Excessive movement,

Neuralgia: Facial pain, Head pain, Ear pain, Neck pain

[CMD-Symptoms by H. T. Kelly und D.J. Goodfriend]

CMD-Orthodontics is treating dynamic occlusion and function by means of Fixed Functional Orthodontics, FFO, Bio-Functional Orthodontics, BFO, and Functional Anatomy individually, in contrast to common orthodontics treating facial aesthetics, static occlusion, standardized (wrong) straight occlusion, mainly wrong angulated teeth by means of insufficiently controllable mechanics.

Occlusion

„Occlusion of the teeth means the meeting together of upper and lower teeth.“

Malocclusion

- *„Malocclusion is the term used to describe states in which the occlusion departs from the normal.“*
- *Malocclusion of the dental arches may occur in any one or more of three planes of space.*
- *The best known classification is that evolved by E.H. Angle and refers only to the anterior-posterior dimension.“*

Dynamic Occlusion, Static Occlusion, Functional Occlusion

“ If the teeth occlude well in the intercuspal position (static occlusion) it is quite likely that they will function well, but during dynamic occlusion this is not always the case. The curve of Spee and to a lesser extent, the curve of Monson, are therefore necessary for the teeth to remain in contact during all aspects of dynamic occlusion.”

[J.W. Osborn, Dental Anatomy and Embryology, p.299, Blackwell Scientific Publications,1981, Vol. 1, Book 2]